MISSION

SHERIFF'S PREFACE

To all employees of the Tehama County Sheriff's Office,

This policy manual represents the next step in our commitment to modernize and professionalize the way we as an office provide guidance and additional resources to our deputies, corrections deputies , and support staff. A great deal of effort and expense has gone into the creation of ths document, and it shows how seriously we take this issue.

It is our firm expectation that every employee of the Sheriff's Office reads and understands this manual. We will do all that we can to keep this document current, provide you the most modern guidance regarding changing statutes and regulations, case law, and best practices. We are also committed to listening to your recommendations, suggestions, and concerns regarding, not only this version, but other policy manuals.

Thank you to all those who have made this manual a reality, and thank you to all of those who will expend the time and effort to read, understand, and make improvements to it.

Sincerely,

Dave Kain

Sheriff-Coroner

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CODE OF ETHICS

My fundamental duty is to serve the community; to safeguard lives and property; to protect the innocent against deception, the weak against oppression or intimidation and the peaceful against violence or disorder; and to respect the constitutional rights of all to liberty, equality and justice.

I will keep my private life unsullied as an example to all and will behave in a manner that does not bring discredit to me or to my agency. I will maintain courageous calm in the face of danger, scorn or ridicule; develop self-restraint; and be constantly mindful of the welfare of others. Honest in thought and deed both in my personal and official life, I will be exemplary in obeying the law and the regulations of my department. Whatever I see or hear of a confidential nature or that is confided to me in my official capacity will be kept ever secret unless revelation is necessary in the performance of my duty.

I will never act officiously or permit personal feelings, prejudices, political beliefs, aspirations, animosities or friendships to influence my decisions. With no compromise for crime, I will enforce the law courteously and appropriately without fear or favor, malice or ill will, never employing unnecessary force or violence and never accepting gratuities.

I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of criminal justice service. I will never engage in acts of corruption or bribery, nor will I condone such acts by other officers. I will cooperate with all legally authorized agencies and their representatives in the pursuit of justice.

I know that I alone am responsible for my own standard of professional performance and will take every reasonable opportunity to enhance and improve my level of knowledge and competence.

I will constantly strive to achieve these objectives and ideals, dedicating myself before God to my chosen profession.

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Table of Contents

Mission. **1**

Code of Ethics. **2**

Chapter 1 - Role and Authority. **8**

100 - Organizational Structure and Responsibility. 9
101 - Authority and Legal Assistance. 11
102 - Annual Review and Performance-Based Goals and Objectives. 13
103 - Custody Manual. 16
104 - Administrative Communications. 19
105 - Departmental Directives. 21
106 - Special Assignments and Promotions. 22
107 - Standards of Conduct. 25
108 - Discriminatory Harassment. 35
109 - Grievances. 41
110 - Post Orders. 43
111 - Personnel Complaints. 44
112 - Anti-Retaliation. 54

Chapter 2 - Organization and Administration. **58**

200 - Drug- and Alcohol-Free Workplace. 59
201 - Financial Practices. 62
202 - Supervision of Incarcerated Persons. 65
203 - Prohibition on Incarcerated Person Control. 66
204 - Equipment Inventory and Supplies. 67
205 - Tool and Culinary Equipment. 69
206 - Disposition of Evidence. 75
207 - Records and Data Practices. 80
208 - Research Involving Incarcerated Persons. 81
209 - Incarcerated Person Records. 83
210 - Report Preparation. 87
211 - Key and Electronic Access Device Control. 90
212 - Daily Activity Logs and Shift Reports. 93
213 - Personnel Records. 96
215 - Administrative and Supervisory Inspections. 105
216 - Perimeter Security. 107
217 - Accessibility - Facility and Equipment. 109
218 - News Media Relations. 111
219 - Community Relations and Public Information. 114
220 - Victim Notification. 116
222 - Vehicle Safety. 118
223 - Fitness for Duty. 121
224 - Staffing Plan. 124
225 - Speech, Expression, and Social Networking. 126

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226 - Information Technology Use. 130
227 - Payroll Records. 133
228 - Temporary Modified-Duty Assignments. 134
229 - Illness and Injury Prevention. 138
230 - Occupational Disease and Work-Related Injury Reporting. 143
231 - Evaluation of Employees. 145

Chapter 3 - Recruitment Selection and Planning. 149
301 - Employee Orientation. 150
302 - Continuing Education and Professional Development. 151
304 - Jail Training Officer. 152
305 - Recruitment and Selection. 154
306 - Training. 161
307 - Specialized Training. 164
308 - Firearms Training. 165
309 - Chemical Agents Training. 167
310 - Prison Rape Elimination Act Training. 169
311 - Health Care Staff Orientation. 171
312 - Volunteer Program. 173
313 - Briefing Training. 179
314 - Training Plan. 181
315 - Support Personnel Training. 185

Chapter 4 - Emergency Planning. 187
400 - Facility Emergencies. 188
401 - Emergency Staffing. 195
402 - Fire Safety. 197
403 - Emergency Power and Communications. 200
404 - Evacuation. 201

Chapter 5 - Inmate Management. 203
500 - Population Management. 204
501 - Counts. 206
502 - Reception. 207
503 - Handbook and Orientation. 214
504 - Safety Checks. 216
505 - Special Management Incarcerated Persons. 217
506 - Civil Detainees. 223
507 - Management of Weapons and Control Devices. 226
508 - Classification. 228
509 - Conducted Energy Device. 234
510 - Control of Incarcerated Person Movement. 241
511 - Use of Force. 243
512 - Use of Restraints. 257
513 - Electronic Restraints. 263
514 - Searches. 266
515 - Reporting In-Custody Deaths. 273

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516 - Staff and Incarcerated Person Contact. 277
517 - Transportation of Incarcerated Persons Outside the Secure Facility. 280
518 - Safety and Sobering Cells. 282
519 - Biological Samples. 284
520 - End of Term Release. 287
521 - Over-Detention and Inadvertent Releases. 290
522 - Body Worn Cameras. 292

Chapter 6 - Inmate Due Process. 304

600 - Discipline. 305
601 - Disciplinary Separation. 314
602 - Incarcerated Persons with Disabilities. 320
603 - Access to Courts and Counsel. 323
604 - Foreign Nationals and Diplomats. 327
605 - Inmate Rights - Protection from Abuse. 330
606 - Prison Rape Elimination Act. 332
608 - Grooming. 344
609 - Nondiscrimination. 346
610 - Grievances. 348
611 - Voting. 353

Chapter 7 - Medical-Mental Health. 354

700 - Health Care Administrative Meetings and Reports. 355
701 - Access to Health Care. 358
702 - Non-Emergency Health Care. 360
703 - Referrals and Coordination of Specialty Care. 362
704 - Emergency Health Care Services. 364
705 - Health Care for Pregnant Incarcerated Persons. 368
707 - Health Authority. 373
708 - Health Appraisals. 375
709 - Healthy Lifestyle Promotion. 377
710 - Transfer Screening. 379
711 - Medical Screening. 381
712 - Mental Health Services. 386
713 - Mental Health Screening and Evaluation. 389
714 - Special Needs Medical Treatment. 391
715 - Communicable Diseases. 395
716 - Aids to Impairment. 410
717 - Detoxification and Withdrawal. 413
719 - Clinical Performance Enhancement. 416
720 - Clinical Decisions. 418
721 - Health-Trained Custody Staff. 419
722 - Licensure, Certification, and Registration Requirements. 421
723 - Incarcerated Person Assistants. 423
724 - Suicide Prevention and Intervention. 424
726 - Nursing Assessment Protocols. 429
727 - Infirmary Care. 431

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728 - Medical Equipment and Supply Control. 433
729 - Continuation of Care. 434
730 - Continuous Quality Improvement. 436
731 - Informed Consent and Right to Refuse Medical Care. 438
732 - Management of Health Records. 441
733 - Incarcerated Person Health Care Communication. 446
734 - Forensic Evidence. 449
735 - Oral Care. 450
736 - Pharmaceutical Operations. 452
737 - Release Planning. 459
738 - Privacy of Care. 461

Chapter 8 - Environmental Health. 462
800 - Sanitation Inspections. 463
801 - Hazardous Waste and Sewage Disposal. 466
802 - Housekeeping and Maintenance. 468
803 - Physical Plant Compliance with Codes. 470
804 - Water Supply. 472
805 - Vermin and Pest Control. 473
806 - Inmate Safety. 475
807 - Incarcerated Person Hygiene. 477

Chapter 9 - Food Services. 482
900 - Food Services. 483
901 - Food Services Training. 487
902 - Dietary Guidelines. 489
903 - Food Services Workers' Health, Safety, and Supervision. 491
904 - Food Preparation Areas. 494
905 - Food Budgeting and Accounting. 496
906 - Inspection of Food Products. 499
907 - Food Services Facilities Inspection. 501
908 - Food Storage. 505
909 - Prescribed Therapeutic Diets. 508

Chapter 10 - Inmate Programs. 511
1000 - Programs and Services. 512
1001 - Incarcerated Person Welfare Fund. 514
1002 - Accounts. 517
1003 - Counseling Services. 521
1004 - Exercise and Out of Cell Time. 522
1005 - Education, Vocation, and Rehabilitation. 525
1006 - Commissary Services. 529
1007 - Library Services. 531
1008 - Mail. 533
1009 - Telephone Access. 538
1010 - Visitation. 540
1011 - Resources for Released Persons. 544

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1012 - Therapeutic Community Treatment. 545
1014 - Work Release Program. 548
1015 - Incarcerated Person Work Program. 551
1016 - Religious Programs. 555

Chapter 11 - Facility Design. 561
1100 - Space and Environmental Requirements. 562
1101 - Smoking and Tobacco Use. 565
1102 - Control Center. 566
1103 - Crowding. 567

Chapter 12 - Contraband Detection. 569
1200 - Body Scanner. 570

Attachments. 581
. 582

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Chapter 1 - Role and Authority

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Organizational Structure and Responsibility

100.1 PURPOSE AND SCOPE

The organizational structure of the Office is designed to create an efficient means to accomplish its mission and goals and to provide for the best possible service to the public (15 CCR 1029(a)(1)).

100.2 DIVISIONAL RESPONSIBILITY

The Sheriff is responsible for administering and managing the Office. There are three divisions in the Office:

- Administration Division
- Custody Division
- Operations Division

100.2.1 ADMINISTRATION DIVISION

The Administration Division is commanded by a Lieutenant, whose primary responsibility is to provide general management direction and control for the Administration Division. The Administration Division consists of the following units; Civil, OES, Training, Crime Prevention, Volunteer Services, STARS, TCSAR, Explorers, Chaplains, Reserve Deputy Program, Explorer Post Program, Evidence, Records, Internal Affairs, Pre-employment testing, backgrounds, and Administrative Services.

100.2.2 CUSTODY DIVISION

The Custody Division is commanded by a Jail Commander, whose primary responsibility is to function as the Jail Commander to provide general management direction and control for the jail. The Custody Division consists of Custody Divsion, Court Services Division, Inmate Transporation, Court Security, Court Bailiff, Building Maintenance, Participation in the Day Reporting Center (AB109), and Food Services.

100.2.3 OPERATIONS DIVISION

The Operations Division is commanded by a Captain, whose primary responsibility is to provide general management direction and control for Uniformed Patrol, and Special Operations, which includes Patrol, Communications Center (Dispatch), Investigations, Coroner's Officer, SWAT Team, Boating Unit, and Animal Regulations.

100.3 CHAIN OF COMMAND

The chain of command of the Office begins with the Sheriff, to whom all employees of the Office are responsible.

To maintain continuity, order and effectiveness in the Office, a chain of command has been established and should be respected. All staff members should adhere to the chain of command in all official actions. However, nothing shall prohibit a staff member from initiating immediate

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action outside of the chain of command if it is necessitated by a complaint of discrimination, sexual harassment, gross malfeasance or a violation of the law.

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Authority and Legal Assistance

101.1 PURPOSE AND SCOPE

This policy acknowledges and reflects the legal authority under which the Tehama County Sheriff's Office shall operate and maintain a local detention facility in this state. In addition to the authority vested by state law, the jail operates in accordance with these laws, constitutional mandates, regulations and local ordinances.

101.2 POLICY

It is the policy of this Office that the local detention facility will be maintained by all lawful means for the incarceration of persons suspected of violating the law or who have been adjudicated as guilty of committing a crime or civil offense by a competent legal authority, as prescribed by law.

101.3 LEGAL FOUNDATION

Jail staff, at every level must have an understanding and true appreciation of their authority and limitations in the operation of a local detention facility. The Tehama County Sheriff's Office recognizes and respects the value of all human life and the expectation of dignity without prejudice toward anyone. It is also understood that vesting law enforcement personnel with the authority to incarcerate suspected law violators to protect the public and prevent individuals from fleeing justice requires a careful balancing of individual rights and legitimate government interests.

101.4 LEGAL ASSISTANCE

The following are examples of areas where the services of the County Counsel and legal specialists can be of benefit to the Office:

(a) Analyze and alert the jail Commander and jail/Office adminstrative team to jail-related case law.

(b) Serve as a legal consultant in the construction and review of new jail policies and procedures.

(c) Serve as a legal consultant on issues related, but not limited to:

1. Use of force
2. Faith-based requests
3. Complaints and grievances
4. Allegations of abuse by staff

(d) Serve as legal counsel in legal matters brought against this office and the Sheriff.

101.4.1 LEGAL LIAISON

The Sheriff will designate one or more staff to act as a liaison between the Office and the County Counsel’s office. The legal liaison officer will provide an orientation of the facility and detention facility policies to representatives of the County Counsel’s office as needed.

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The liaison officer will arrange for regularly scheduled meetings in order to provide an ongoing status report of facility issues to the legal counsel. The liaison officer will maintain an open relationship with legal counsel in order to move quickly on emerging facility issues that could have significant legal implications for the Office.

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Annual Review and Performance-Based Goals and Objectives

102.1 PURPOSE AND SCOPE

The Tehama County Sheriff's Office is dedicated to the concept of continuous improvement in the services provided on behalf of the public and in accordance with applicable laws, regulations and best practices in the operation of this facility. This policy establishes minimum review criteria to measure and evaluate the success of achieving established goals and objectives.

102.2 POLICY

The Tehama County Sheriff's Office shall strive to continually improve the operation of its facilities to ensure they are safe, humane, and protect incarcerated persons' constitutional and statutory rights. To this end, the Office shall conduct an annual review to evaluate its progress in meeting stated goals and objectives.

102.3 ANNUAL REVIEW

The Captain should ensure that the custody management team conducts an annual management review of, at a minimum:

(a) Statutory, regulatory, and other requirements applicable to the operation of the facility.

(b) Lawsuits and/or court orders/consent decrees.

(c) Office policies, procedures, directives, and post orders that guide the operation of the facility.

(d) Fiscal operations and accounting procedures.

(e) Personnel issues/actions that include but are not limited to on-the-job injuries, internal affairs investigations, employee grievances, employee discipline, selection, and recruitment.

(f) Compliance with internal/external inspections of the facility.

(g) Condition of the physical plant, infrastructure, and maintenance efforts.

(h) Cleanliness of the facility.

(i) Incarcerated person profiles and trends that measure:

1. Incarcerated person population (Average Daily Population).
2. Incarcerated person population by gender.
3. Highest one-day count.
4. Bookings/releases.
5. Felony incarcerated persons in custody.
6. Misdemeanor incarcerated persons in custody.
7. Pretrial population.

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8. Sentenced population.
9. Medical beds.
10. Mental health beds.
11. Meal counts (regular, medical, court meals).
12. Early releases.
13. Alternative-to-incarceration participants.
14. Special needs incarcerated persons.
15. Classification issues.
16. Incarcerated person grievances (founded/denied).
17. Demographics (age, race, gang affiliation).
18. Court movement.

(j) Security issues that include:

1. Incarcerated person-on-incarcerated person assaults.
2. Incarcerated person-on-staff assaults.
3. Major disturbances.
4. Deaths in custody (natural/suicide/homicide/accidents).
5. Suicide attempts (15 CCR 1030).

(k) Incarcerated person programs, including:

1. Education.
2. Commissary.
3. Drug and alcohol programs.
4. Faith-based services.

102.4 CRITERIA TO MEASURE PERFORMANCE

The following items will be used to measure and evaluate the level of success in achieving the office's stated goals:

(a) Fiscal year budget surpluses or successful operations even with budget reduction

(b) Findings from independent financial audits

(c) Incarcerated person grievances

(d) Documentation that office investigators have completed the required specialized training in conducting sexual abuse investigations (28 CFR 115.34)

(e) Documented training hours received by staff

(f) Completed audits of the policy and procedures manuals

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102.5 MANAGEMENT REVIEW PROCESS

The management team may employ several methods to assess performance, including the following:

(a) **Performance analysis** - Performance analysis attempts to discover discrepancies between the expected and actual levels of performance. This analysis should focus on whether the practices in this facility are meeting the mission of the Office and whether office policies and procedures are in alignment with statutes, regulations and court orders.

(b) **One-to-one interviews** - Scheduled interviews with custody staff, held in private to encourage candid responses, to help identify issues or conditions that should be targeted for review or correction.

(c) **Questionnaires** - Questionnaires should be used as a group method to solicit suggestions and information about what operations are in need of adjustment or where program resources should be directed.

(d) **Staff debriefing** - Staff should be periodically debriefed, especially after an emergency operation or incident, to identify aspects of facility operations that may need to be addressed by the Jail Commander and supervisors.

(e) **Inspection findings** - The Office is subject to a variety of administrative inspections (standard-setting authorities, command staff, grand jury, jail advocates). These annual inspections should be used to identify ongoing issues in the operation of this facility.

102.6 MANAGEMENT REVIEW RESULTS

To the extent practicable, the individuals responsible for the development of a management review should follow the guidelines established in the Administrative Communications Policy and Annual Facility Inspection Policy to document and support the findings. A complete report of the review results should be submitted to the appropriate level in the chain of command for final approval.

The results of management reviews should be used in the ongoing process of continuous improvement. They should be used to direct changes in the operation of this facility or to identify successful operations that might be replicated in other areas of the facility. They should not, however, include specific identifying information of incidents or involved individuals.

The results of management reviews also may be used in full or in part to respond to inquiries from interested groups, such as the local legislative body, courts, grand jury or others, to provide information on issues concerning the operation of this facility, including action planning whenever appropriate.

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Custody Manual

103.1 PURPOSE AND SCOPE

The Custody Manual is a statement of the current policies, rules, and guidelines of this office's jail. All prior and existing manuals, orders, and regulations which are in conflict with this manual are revoked, except to the extent that portions of existing manuals, orders, and other regulations which have not been included herein shall remain in effect where they do not conflict with the provisions of this manual.

Except where otherwise expressly stated, the provisions of this manual shall be considered guidelines. It is recognized, however, that work in the custody environment is not always predictable and circumstances may arise that warrant departure from these guidelines. It is the intent of this manual to be viewed from an objective standard, taking into consideration the sound discretion entrusted to members of this office under the circumstances reasonably known to them at the time of any incident.

103.2 POLICY

The manual of the Tehama County Sheriff's Office Jail is hereby established and shall be referred to as the Custody Manual (15 CCR 1029). All members are to conform to the provisions of this manual.

103.2.1 DISCLAIMER

The provisions contained in the Custody Manual are not intended to create an employment contract nor any employment rights or entitlements. The policies contained within this manual are for the internal use of the Tehama County Sheriff's Office and shall not be construed to create a higher standard or duty of care for civil or criminal liability against the county, its officials or members. Violations of any provision of any policy contained within this manual shall only form the basis for office administrative action, training or discipline. The Tehama County Sheriff's Office reserves the right to revise any policy content, in whole or in part.

103.3 RESPONSIBILITIES

The Sheriff shall be considered the ultimate authority for the provisions of this manual and shall continue to issue Departmental Directives, which shall modify the provisions to which they pertain. Departmental Directives shall remain in effect until such time as they may be permanently incorporated into the manual.

The Captain shall ensure that the Custody Manual is comprehensively reviewed at least every two years, updated as needed, and the staff trained accordingly to ensure that the policies in the manual are current and reflect the mission of the Tehama County Sheriff's Office (15 CCR 1029). The review shall be documented in written form sufficient to indicate that policies and procedures have been reviewed and amended as appropriate to facility changes.

103.3.1 COMMAND STAFF

The command staff should consist of the following:

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- Sheriff
- Assistant Sheriff
- Captain
- Jail Commander/Jail Lieutenant
-

103.3.2 OTHER PERSONNEL
Line and supervisory staff have a unique view of how policies and procedures influence the operation of the facility and therefore are expected to bring to the attention of their supervisor issues that might be addressed in a new or revised policy.

All members suggesting revision of the contents of the Custody Manual should forward their suggestion, in writing, through the chain of command to the Jail Commander, who will consider the recommendation.

103.3.3 INTERNAL AND EXTERNAL SECURITY MEASURE REVIEW
The Jail Commander shall ensure that Custody Manual review, evaluation, and procedures include internal and external security measures of the facility, including security measures specific to prevention of sexual abuse and sexual harassment (15 CCR 1029).

103.4 DEFINITIONS
The following words and terms shall have these assigned meanings, unless it is apparent from the content that they have a different meaning:

Adult - Any person 18 years of age or older.

Office - The Tehama County Sheriff's Office.

Custody Manual - The Office Custody Manual.

Employee - Any person employed by the Office.

Juvenile - Any person under the age of 18.

May - Indicates a permissive, discretionary, or conditional action.

Member - Any person employed or appointed by the Tehama County Sheriff's Office, including:

- Full-and part-time employees.
- Sworn Correctional Deputies, Deputies.
- Reserve Deputies.
- Non-sworn employees.
- Volunteers.

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Correctional Deputies - All persons, regardless of rank, who are employees and who are selected and trained in accordance with state law as Correctional Deputies of the Tehama County Sheriff's Office.

On-duty employee - Status during the period when he/she is actually engaged in the performance of his/her assigned duties.

Order - A written or verbal instruction issued by a superior.

Rank - The job classification title held by a correctional officer.

Shall or will - Indicates a mandatory action.

Should - Indicates a generally required or expected action absent a rational basis for failing to conform.

103.5 DISTRIBUTION OF MANUAL

Copies of the Custody Manual shall be made available to all members. An electronic version of the Custody Manual will be made available to all members on the office network (15 CCR 1029).

No changes shall be made to the electronic version without authorization from the Jail Commander.

103.6 MANUAL ACCEPTANCE

As a condition of employment, all members are required to read and obtain necessary clarification of this office’s policies. All members are required to sign a statement of receipt acknowledging that they have received a copy or have been provided access to the Custody Manual.

103.7 REVISIONS TO POLICIES

All members are responsible for keeping abreast of all Custody Manual revisions. All changes to the Custody Manual will be posted on the office network for review prior to implementation. The Training Manager will forward revisions to the Custody Manual as needed to all personnel via electronic mail. Each member shall acknowledge receipt by return email or online acknowledgement, review the revisions, and seek clarification as needed.

Each supervisor will ensure that members under the supervisor's command are familiar with and understand all revisions.

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Administrative Communications

104.1 PURPOSE AND SCOPE

Effective communications within the Office are critical to the accomplishment of the mission of the Office and the effective operation of the jail. Administrative communications of this office are governed by the following policy (15 CCR 1029(a)(1)).

104.2 PERSONNEL ORDERS

Personnel orders may be issued periodically by the Sheriff to announce and document all promotions, transfers, hiring of new personnel, separations, personnel and group commendations or other changes in status.

104.3 CORRESPONDENCE

All office correspondence is to be written in a clear, concise manner, consistent with the report formats and guidelines prescribed in this policy and reflecting the highest possible quality in organization, grammar, punctuation and spelling.

All external correspondence shall be on Office letterhead. All office letterhead, including all digital facsimiles of the letterhead, shall bear the signature element of the Sheriff or the authorized designee. Personnel should use office letterhead only for official business and with the approval of their supervisors.

104.4 SURVEYS

All surveys made in the name of the Office shall be authorized in advance by the Sheriff or the Jail Commander.

104.5 COMPLETED STAFF WORK

All staff reports (i.e., reports assigned to a specific person for the purpose of responding to a problem or issue) shall incorporate the principle of completed staff work which requires the person to whom a task has been delegated to complete and document the delegated work to such an extent that the only thing left for the decision-maker to do is to approve or decline the recommendation. Staff reports that only point out weaknesses or merely suggest needed actions are not completed staff work and are not acceptable.

The writer of the staff report should document the efforts made to have the report reviewed by or acted upon by those individuals representing work units or other entities likely to be affected by any proposed changes.

104.6 INTRODUCTORY SUMMARY MEMORANDUMS

Any memorandum that exceeds one page in length should contain a brief introductory summary section synopsizing the subject matter.

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104.7 ADMINISTRATIVE REPORT FORMAT

All staff reports submitted via the chain of command to superior officers for further action should be written in accordance with the following format, when applicable.

Executive Summary Section - The staff report should begin with a brief statement of the problem or issue and what could be done about it. This summary should restate the main points of the report in general, nontechnical language, leaving out details. The length of the executive summary section should range from one paragraph to one page.

Problem/Issue Identification Section - This section of a staff report is critical to the success of the reader's ability to grasp the issues involved and to arrive at an informed decision. It should strive to identify the true nature and scope of the problem by identifying the known facts and background of the situation, including who has the problem, how long it has existed and the known or likely consequences of the problem.

Forecast Future Impacts - This section of the report should clearly define the problem and be accompanied by an analysis of relevant factors, supported by specific examples, details or testimony, clarifying what the problem is and why it exists. Generally, the reader should be able to leave this section of the report clearly understanding the issues involved and the consequences of taking no action.

Alternatives Analysis Section - Whenever the seriousness or complexity of a problem warrants the development of alternative solutions, a staff report should include a section containing a discussion of different courses of action and their consequences, taking into account the comments and positions of other staff members or entities affected by the response to the problem.

104.8 POLICY

The Tehama County Sheriff's Office will appropriately communicate significant events within the organization to its members. Both electronic and non-electronic administrative communications will be professional in appearance and comply with the established letterhead, signature and disclaimer guidelines, as applicable.

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Departmental Directives

105.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for issuing Departmental Directives.

105.2 DEPARTMENTAL DIRECTIVES PROTOCOL

Departmental Directives will be incorporated into the manual as required upon approval of the Sheriff. Departmental Directives will modify existing policies or create a new policy as appropriate. The previous policy will be rescinded upon incorporation of the new or updated policy into the manual.

Any Departmental Directive issued after publication of the manual should be numbered consecutively, starting with the last two digits of the year, followed by the number “01” as in yy-01.

105.3 RESPONSIBILITIES

105.3.1 AGENCYHEAD

The Sheriff, with the assistance of office staff, shall issue and be responsible for all Departmental Directives, including their publication and dissemination throughout the Office.

105.3.2 MANAGERS AND SUPERVISORS

Managers and supervisors are responsible for ensuring that staff under their command receive training on all new Departmental Directives.

Training documentation shall be placed into the supervisor’s file or the employee’s training file.

105.4 POLICY

Departmental Directives establish a communication practice that may be used by the Sheriff to make immediate changes to policy and procedure in accordance with and as permitted by statutes, regulations, or negotiated contracts. Departmental Directives will immediately modify or change and supersede the sections of this manual to which they pertain.

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Special Assignments and Promotions

106.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for promotions and for making special assignments within the Tehama County Sheriff's Office/Jail.

106.2 GENERAL REQUIREMENTS

The following conditions should be used in evaluating employees for specialized assignment, promotion and transfer:

(a) Presents a professional, neat appearance.

(b) Maintains a physical condition which aids in job performance.

(c) Meets the minimum positional requirements of the job description.

(d) Demonstrates the following traits:

1. Emotional stability and maturity
2. Stress tolerance
3. Sound judgment and decision-making
4. Personal integrity and ethical conduct
5. Leadership
6. Initiative
7. Adaptability and flexibility
8. Ability to conform to organizational goals and objectives in a positive manner

106.2.1 DISQUALIFICATION

The Tehama County Sheriff's Office shall not promote, assign or transfer any member to a position that may allow contact with inmates if the member has (28 CFR 115.17):

(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution as defined in 42 USC § 1997.

(b) Been convicted of engaging in or attempting to engage in sexual activity that was facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

(c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section.

The Office shall either conduct criminal background records checks at least every five years on members or contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

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Employees who may have contact with inmates shall disclose any conduct described above in written applications or interviews for promotion or specialized assignment.

106.3 CORRECTIONAL OFFICER SPECIALIZED ASSIGNMENTS

Placement into or removal from the following assignments shall not be considered a promotion or a demotion:

(a) Special Weapons and Tactics Team (SWAT)
    1. Unmanned Arial System Operator-Drone Operator
    2. Negotiation Team (hostage or other)

(b) 1. Jail Intelligence
        (a) Gang Intelligence
        (b) General Intelligence/Terrorism Liaison Officer

(c) Classification Officers

(d) Training Officer
    1. Training Manager
    2. Jail Training Officer
    3. Defensive Tactics Instructor
    4. Rangemaster/Firearms/Control Devices Instructor
    5. Taser Instructor
    6. OC and chemical weapons instructor

(e) Court Officer

(f) Administrative Services
    1. Day Reporting Center (DRC)
    2. Transportation
    3. Inmate Programs Specialist
    4. Grievance Officer
    5. Inmate Disciplinary Hearing Officer
    6. Public Information Officer (PIO)
    7. Accreditation/audit/inspection manager & compliance officer

106.3.1 DESIRABLE QUALIFICATIONS

Qualifications that will be considered for a specialized assignment include:

(a) Required experience for the specialized assignment.

(b) Completed probation.

(c) Has shown an interest in the specialized assignment.

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(d) Education, training and demonstrated abilities in related areas, such as law, gang suppression, medical/mental health issues in the jail, report writing, public relations.

(e) Completion of any training required by the government or a professional organization.

106.4 SPECIALIZED ASSIGNMENT SELECTION PROCESS

The following criteria apply to specialized assignments:

(a) Administrative evaluation, as determined by the Sheriff, will be conducted. This should include a review of supervisor recommendations and the employee's performance evaluation history. Each supervisor who has supervised or otherwise been involved with the candidate will submit these recommendations.

(b) The supervisor recommendations will be submitted to the Jail Commander for whom the candidate will work.

(c) Based on supervisor recommendations and those of the Jail Commander, the Jail Commander will submit his/her recommendation to the Sheriff.

(d) Appointments will be made by the Sheriff.

The policy and procedures for all positions may be waived for temporary assignments or emergency situations. This policy may also be waived to allow selected candidates to attend requisite training programs.

106.5 PROMOTIONAL REQUIREMENTS

Requirements and information regarding any promotional process are available at the Tehama Personnel Department.

106.6 POLICY

The Tehama County Sheriff's Office determines assignments and promotions in a nondiscriminatory manner based upon job-related factors and candidate skills and qualifications. Assignments and promotions are made by the Sheriff.

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Standards of Conduct

107.1 PURPOSE AND SCOPE

This policy establishes standards of conduct that are consistent with the values and mission of the Tehama County Sheriff's Office and are expected of all office members. The standards contained in this policy are not intended to be an exhaustive list of requirements and prohibitions, but they do identify many of the important matters concerning conduct. In addition to the provisions of this policy, members are subject to all other provisions contained in this manual, as well as any additional guidance on conduct that may be disseminated by this office or a member's supervisors.

107.2 POLICY

The continued employment or appointment of every member of this office shall be based on conduct that reasonably conforms to the guidelines set forth herein. Failure to meet the guidelines set forth in this policy, whether on- or off-duty, may be cause for disciplinary action.

107.3 DIRECTIVES AND ORDERS

Members shall comply with lawful directives and orders from any office supervisor or person in a position of authority, absent a reasonable and bona fide justification.

107.3.1 UNLAWFUL OR CONFLICTING ORDERS

Supervisors shall not knowingly issue orders or directives that, if carried out, would result in a violation of any law or office policy. Supervisors should not issue orders that conflict with any previous order without making reasonable clarification that the new order is intended to countermand the earlier order.

No member is required to obey any order that appears to be in direct conflict with any federal law, state law or local ordinance. Following a known unlawful order is not a defense and does not relieve the member from criminal or civil prosecution or administrative discipline. If the legality of an order is in doubt, the affected member shall ask the issuing supervisor to clarify the order or shall confer with a higher authority. The responsibility for refusal to obey rests with the member, who shall subsequently be required to justify the refusal.

Unless it would jeopardize the safety of any individual, members who are presented with a lawful order that is in conflict with a previous lawful order, office policy or other directive shall respectfully inform the issuing supervisor of the conflict. The issuing supervisor is responsible for either resolving the conflict or clarifying that the lawful order is intended to countermand the previous lawful order or directive, in which case the member is obliged to comply. Members who are compelled to follow a conflicting lawful order after having given the issuing supervisor the opportunity to correct the conflict will not be held accountable for disobedience of the lawful order or directive that was initially issued.

The person countermanding the original order shall notify, in writing, the person issuing the original order, indicating the action taken and the reason.

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107.3.2 SUPERVISOR RESPONSIBILITIES

Supervisors and managers are required to follow all policies and procedures and may be subject to discipline for:

(a) Failure to be reasonably aware of the performance of their subordinates or to provide appropriate guidance and control.

(b) Failure to promptly and fully report any known misconduct of a member to the member's immediate supervisor or to document such misconduct appropriately or as required by policy.

(c) Directing a subordinate to violate a policy or directive, acquiescing to such a violation, or exhibiting indifference to such a violation.

(d) Exercising unequal or disparate authority toward any member for malicious or other improper purpose.

107.3.3 DISCRIMINATION

Discrimination against any person because of age, race, color, creed, religion, gender, sexual orientation, national origin, ancestry, marital status, physical or mental disability or medical condition will not be tolerated.

107.3.4 PERFORMANCE

(a) Sleeping during on-duty time or assignments without the permission of your supervisor.

(b) Careless workmanship resulting in spoilage or waste of materials or work of an unacceptable nature as applicable to the nature of the work assigned.

(c) Unsatisfactory work performance including, but not limited to, failure, incompetence, inefficiency or delay in performing and/or carrying out proper orders, work assignments or instructions of supervisors without a reasonable and bona fide excuse.

(d) Concealing, attempting to conceal, removing or destroying defective or incompetent work.

(e) Disobedience or insubordination to constituted authorities, including refusal or deliberate failure to carry out or follow lawful directives and orders from any supervisor or person in a position of authority.

(f) The wrongful or unlawful exercise of authority on the part of any employee for malicious purpose, personal gain, willful deceit or any other improper purpose.

(g) Disparaging remarks or conduct concerning duly constituted authority to the extent that such conduct disrupts the efficiency of the Office or subverts the good order, efficiency and discipline of the Office or that would tend to discredit any member thereof.

(h) Being untruthful or knowingly making false, misleading or malicious statements that are reasonably calculated to harm or destroy the reputation, authority or official standing of the Office or members thereof.

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(i) The falsification of any work-related records, the making of misleading entries or statements with the intent to deceive, or the willful and unauthorized destruction and/or mutilation of any office record, book, paper or document.

(j) The unauthorized use of any badge, uniform, identification card or other office equipment or property for personal gain or any other improper purpose.

(k) The receipt or acceptance of a reward, fee or gift from any person for service incident to the performance of the employee's duties (lawful subpoena fees and authorized work permits excepted).

(l) Any knowing or negligent violation of the provisions of the office manual, operating procedures or other written directive of an authorized supervisor that the Office has made available to the employees.

(m) Dishonesty, including attempted or actual theft of office property, services or the property of others, or the unauthorized removal or possession of office property or the property of another person.

(n) Criminal, dishonest, infamous or disgraceful conduct adversely affecting the employee/employer relationship, whether on-duty or off-duty.

(o) Failure to disclose or misrepresenting material facts, or the making of any false or misleading statement on any application, examination form or other official document, report or form, or during the course of any work-related investigation.

(p) Failure to take reasonable action while on-duty and when required by law, statute, resolution or approved office practices or procedures.

(q)

(r) Offer or acceptance of a bribe or gratuity.

(s) Misappropriation or misuse of public funds.

(t) Exceeding lawful peace officer powers by unreasonable, unlawful or excessive conduct.

(u) Unlawful gambling or unlawful betting on office premises or at any work site. Legal gambling or betting under any of the following conditions:

1. While on office premises.
2. At any work site, while on-duty or while in uniform, or while using any office equipment or system.
3. Gambling activity undertaken as part of a correctional officer's official duties and with the express knowledge and permission of a direct supervisor is exempt from this prohibition.

(v) Substantiated, active, continuing association on a personal rather than official basis with a person or persons who engage in or are continuing to engage in serious violations of state or federal laws, where the employee has or reasonably should have knowledge of such criminal activities, except where specifically directed and authorized by the Office.

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(w) Solicitations, speeches or distribution of campaign literature for or against any political candidate or position while on-duty, on office property or while in any way representing him/herself as a member of this office, without the express authorization of the Sheriff.

(x) Engaging in political activities during assigned working hours without the express authorization of the Sheriff.

(y) Violating any misdemeanor or felony statute.

(z) Any other on-duty or off-duty conduct which any employee knows or reasonably should know is unbecoming a member of the Office or which is contrary to good order, efficiency or morale, or which tends to reflect unfavorably upon the Office or its members.

(aa) Any failure or refusal of an employee to properly perform the function and duties of an assigned position.

(ab) Failure to maintain required and current licenses (e.g., driver license) and certifications (e.g., first aid).

(ac) Failure to participate in investigations, or giving false or misleading statements, or misrepresenting or omitting material information to a supervisor or other person in a position of authority, in connection with any investigation or in the reporting of any office-related business.

107.3.5 SAFETY

(a) Failure to observe posted rules, signs and written or oral safety instructions while on-duty and/or within office facilities or to use required protective clothing or equipment.

(b) Concealing or knowingly failing to report any on-the-job or work-related accident or injury within 24 hours.

(c) Substantiated employee record of unsafe or improper driving habits or actions in the course of employment.

(d) Failure to maintain good physical condition sufficient to adequately and safely perform law enforcement duties.

(e) Any personal action contributing to involvement in a preventable traffic collision, or other unsafe or improper driving habits or actions in the course of employment or appointment.

(f) Failing to observe or violating office safety standards or safe working practices.

(g) Failure to maintain current licenses or certifications required for the assignment or position (e.g., driver license, first aid)

(h) Unsafe firearm or other dangerous weapon handling, including loading or unloading firearms in an unsafe manner, either on or off-duty.

(i) Carrying, while of the premises of the work site, any firearm or other lethal weapon that is not authorized by the member's appointing authority.

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107.3.6 SECURITY

(a) Unauthorized, intentional release of designated confidential information, materials, data, forms or reports.

107.4 GENERAL STANDARDS

Members shall conduct themselves, whether on- or off-duty, in accordance with the United States and California constitutions and all applicable laws, ordinances, and rules enacted or established pursuant to legal authority.

Members shall familiarize themselves with policies and procedures and are responsible for compliance with each. Members should seek clarification and guidance from supervisors in the event of any perceived ambiguity or uncertainty.

Discipline may be initiated for any good cause. It is not mandatory that a specific policy or rule violation be cited to sustain discipline. This policy is not intended to cover every possible type of misconduct.

107.4.1 PRISON RAPE ELIMINATION ACT DISCLOSURE

Members have a continuing affirmative duty to notify the Captain in writing if they have (28 CFR 115.17; 15 CCR 3411):

(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 USC § 1997.

(b) Been convicted for an offense involving engaging in or attempting to engage in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

(c) Been the subject of any civil or administrative adjudication finding that the member engaged in sexual activity facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent or was unable to consent or refuse.

107.5 CAUSES FOR DISCIPLINE

The following are illustrative of causes for disciplinary action. This list is not intended to cover every possible type of misconduct and does not preclude the recommendation of disciplinary action for violation of other rules, standards, ethics and specific action or inaction that is detrimental to efficient office service.

107.5.1 LAWS, RULES, AND ORDERS

(a) Violation of, or ordering or instructing a subordinate to violate, any policy, procedure, rule, order, directive or requirement, or failure to follow instructions contained in office or countymanuals.

(b) Disobedience of any legal directive or order issued by any office member of a higher rank.

(c) Violation of federal, state, local or administrative laws, rules, or regulations.

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107.5.2 ETHICS

(a) Using or disclosing one’s status as a member of the Tehama County Sheriff's Office in any way that could reasonably be perceived as an attempt to gain influence or authority for non-office business or activity.

(b) The wrongful or unlawful exercise of authority on the part of any member for malicious purpose, personal gain, willful deceit or any other improper purpose.

(c) The receipt or acceptance of a reward, fee or gift from any person for service incident to the performance of the member's duties (lawful subpoena fees and authorized work permits excepted).

(d) Acceptance of fees, gifts or money contrary to the rules of this office and/or laws of the state.

(e) Offer or acceptance of a bribe or gratuity.

(f) Misappropriation or misuse of public funds, property, personnel or services.

(g) Any other failure to abide by the standards of ethical conduct.

107.5.3 INTOXICANTS

(a) Reporting for work or being at work while intoxicated or when the member’s ability to perform assigned duties is impaired due to the use of alcohol, medication, or drugs, whether legal, prescribed, or illegal.

(b) Possession or use of alcohol at any work site or while on-duty, except as authorized in the performance of an official assignment. A member who is authorized to consume alcohol is not permitted to do so to such a degree that it may impair on-duty performance.

(c) Unauthorized possession, use of, or attempting to bring intoxicants, a controlled substance, illegal drug, or non-prescribed medication to any work site.

107.5.4

107.5.5 CONDUCT

(a) Failure of any member to promptly and fully report activities on their part or the part of any other member where such activities resulted in contact with any other law enforcement agency or that may result in criminal prosecution or discipline under this policy.

(b) Unreasonable and unwarranted force to a person encountered or a person under arrest.

(c) Exceeding lawful peace officer powers by unreasonable, unlawful, or excessive conduct.

(d) Unauthorized or unlawful fighting, threatening, or attempting to inflict unlawful bodily harm on another.

(e) Engaging in horseplay that reasonably could result in injury or property damage.

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(f) Discourteous, disrespectful, or discriminatory treatment of any member of the public or any member of this office or the county.

(g) Use of obscene, indecent, profane, or derogatory language while on-duty or in uniform.

(h) Criminal, dishonest, or disgraceful conduct, whether on- or off-duty, that adversely affects the member's relationship with this office.

(i) Unauthorized possession of, loss of, or damage to office property or the property of others, or endangering it through carelessness or maliciousness.

(j) Attempted or actual theft of office property; misappropriation or misuse of public funds, property, personnel, or the services or property of others; unauthorized removal or possession of office property or the property of another person.

(k) Activity that is incompatible with a member's conditions of employment or appointment as established by law or that violates a provision of any memorandum of understanding or contract, including fraud in securing the appointment or hire.

(l) Initiating any civil action for recovery of any damages or injuries incurred in the course and scope of employment or appointment without first notifying the Sheriff of such action.

(m) Allowing contraband articles, including but not limited to weapons, cellular telephones or other wireless devices, clothing, food, illegal drugs, or tobacco, in any jail facility.

(n) Receiving from an incarcerated person any articles to deliver outside the facility.

(o) Any other on- or off-duty conduct that any member knows or reasonably should know is unbecoming a member of this office, is contrary to good order, efficiency, or morale, or tends to reflect unfavorably upon this office or its members.

107.5.6 PERFORMANCE

(a) Improper political activity including:

1. Solicitations, speeches, or distribution of campaign literature for or against any political candidate or position while on-duty or on office property, except as expressly authorized by county policy, the memorandum of understanding or contract, or the Sheriff.

2. Unauthorized attendance while on-duty at official legislative or political sessions.

(b) Engaging in political activities during assigned working hours except as expressly authorized by county policy, the memorandum of understanding or contract, or the Sheriff.

(c) Any act on- or off-duty that brings discredit to this office.

107.5.7 RELATIONSHIPS

(a) Unwelcome solicitation of a personal or sexual relationship while on-duty or through the use of one's official capacity.

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(b) Engaging in on-duty sexual activity, including but not limited to sexual intercourse, excessive displays of public affection, or other sexual contact with other members, volunteers, contractors, or incarcerated persons.

(c) Establishing or maintaining an inappropriate personal or financial relationship, as a result of an investigation, with an incarcerated person or with a known victim, witness, suspect, or defendant while a case is being investigated or prosecuted, or as a direct result of any official contact.

(d) Associating with or joining a criminal gang, organized crime, and/or criminal syndicate when the member knows or reasonably should know of the criminal nature of the organization. This includes any organization involved in a definable criminal activity or enterprise, except as specifically directed and authorized by this office.

(e) Associating on a personal, rather than official, basis with persons who demonstrate recurring involvement in serious violations of state or federal laws after the member knows or reasonably should know of such criminal activities, except as specifically directed and authorized by this office.

(f) Participation in a law enforcement gang as defined by Penal Code § 13670. Participation is grounds for termination (Penal Code § 13670).

107.5.8 ATTENDANCE

(a) Leaving the job to which the member is assigned during duty hours without reasonable excuse and proper permission and approval.

(b) Unexcused or unauthorized absence or tardiness.

(c) Excessive absenteeism or abuse of leave privileges.

(d) Failure to report to work or to the place of assignment at the time specified and fully prepared to perform duties without a reasonable excuse.

107.5.9 UNAUTHORIZED ACCESS, DISCLOSURE, OR USE

(a) Unauthorized and inappropriate intentional release of confidential or protected information, materials, data, forms, or reports obtained as a result of the member's position with this office.

1. Members of this office shall not disclose the name, address, or image of any victim of human trafficking except as authorized by law (Penal Code § 293).

(b) Disclosing to any unauthorized person any active investigation, incarcerated person, or critical incident information.

(c) The use of any information, photograph, video, or other recording obtained or accessed as a result of employment or appointment to this office for personal or financial gain or without the express authorization of the Sheriff or the authorized designee.

(d) Loaning, selling, allowing unauthorized use, giving away, or appropriating any office property for personal use, personal gain, or any other improper or unauthorized use or purpose.

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(e) Using office resources in association with any portion of an independent civil action. These resources include but are not limited to personnel, vehicles, equipment, and non-subpoenaed records.

107.5.10 EFFICIENCY

(a) Neglect of duty.

(b) Failure to notify the Office within 24 hours of any change in residence address or contact numbers.

(c) Failure to notify the Personnel Department of changes in relevant personal information (e.g., information associated with benefits determination) in a timely fashion.

107.5.11 DISCRIMINATION, OPPRESSION, OR FAVORITISM

Unless required by law or policy, discriminating against, oppressing, or providing favoritism to any person because of actual or perceived characteristics such as race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, economic status, cultural group, veteran status, marital status, and any other classification or status protected by law, or intentionally denying or impeding another in the exercise or enjoyment of any right, privilege, power, or immunity, knowing the conduct is unlawful.

107.6 EMPLOYEE RESPONSE

The pre-discipline process is intended to provide the accused employee with an opportunity to present a written or oral response to the Sheriff after having had an opportunity to review the supporting materials and prior to imposition of any recommended discipline. The employee shall consider the following:

(a) This response is not intended to be an adversarial or formal hearing.

(b) Although the employee may be represented by an uninvolved representative or legal counsel, the response is not designed to accommodate the presentation of testimony or witnesses.

(c) The employee may suggest that further investigation could be conducted or the employee may offer any additional information or mitigating factors for the Sheriff to consider.

(d) In the event that the Sheriff elects to cause further investigation to be conducted, the employee shall be provided with the results of such subsequent investigation prior to the imposition of any discipline.

(e) The employee may thereafter have the opportunity to further respond orally or in writing to the Sheriff on the limited issues of information raised in any subsequent materials.

(f) Once the employee has completed his/her response or, if the employee has elected to waive any such response, the Sheriff shall consider all information received in regard to the recommended discipline. The Sheriff shall thereafter render a timely

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written decision to the employee imposing, modifying or rejecting the recommended discipline. In the event of a termination, the final notice of discipline shall also inform the employee of the reason for termination and the process to receive all remaining fringe and retirement benefits.

(g) Once the Sheriff has issued a written decision, the discipline shall become effective.

107.7 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

In the event that an employee tenders a written retirement or resignation prior to the imposition of discipline, it shall be noted in the file.

The tender of a retirement or resignation by itself shall not serve as grounds for the termination of pending discipline.

107.8 POST-RESPONSE PROCEDURE

In situations resulting in the imposition of a suspension, punitive transfer, demotion or termination of a non-probationary employee, the employee shall have the right to an evidentiary appeal of the Sheriff’s imposition of discipline pursuant to the operative collective bargaining agreement and personnel rules.

107.9 SECTION TITLE

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Discriminatory Harassment

108.1 PURPOSE AND SCOPE

The purpose of this policy is to prevent office members from being subjected to discriminatory harassment, including sexual harassment and retaliation (Government Code § 12940(k); 2 CCR 11023). Nothing in this policy is intended to create a legal or employment right or duty that is not created by law.

108.2 POLICY

The Tehama County Sheriff's Office is an equal opportunity employer and is committed to creating and maintaining a work environment that is free of all forms of discriminatory harassment, including sexual harassment and retaliation. The Office will not tolerate discrimination against a member in hiring, promotion, discharge, compensation, fringe benefits, and other privileges of employment. The Office will take preventive and corrective action to address any behavior that violates this policy or the rights and privileges it is designed to protect.

The nondiscrimination policies of the Office may be more comprehensive than state or federal law. Conduct that violates this policy may not violate state or federal law but still could subject a member to discipline.

108.3 DEFINITIONS

Definitions related to this policy include:

108.3.1 DISCRIMINATION

The Office prohibits all forms of discrimination, including any employment-related action by a member that adversely affects an applicant or member and is based on actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law.

Discriminatory harassment, including sexual harassment, is verbal or physical conduct that demeans or shows hostility or aversion toward an individual based upon that individual’s protected class. It has the effect of interfering with an individual’s work performance or creating a hostile or abusive work environment.

Conduct that may, under certain circumstances, constitute discriminatory harassment can include making derogatory comments; making crude and offensive statements or remarks; making slurs or off-color jokes; stereotyping; engaging in threatening acts; making indecent gestures, pictures, cartoons, posters, or material; making inappropriate physical contact; or using written material or office equipment and/or systems to transmit or receive offensive material, statements, or pictures. Such conduct is contrary to office policy and to a work environment that is free of discrimination.

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108.3.2 RETALIATION
Retaliation is treating a person differently or engaging in acts of reprisal or intimidation against the person because the person has engaged in protected activity, filed a charge of discrimination, participated in an investigation, or opposed a discriminatory practice. Retaliation will not be tolerated.

108.3.3 SEXUAL HARASSMENT
The Office prohibits all forms of discrimination and discriminatory harassment, including sexual harassment. It is unlawful to harass an applicant or a member because of that person's sex.

Sexual harassment includes but is not limited to unwelcome sexual advances, requests for sexual favors, or other verbal, visual, or physical conduct of a sexual nature when:

(a) Submission to such conduct is made either explicitly or implicitly as a term or condition of employment, position, or compensation.

(b) Submission to, or rejection of, such conduct is used as the basis for any employment decisions affecting the member.

(c) Such conduct has the purpose or effect of substantially interfering with a member's work performance or creating an intimidating, hostile, or offensive work environment.

108.3.4 ADDITIONAL CONSIDERATIONS
Discrimination and discriminatory harassment do not include actions that are in accordance with established rules, principles, or standards, including:

(a) Acts or omission of acts based solely upon bona fide occupational qualifications under the Equal Employment Opportunity Commission and California Fair Employment and Housing Council guidelines.

(b) Bona fide requests or demands by a supervisor that a member improve the member's work quality or output, that the member report to the job site on time, that the member comply with county or office rules or regulations, or any other appropriate work-related communication between supervisor and member.

108.4 RESPONSIBILITIES
This policy applies to all office members, who shall follow the intent of these guidelines in a manner that reflects office policy, professional standards, and the best interest of the Office and its mission.

Members are encouraged to promptly report any discriminatory, retaliatory, or harassing conduct or known violations of this policy to a supervisor. Any member who is not comfortable with reporting violations of this policy to the member's immediate supervisor may bypass the chain of command and make the report to a higher-ranking supervisor or manager. Complaints may also be filed with the Sheriff, the Personnel Director, or the County Administrator.

Any member who believes, in good faith, that the member has been discriminated against, harassed, or subjected to retaliation, or who has observed harassment, discrimination, or retaliation, is encouraged to promptly report such conduct in accordance with the procedures set forth in this policy.

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Supervisors and managers receiving information regarding alleged violations of this policy shall determine if there is any basis for the allegation and shall proceed with a resolution as stated below.

108.4.1 QUESTIONS OR CLARIFICATION

Members with questions regarding what constitutes discrimination, sexual harassment, or retaliation are encouraged to contact a supervisor, a manager, the Sheriff, the Personnel Director, the County Administrator, or the California Department of Fair Employment and Housing (DFEH) for further information, direction, or clarification (Government Code § 12950).

108.4.2 SUPERVISOR RESPONSIBILITIES

The responsibilities of supervisors and managers shall include but are not limited to:

(a) Continually monitoring the work environment and striving to ensure that it is free from all types of unlawful discrimination, including harassment or retaliation.

(b) Taking prompt, appropriate action within their work units to avoid and minimize the incidence of any form of discrimination, harassment, or retaliation.

(c) Ensuring that their subordinates understand their responsibilities under this policy.

(d) Ensuring that members who make complaints or who oppose any unlawful employment practices are protected from retaliation and that such matters are kept confidential to the extent possible.

(e) Making a timely determination regarding the substance of any allegation based upon all available facts.

(f) Notifying the Sheriff or the Personnel Director in writing of the circumstances surrounding any reported allegations or observed acts of discrimination, harassment, or retaliation no later than the next business day.

108.4.3 SUPERVISOR'S ROLE

Supervisors and managers shall be aware of the following:

(a) Behavior of supervisors and managers should represent the values of the Office and professional standards.

(b) False or mistaken accusations of discrimination, harassment, or retaliation can have negative effects on the careers of innocent members.

Nothing in this section shall be construed to prevent supervisors or managers from discharging supervisory or management responsibilities, such as determining duty assignments, evaluating or counseling members, or issuing discipline, in a manner that is consistent with established procedures.

108.5 INVESTIGATION OF COMPLAINTS

Various methods of resolution exist. During the pendency of any such investigation, the supervisor of the involved member should take prompt and reasonable steps to mitigate or eliminate any continuing abusive or hostile work environment. It is the policy of the Office that all complaints of

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discrimination, retaliation, or harassment shall be fully documented and promptly and thoroughly investigated.

108.5.1 SUPERVISOR RESOLUTION

Members who believe they are experiencing discrimination, harassment, or retaliation should be encouraged to inform the individual that the behavior is unwelcome, offensive, unprofessional, or inappropriate. However, if the member feels uncomfortable or threatened or has difficulty expressing the member's concern, or if this does not resolve the concern, assistance should be sought from a supervisor or manager who is a rank higher than the alleged transgressor.

108.5.2 FORMAL INVESTIGATION

If the complaint cannot be satisfactorily resolved through the supervisory resolution process, a formal investigation will be conducted.

The person assigned to investigate the complaint will have full authority to investigate all aspects of the complaint. Investigative authority includes access to records and the cooperation of any members involved. No influence will be used to suppress any complaint and no member will be subject to retaliation or reprisal for filing a complaint, encouraging others to file a complaint, or for offering testimony or evidence in an investigation.

Formal investigation of the complaint will be confidential to the extent possible and will include but is not limited to details of the specific incident, frequency and dates of occurrences, and names of any witnesses. Witnesses will be advised regarding the prohibition against retaliation, and that a disciplinary process, up to and including termination, may result if retaliation occurs.

Members who believe they have been discriminated against, harassed, or retaliated against because of their protected status are encouraged to follow the chain of command but may also file a complaint directly with the Sheriff, the Personnel Director, or the County Administrator.

108.5.3 ALTERNATIVE COMPLAINT PROCESS

No provision of this policy shall be construed to prevent any member from seeking legal redress outside the Office. Members who believe that they have been harassed, discriminated against or retaliated against are entitled to bring complaints of employment discrimination to federal, state and/or local agencies responsible for investigating such allegations. Specific time limitations apply to the filing of such charges. Members are advised that proceeding with complaints under the provisions of this policy does not in any way affect those filing requirements.

108.6 DOCUMENTATION OF COMPLAINTS

All complaints or allegations shall be thoroughly documented on the appropriate forms and in a manner designated by the Sheriff. The outcome of all reports shall be:

(a) Approved by the Sheriff, the County Administrator, or the Personnel Director, depending on the ranks of the involved parties.

(b) Maintained in accordance with the established records retention schedule.

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108.6.1 NOTIFICATION OF DISPOSITION

The complainant and/or victim will be notified in writing of the disposition of the investigation and the actions taken to remedy or address the circumstances giving rise to the complaint.

108.7 TRAINING

All new members shall be provided with a copy of this policy as part of their orientation. The policy shall be reviewed with each new member. The member shall certify by signing the prescribed form that the member has been advised of this policy, is aware of and understands its contents, and agrees to abide by its provisions during the member's term with the Office.

All members shall receive annual training on the requirements of this policy and shall certify by signing the prescribed form that they have reviewed the policy, understand its contents, and agree that they will continue to abide by its provisions.

108.7.1 STATE-REQUIRED TRAINING

The Training Manager should ensure that employees receive the required state training and education regarding sexual harassment, prevention of abusive conduct, and harassment based on gender identity, gender expression, and sexual orientation as follows (Government Code § 12950.1; 2 CCR 11024):

(a) Supervisory employees shall receive two hours of classroom or other effective interactive training and education within six months of assuming a supervisory position.

(b) All other employees shall receive one hour of classroom or other effective interactive training and education within six months of their employment or sooner for seasonal or temporary employees as described in Government Code § 12950.1.

(c) All employees shall receive refresher training every two years thereafter.

If the required training is to be provided by DFEH online training courses, the Training Manager should ensure that employees are provided the following DFEH website address to the training course https://www.dfeh.ca.gov/shpt/ (Government Code § 12950; 2 CCR 11023).

108.7.2 TRAINING RECORDS

The Training Manager shall be responsible for maintaining records of all discriminatory harassment training provided to members. Records shall be retained in accordance with established records retention schedules and for a minimum of two years (2 CCR 11024).

108.8 REQUIRED POSTERS

The Office shall display the required posters regarding discrimination, harassment, and transgender rights in a prominent and accessible location for members (Government Code § 12950).

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108.9 WORKING CONDITIONS

The Administration Captain or the authorized designee should be responsible for reviewing facility design and working conditions for discriminatory practices. This person should collaborate with other county employees who are similarly tasked (2 CCR 11034).

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Grievances

109.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the Tehama County Sheriff's Office grievance system. The grievance system is intended to facilitate communication and to promptly and equitably address employee grievances in the workplace.

109.1.1 GRIEVANCE DEFINED

A grievance is a difference of opinion or dispute regarding the meaning, interpretation, or application of any of the following:

- The employee bargaining agreement
- This Custody Manual
- Rules and regulations governing personnel practices or working conditions
- Workplace issues that do not amount to misconduct under the Personnel Complaints Policy, such as fraud, waste, abuse of authority, gross mismanagement, or any inappropriate conduct or practices, including violations that may pose a threat to the health, safety, or well-being of members.

Specifically outside the category of grievances are complaints related to allegations of discrimination or harassment subject to the Discriminatory Harassment Policy. Also outside the category of grievances are personnel complaints regarding any allegation of misconduct or improper job performance against any office employee that, if true, would constitute a violation of office policy or federal, state, or local law, as set forth in the Personnel Complaints Policy.

109.2 POLICY

It is the policy of this office to provide a just and equitable system for the prompt handling of employee grievances without discrimination, coercion, restraint, or retaliation against any employee who submits or is otherwise involved in a grievance.

109.3 PROCESS

Grievances may be brought by an individual employee or by an employee group representative. Employees may have representation during the grievance process.

Except as otherwise required under a collective bargaining agreement, if an employee believes that they have a grievance as defined above, that employee shall:

(a) Attempt to resolve the issue through informal discussion with their immediate supervisor.

(b) If after a reasonable amount of time, generally seven days, the grievance cannot be settled by the immediate supervisor, the employee may request an interview with the appropriate Captain.

(c) If a successful resolution is not found with the Captain, the employee may request a meeting with the Sheriff.

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(d) If the employee and the Sheriff are unable to arrive at a mutual solution, the employee shall proceed as follows:

1. Submit a written statement of the grievance to the Sheriff and provide a copy to the employee's immediate supervisor.
2. Include the following information in the written statement:
   (a) The basis for the grievance (i.e., the facts of the case).
   (b) The allegation of any specific wrongful act and the harm done.
   (c) The specific policies, rules, or regulations at issue.
   (d) The remedy or goal being sought by the grievance.

(e) The supervisor shall provide the employee with a signed acknowledgment of the grievance that shall include the date and time of receipt.

(f) The Sheriff and the County Administrator should review the grievance and respond to the employee within 14 calendar days.

1. The response will be in writing, and will affirm or deny the allegations.
2. The response shall include any remedies, if appropriate.
3. The decision of the Sheriff is considered final.

109.4 GRIEVANCE RECORDS

At the conclusion of the grievance process, all documents pertaining to the process shall be forwarded to the Administration Division for inclusion into a secure file for all written grievances. Copies of the documents should also be sent to the Personnel Department.

109.5 GRIEVANCE AUDITS

The Training Manager should perform an annual audit of all grievances filed the previous calendar year to evaluate whether any change in policy, procedure, or training may be appropriate to avoid future grievances. The Training Manager should record these findings in a confidential memorandum to the Sheriff without including any identifying information about any individual grievance.

109.6 POLICY OR TRAINING IMPLICATIONS

If an employee who participates in the grievance review process identifies any issue that may warrant an immediate revision to this Custody Manual, a procedural change, or an immediate training need, the employee should promptly notify the Sheriff in the memorandum.

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Post Orders

110.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the development of post orders and the training of members assigned to each post.

110.2 POLICY

It is the policy of this office to develop comprehensive post orders for every position. Copies of the orders should be maintained at each post or available electronically. Members shall be familiar with the post orders before working a position.

110.3 DEVELOPMENT

Clear procedures should be incorporated into post orders for all regular daily activities including, but not limited to, safety checks, head counts, meals, sick call, recreation, clothing exchange, mail distribution and response to emergencies, such as fires, natural disasters and criminal acts.

110.4 REVIEW AND UPDATE

Post orders shall be reviewed at least annually and updated whenever necessary by the Jail Commander or the authorized designee.

110.5 TRAINING

The Training Manager shall ensure that all staff members assigned to posts are properly trained to perform all of the duties and responsibilities described in the post orders. This is particularly true in fire, life-safety and the emergency response procedures that have been implemented by the Jail Commander. This may include the use of self-contained breathing apparatus (SCBA) if such equipment is available and/or required by the local fire authority. All training should be documented in each member’s training file and retained in accordance with established records retention schedules.

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Personnel Complaints

111.1 PURPOSE AND SCOPE

This policy provides guidelines for the reporting, investigation, and disposition of complaints regarding the conduct of members of the Tehama County Sheriff's Office. This policy shall not apply to any questioning, counseling, instruction, informal verbal admonishment, or other routine or unplanned contact of a member in the normal course of duty, by a supervisor or any other member, nor shall this policy apply to a criminal investigation.

111.2 POLICY

The Tehama County Sheriff's Office takes seriously all complaints regarding the service provided by the Office and the conduct of its members.

The Office will accept and address all complaints of misconduct in accordance with this policy and applicable federal, state, and local laws, municipal and county rules, and the requirements of any collective bargaining agreements.

It is also the policy of this office to ensure that the community can report misconduct without concern for reprisal or retaliation.

111.3 PERSONNEL COMPLAINTS

Personnel complaints include any allegation of misconduct or improper job performance that, if true, would constitute a violation of office policy or federal, state, or local law, policy, or rule. Personnel complaints may be generated internally or by the public.

Inquiries about conduct or performance that, if true, would not violate office policy or federal, state, or local law, policy, or rule may be handled informally by a supervisor and shall not be considered a personnel complaint. Such inquiries generally include clarification regarding policy, procedures, or the response to specific incidents by the Office.

111.3.1 COMPLAINT CLASSIFICATIONS

Personnel complaints shall be classified in one of the following categories:

Informal - A matter in which the Shift Supervisor is satisfied that appropriate action has been taken by a supervisor of rank greater than the accused member.

Formal - A matter in which a supervisor determines that further action is warranted. Such complaints may be investigated by a supervisor of rank greater than the accused member or referred to the Internal Affairs Unit, depending on the seriousness and complexity of the investigation.

Incomplete - A matter in which the complaining party either refuses to cooperate or becomes unavailable after diligent follow-up investigation. At the discretion of the assigned supervisor or the Internal Affairs Unit, such matters may be further investigated depending on the seriousness of the complaint and the availability of sufficient information.

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111.3.2 SOURCES OF COMPLAINTS

The following applies to the source of complaints:

(a) Individuals from the public may make complaints in any form, including in writing, by email, in person, or by telephone.

(b) Any office member becoming aware of alleged misconduct shall immediately notify a supervisor.

(c) Supervisors shall initiate a complaint based upon observed misconduct or receipt from any source alleging misconduct that, if true, could result in disciplinary action.

(d) Anonymous and third-party complaints should be accepted and investigated to the extent that sufficient information is provided.

(e) Tort claims and lawsuits may generate a personnel complaint.

111.4 AVAILABILITY AND ACCEPTANCE OF COMPLAINTS

111.4.1 COMPLAINT FORMS

Personnel complaint forms will be maintained in a clearly visible location in the public area of the office facility and be accessible through the office website. Forms may also be available at other county facilities.

Personnel complaint forms in languages other than English may also be provided, as determined necessary or practicable.

111.4.2 ACCEPTANCE

All complaints will be courteously accepted by any office member and promptly given to the appropriate supervisor. Although written complaints are preferred, a complaint may also be filed orally, either in person or by telephone. Such complaints will be directed to a supervisor. If a supervisor is not immediately available to take an oral complaint, the receiving member shall obtain contact information sufficient for the supervisor to contact the complainant. The supervisor, upon contact with the complainant, shall complete and submit a complaint form as appropriate.

Although not required, complainants should be encouraged to file complaints in person so that proper identification, signatures, photographs, or physical evidence may be obtained as necessary.

A complainant shall be provided with a copy of the complaining party's statement at the time it is filed with the Office (Penal Code § 832.7).

111.4.3 AVAILABILITY OF WRITTEN PROCEDURES

The Office shall make available to the public a written description of the investigation procedures for complaints (Penal Code § 832.5).

111.4.4 HATE COMPLAINTS AGAINST PEACE OFFICERS

Internal complaints or complaints from the public shall be accepted and investigated in accordance with this policy where it is alleged that a correctional officer has in the previous seven years, and

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since age 18, engaged in membership in a hate group, participated in a hate group activity, or advocated any public expression of hate (Penal Code § 13682).

111.5 DOCUMENTATION

Supervisors shall ensure that all formal and informal complaints are documented on a complaint form. The supervisor shall ensure that the nature of the complaint is defined as clearly as possible.

All complaints and inquiries should also be documented in a log that records and tracks complaints. The log shall include the nature of the complaint and the actions taken to address the complaint. On an annual basis, the Jail Commander should audit the log and send an audit report to the Sheriff or the authorized designee.

111.6 ADMINISTRATIVE INVESTIGATIONS

Allegations of misconduct will be administratively investigated as follows.

111.6.1 SUPERVISOR RESPONSIBILITIES

In general, the primary responsibility for the investigation of a personnel complaint shall rest with the member's immediate supervisor, unless the supervisor is the complainant, or the supervisor is the ultimate decision-maker regarding disciplinary action or has any personal involvement regarding the alleged misconduct. The Sheriff or the authorized designee may direct that another supervisor investigate any complaint.

A supervisor who becomes aware of alleged misconduct shall take reasonable steps to prevent aggravation of the situation.

The responsibilities of supervisors include but are not limited to:

(a) Ensuring that upon receiving or initiating any formal complaint, a complaint form is completed.
    1. The original complaint form will be directed to the Shift Supervisor of the accused member, via the chain of command, who will take appropriate action and/or determine who will have responsibility for the investigation.
    2. In circumstances where the integrity of the investigation could be jeopardized by reducing the complaint to writing or where the confidentiality of a complainant is at issue, a supervisor shall orally report the matter to the member's Captain or the Sheriff, who will initiate appropriate action.

(b) Responding to all complainants in a courteous and professional manner.

(c) Resolving those personnel complaints that can be resolved immediately.
    1. Follow-up contact with the complainant should be made within 24 hours of the Office receiving the complaint.
    2. If the matter is resolved and no further action is required, the supervisor will note the resolution on a complaint form and forward the form to the Shift Supervisor.

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(d) Ensuring that upon receipt of a complaint involving allegations of a potentially serious nature, the Shift Supervisor and the Sheriff are notified via the chain of command as soon as practicable.

(e) Promptly contacting the Personnel Department and the Shift Supervisor for direction regarding the supervisor's role in addressing a complaint that relates to sexual, racial, ethnic, or other forms of prohibited harassment or discrimination.

(f) Forwarding unresolved personnel complaints to the Shift Supervisor, who will determine whether to contact the complainant or assign the complaint for investigation.

(g) Informing the complainant of the investigator’s name and the complaint number within three days after assignment.

(h) Investigating a complaint as follows:

1. Making reasonable efforts to obtain names, addresses, and telephone numbers of witnesses.

2. When appropriate, ensuring immediate medical attention is provided and photographs of alleged injuries and accessible uninjured areas are taken.

(i) Ensuring that the procedural rights of the accused member are followed (Government Code § 3303 et seq.).

(j) Ensuring interviews of the complainant are generally conducted during reasonable hours.

111.6.2 ADMINISTRATIVE INVESTIGATION PROCEDURES

Whether conducted by a supervisor or a member of the Internal Affairs Unit, the following applies to members covered by the Public Safety Officers Procedural Bill of Rights Act (POBR) (Government Code § 3303):

(a) Interviews of an accused member shall be conducted during reasonable hours and preferably when the member is on-duty. If the member is off-duty, the member shall be compensated.

(b) Unless waived by the member, interviews of an accused member shall be at the Tehama County Sheriff's Office or other reasonable and appropriate place.

(c) No more than two interviewers should ask questions of an accused member.

(d) Prior to any interview, a member shall be informed of the nature of the investigation, the name, rank, and command of the correctional officer in charge of the investigation, the interviewing officers, and all other persons to be present during the interview.

(e) All interviews should be for a reasonable period and the member's personal needs should be accommodated.

(f) No member should be subjected to offensive or threatening language, nor shall any promises, rewards, or other inducements be used to obtain answers.

(g) Any member refusing to answer questions directly related to the investigation may be ordered to answer questions administratively and may be subject to discipline for failing to do so.

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1. A member should be given an order to answer questions in an administrative investigation that might incriminate the member in a criminal matter only after the member has been given a *Lybarger* advisement. Administrative investigators should consider the impact that compelling a statement from the member may have on any related criminal investigation and should take reasonable steps to avoid creating any foreseeable conflicts between the two related investigations. This may include conferring with the person in charge of the criminal investigation (e.g., discussion of processes, timing, implications).
2. No information or evidence administratively coerced from a member may be provided to anyone involved in conducting the criminal investigation or to any prosecutor.

(h) The interviewer should record all interviews of members and witnesses. The member may also record the interview. If the member has been previously interviewed, a copy of that recorded interview shall be provided to the member prior to any subsequent interview.

(i) All members subjected to interviews that could result in discipline have the right to have an uninvolved representative present during the interview. However, in order to maintain the integrity of each individual's statement, involved members shall not consult or meet with a representative or attorney collectively or in groups prior to being interviewed.

(j) All members shall provide complete and truthful responses to questions posed during interviews.

(k) No member may be requested or compelled to submit to a polygraph examination, nor shall any refusal to submit to such examination be mentioned in any investigation (Government Code § 3307).

No investigation shall be undertaken against any correctional officer solely because the correctional officer has been placed on a prosecutor's *Brady* list or the name of the correctional officer may otherwise be subject to disclosure pursuant to *Brady v. Maryland*. However, an investigation may be based on the underlying acts or omissions for which the correctional officer has been placed on a *Brady* list or may otherwise be subject to disclosure pursuant to *Brady v. Maryland* (Government Code § 3305.5).

111.6.3 ADMINISTRATIVE INVESTIGATION FORMAT

Formal investigations of personnel complaints shall be thorough, complete, and essentially follow this format:

Introduction - Include the identity of the members, the identity of the assigned investigators, the initial date, and source of the complaint.

Synopsis - Provide a brief summary of the facts giving rise to the investigation.

Summary - List the allegations separately, including applicable policy sections, with a brief summary of the evidence relevant to each allegation. A separate recommended finding should be provided for each allegation.

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Evidence - Each allegation should be set forth with the details of the evidence applicable to each allegation provided, including comprehensive summaries of member and witness statements. Other evidence related to each allegation should also be detailed in this section.

Conclusion - A recommendation regarding further action or disposition should be provided.

Exhibits - A separate list of exhibits (e.g., recordings, photos, documents) should be attached to the report.

111.6.4 DISPOSITIONS

Each personnel complaint shall be classified with one of the following dispositions:

Unfounded - When the investigation discloses that the alleged acts did not occur or did not involve office members. Complaints that are determined to be frivolous will fall within the classification of unfounded (Penal Code § 832.8).

Exonerated - When the investigation discloses that the alleged act occurred but that the act was justified, lawful, and/or proper.

Not sustained - When the investigation discloses that there is insufficient evidence to sustain the complaint or fully exonerate the member.

Sustained - A final determination by an investigating agency, commission, board, hearing officer, or arbitrator, as applicable, following an investigation and opportunity for an administrative appeal pursuant to Government Code § 3304 and Government Code § 3304.5 that the actions of a correctional officer were found to violate law or office policy (Penal Code § 832.8).

If an investigation discloses misconduct or improper job performance that was not alleged in the original complaint, the investigator shall take appropriate action with regard to any additional allegations.

111.6.5 COMPLETION OF INVESTIGATIONS

Every investigator or supervisor assigned to investigate a personnel complaint or other alleged misconduct shall proceed with due diligence in an effort to complete the investigation within one year from the date of discovery by an individual authorized to initiate an investigation (Government Code § 3304).

In the event that an investigation cannot be completed within one year of discovery, the assigned investigator or supervisor shall ensure that an extension or delay is warranted within the exceptions set forth in Government Code § 3304(d) or Government Code § 3508.1.

111.6.6 NOTICE TO COMPLAINANT OF INVESTIGATION STATUS

The member conducting the investigation should provide the complainant with periodic updates on the status of the investigation, as appropriate.

111.7 ADMINISTRATIVE SEARCHES

Assigned lockers, storage spaces, and other areas, including desks, offices, and vehicles, may be searched as part of an administrative investigation upon a reasonable suspicion of misconduct.

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Such areas may also be searched any time by a supervisor for non-investigative purposes, such as obtaining a needed report, radio, or other document or equipment.

Lockers and storage spaces may only be administratively searched in the member's presence, with the member's consent, with a valid search warrant, or where the member has been given reasonable notice that the search will take place (Government Code § 3309).

111.7.1 DISCLOSURE OF FINANCIAL INFORMATION
An employee may be compelled to disclose personal financial information under the following circumstances (Government Code § 3308):

(a) Pursuant to a state law or proper legal process

(b) Information exists that tends to indicate a conflict of interest with official duties

(c) If the employee is assigned to or being considered for a special assignment with a potential for bribes or other improper inducements

111.8 ADMINISTRATIVE LEAVE

When a complaint of misconduct is of a serious nature, or when circumstances indicate that allowing the accused to continue to work would adversely affect the mission of the Office, the Sheriff or the authorized designee may temporarily assign an accused employee to administrative leave. Any employee placed on administrative leave:

(a) May be required to relinquish any office badge, identification, assigned weapons, and any other office equipment.

(b) Shall be required to continue to comply with all policies and lawful orders of a supervisor.

(c) May be temporarily reassigned to a different shift, generally a normal business-hours shift, during the investigation. The employee may be required to remain available for contact at all times during such shift, and will report as ordered.

111.9 CRIMINAL INVESTIGATION

Where a member is accused of potential criminal conduct, a separate supervisor or investigator shall be assigned to investigate the criminal allegations apart from any administrative investigation. Any separate administrative investigation may parallel a criminal investigation.

The Sheriff shall be notified as soon as practicable when a member is accused of criminal conduct. The Sheriff may request a criminal investigation by an outside law enforcement agency.

A member accused of criminal conduct shall be advised of the member's constitutional rights (Government Code § 3303(h)). The member should not be administratively ordered to provide any information in the criminal investigation.

The Tehama County Sheriff's Office may release information concerning the arrest or detention of any member, including a correctional officer, that has not led to a conviction. No disciplinary action should be taken until an independent administrative investigation is conducted.

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111.10 POST-ADMINISTRATIVE INVESTIGATION PROCEDURES

Upon completion of a formal investigation, an investigation report should be forwarded to the Sheriff through the chain of command. Each level of command should review the report and include comments in writing before forwarding the report. The Sheriff may accept or modify any classification or recommendation for disciplinary action.

111.10.1 CAPTAIN RESPONSIBILITIES

Upon receipt of any completed personnel investigation, the Captain of the involved member shall review the entire investigative file, the member's personnel file, and any other relevant materials.

The Captain may make recommendations regarding the disposition of any allegations and the amount of discipline, if any, to be imposed.

Prior to forwarding recommendations to the Sheriff, the Captain may return the entire investigation to the assigned investigator or supervisor for further investigation or action.

When forwarding any written recommendation to the Sheriff, the Captain shall include all relevant materials supporting the recommendation. Actual copies of a member's existing personnel file need not be provided and may be incorporated by reference.

111.10.2 SHERIFF RESPONSIBILITIES

Upon receipt of any written recommendation for disciplinary action, the Sheriff shall review the recommendation and all accompanying materials. The Sheriff may modify any recommendation and/or may return the file to the Captain for further investigation or action.

Once the Sheriff is satisfied that no further investigation or action is required by staff, the Sheriff shall determine the amount of discipline, if any, that should be imposed. In the event disciplinary action is proposed, the Sheriff shall provide the member with a pre-disciplinary procedural due process hearing *(Skelly)* by providing written notice of the charges, proposed action, and reasons for the proposed action. Written notice shall be provided within one year from the date of discovery of the misconduct (Government Code § 3304(d)). The Sheriff shall also provide the member with:

(a) Access to all of the materials considered by the Sheriff in recommending the proposed discipline.

(b) An opportunity to respond orally or in writing to the Sheriff within five days of receiving the notice.

    1. Upon a showing of good cause by the member, the Sheriff may grant a reasonable extension of time for the member to respond.

    2. If the member elects to respond orally, the presentation may be recorded by the Office. Upon request, the member shall be provided with a copy of the recording.

Once the member has completed a response, or if the member has elected to waive any such response, the Sheriff shall consider all information received in regard to the recommended discipline. The Sheriff shall render a timely written decision to the member and specify the grounds and reasons for discipline and the effective date of the discipline. Once the Sheriff has issued a written decision, the discipline shall become effective.

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111.10.3 NOTICE OF FINAL DISPOSITION TO THE COMPLAINANT
The Sheriff or the authorized designee shall ensure that the complainant is notified of the disposition (i.e., sustained, not sustained, exonerated, unfounded) of the complaint (Penal Code § 832.7(f)).

111.10.4 NOTICE REQUIREMENTS
The disposition of any civilian's complaint shall be released to the complaining party within 30 days of the final disposition. This release shall not include what discipline, if any was imposed (Penal Code § 832.7(f)).

111.11 PRE-DISCIPLINE EMPLOYEE RESPONSE

The pre-discipline process is intended to provide the accused employee with an opportunity to present a written or oral response to the Sheriff after having had an opportunity to review the supporting materials and prior to imposition of any recommended discipline. The employee shall consider the following:

(a) The response is not intended to be an adversarial or formal hearing.

(b) Although the employee may be represented by an uninvolved representative or legal counsel, the response is not designed to accommodate the presentation of testimony or witnesses.

(c) The employee may suggest that further investigation could be conducted or the employee may offer any additional information or mitigating factors for the Sheriff to consider.

(d) In the event that the Sheriff elects to conduct further investigation, the employee shall be provided with the results prior to the imposition of any discipline.

(e) The employee may thereafter have the opportunity to further respond orally or in writing to the Sheriff on the limited issues of information raised in any subsequent materials.

111.12 RESIGNATIONS/RETIREMENTS PRIOR TO DISCIPLINE

In the event that a member tenders a written resignation or notice of retirement prior to the imposition of discipline, it shall be noted in the file. The tender of a resignation or retirement by itself shall not serve as grounds for the termination of any pending investigation or discipline (Penal Code § 13510.8).

111.13 POST-DISCIPLINE APPEAL RIGHTS

Non-probationary employees have the right to appeal a suspension without pay, punitive transfer, demotion, reduction in pay or step, or termination from employment. The employee has the right to appeal using the procedures established by any collective bargaining agreement, Memorandum of Understanding, and/or personnel rules.

In the event of punitive action against an employee covered by the POBR, the appeal process shall be in compliance with Government Code § 3304 and Government Code § 3304.5.

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During any administrative appeal, evidence that a correctional officer has been placed on a *Brady* list or is otherwise subject to *Brady* restrictions may not be introduced unless the underlying allegations of misconduct have been independently established. Thereafter, such *Brady* evidence shall be limited to determining the appropriateness of the penalty (Government Code § 3305.5).

111.14 PROBATIONARY EMPLOYEES AND OTHER MEMBERS

At-will and probationary employees and those members other than non-probationary employees may be released from employment for non-disciplinary reasons (e.g., failure to meet standards) without adherence to any of the procedures set forth in this policy or any right to appeal. However, any probationary correctional officer subjected to an investigation into allegations of misconduct shall be entitled to those procedural rights, as applicable, set forth in the POBR (Government Code § 3303; Government Code § 3304).

At-will, probationary employees and those other than non-probationary employees subjected to discipline or termination as a result of allegations of misconduct shall not be deemed to have acquired a property interest in their position, but shall be given the opportunity to appear before the Sheriff or the authorized designee for a non-evidentiary hearing for the sole purpose of attempting to clear their name or liberty interest. There shall be no further opportunity for appeal beyond the liberty interest hearing and the decision of the Sheriff shall be final.

111.15 RETENTION OF PERSONNEL INVESTIGATION FILES

All personnel complaints shall be maintained in accordance with the established records retention schedule and as described in the Personnel Records Policy.

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Anti-Retaliation

112.1 PURPOSE AND SCOPE

This policy prohibits retaliation against members who identify workplace issues, such as fraud, waste, abuse of authority, gross mismanagement, or any inappropriate conduct or practices, including violations that may pose a threat to the health, safety, or well-being of members.

This policy does not prohibit actions taken for nondiscriminatory or non-retaliatory reasons, such as discipline for cause.

These guidelines are intended to supplement and not limit members' access to other applicable remedies. Nothing in this policy shall diminish the rights or remedies of a member pursuant to any applicable federal law, provision of the U.S. Constitution, state and local law, ordinance, or memorandum of understanding.

112.2 POLICY

The Tehama County Sheriff's Office has a zero tolerance for retaliation and is committed to taking reasonable steps to protect from retaliation members who, in good faith, engage in permitted behavior or who report or participate in the reporting or investigation of workplace issues. All complaints of retaliation will be taken seriously and will be promptly and appropriately investigated.

112.3 RETALIATION PROHIBITED

No member may retaliate against any person for engaging in lawful or otherwise permitted behavior; for opposing a practice believed to be unlawful, unethical, discriminatory, or retaliatory; for reporting or making a complaint under this policy; or for participating in any investigation related to a complaint under this or any other policy.

Retaliation includes any adverse action or conduct, including but not limited to:

- Refusing to hire or denying a promotion.
- Extending the probationary period.
- Unjustified reassignment of duties or change of work schedule.
- Real or implied threats or other forms of intimidation to dissuade the reporting of wrongdoing or filing of a complaint, or as a consequence of having reported or participated in protected activity.
- Taking unwarranted disciplinary action.
- Spreading rumors about the person filing the complaint or about the alleged wrongdoing.
- Shunning or unreasonably avoiding a person because the person has engaged in protected activity.

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112.3.1 RETALIATION PROHIBITED FOR REPORTING VIOLATIONS
A correctional officer shall not be retaliated against for reporting a suspected violation of a law or regulation by another correctional officer to a supervisor or other person in the Office who has the authority to investigate the violation (Government Code § 7286 (b)).

112.4 COMPLAINTS OF RETALIATION

Any members who feel they have been retaliated against in violation of this policy should promptly report the matter to any supervisor, any command staff member, the Sheriff, or the county Personnel Director.

Members shall act in good faith, not engage in unwarranted reporting of trivial or minor deviations or transgressions, and make reasonable efforts to verify facts before making any complaint in order to avoid baseless allegations. Members shall not report or state an intention to report information or an allegation knowing it to be false or with willful or reckless disregard for the truth or falsity of the information, or otherwise act in bad faith.

Investigations are generally more effective when the identity of the reporting member is known, thereby allowing investigators to obtain additional information from the reporting member. However, complaints may be made anonymously. All reasonable efforts shall be made to protect the reporting member's identity. However, confidential information may be disclosed to the extent required by law or to the degree necessary to conduct an adequate investigation and make a determination regarding a complaint. In some situations, the investigative process may not be complete unless the source of the information and a statement by the member are part of the investigative process.

112.5 SUPERVISOR RESPONSIBILITIES

Supervisors are expected to remain familiar with this policy and ensure that members under their command are aware of its provisions.

The responsibilities of supervisors include but are not limited to:

(a) Ensuring complaints of retaliation are investigated as provided in the Personnel Complaints Policy.

(b) Receiving all complaints in a fair and impartial manner.

(c) Documenting the complaint and any steps taken to resolve the problem.

(d) Acknowledging receipt of the complaint, notifying the Sheriff via the chain of command, and explaining to the member how the complaint will be handled.

(e) Taking appropriate and reasonable steps to mitigate any further violations of this policy.

(f) Monitoring the work environment to ensure that any member making a complaint is not subjected to further retaliation.

(g) Periodic follow-up with the complainant to ensure that retaliation is not continuing.

(h) Not interfering with or denying the right of a member to make any complaint.

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(i) Taking reasonable steps to accommodate requests for assignment or schedule changes made by a member who may be the target of retaliation if it would likely mitigate the potential for further violations of this policy.

112.6 COMMAND STAFF RESPONSIBILITIES

The Sheriff should communicate to all supervisors the prohibition against retaliation.

Command staff shall treat all complaints as serious matters and shall ensure that prompt actions take place, including but not limited to:

(a) Communicating to all members the prohibition against retaliation.

(b) The timely review of complaint investigations.

(c) Remediation of any inappropriate conduct or condition and instituting measures to eliminate or minimize the likelihood of recurrence.

(d) The timely communication of the outcome to the complainant.

112.7 WHISTLE-BLOWING

California law protects members who (Labor Code § 1102.5; Government Code § 53296 et seq.):

(a) Report a violation of a state or federal statute or regulation to a government or law enforcement agency, including the member's supervisor or any other member with the authority to investigate the reported violation.

(b) Provide information or testify before a public body if the member has reasonable cause to believe a violation of law occurred.

(c) Refuse to participate in an activity that would result in a violation of a state or federal statute or regulation.

(d) File a complaint with a local agency about gross mismanagement or a significant waste of funds, abuse of authority, or a substantial and specific danger to public health or safety. Members shall exhaust all available administrative remedies prior to filing a formal complaint.

(e) Are family members of a person who has engaged in any protected acts described above.

Members are encouraged to report any legal violations through the chain of command (Labor Code § 1102.5).

Members who believe they have been the subject of retaliation for engaging in such protected behaviors should promptly report it to a supervisor. Supervisors should refer the complaint to the Internal Affairs Unit for investigation pursuant to the Personnel Complaints Policy.

112.7.1 DISPLAY OF WHISTLE-BLOWER LAWS

The Office shall display a notice to members regarding their rights and responsibilities under the whistle-blower laws, including the whistle-blower hotline maintained by the Office of the Attorney General (Labor Code § 1102.8).

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112.8 RECORDS RETENTION AND RELEASE

The Records Supervisor shall ensure that documentation of investigations is maintained in accordance with the established records retention schedules.

112.9 TRAINING

This policy should be reviewed with each new member.

All members should receive periodic refresher training on the requirements of this policy.

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Chapter 2 - Organization and Administration

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Drug- and Alcohol-Free Workplace

200.1 PURPOSE AND SCOPE

The purpose of this policy is to establish clear and uniform guidelines regarding drugs and alcohol in the workplace.

200.2 POLICY

It is the policy of this office to provide a drug- and alcohol-free workplace for all members.

200.3 GENERAL GUIDELINES

Alcohol and drug use in the workplace or on office time can endanger the health and safety of office members and the public. Such use shall not be tolerated (41 USC § 8103).

Members who have consumed an amount of an alcoholic beverage or taken any medication, or combination thereof, that would tend to adversely affect their mental or physical abilities shall not report for duty. Affected members shall notify the Shift Supervisor or appropriate supervisor as soon as the member is aware that he/she will not be able to report to work. If the member is unable to make the notification, every effort should be made to have a representative contact the supervisor in a timely manner. If the member is adversely affected while on-duty, he/she shall be immediately removed and released from work (see Work Restrictions in this policy).

200.3.1 USE OF MEDICATIONS

Members should avoid taking any medications that will impair their ability to safely and completely perform their duties. Any member who is medically required or has a need to take any such medication shall report that need to his/her immediate supervisor prior to commencing any on-duty status.

No member shall be permitted to work or drive a vehicle owned or leased by the Office while taking any medication that has the potential to impair his/her abilities, without a written release from his/her physician.

Possession of medical marijuana or being under the influence of marijuana on- or off-duty is prohibited and may lead to disciplinary action.

200.4 MEMBER RESPONSIBILITIES

Members shall report for work in an appropriate mental and physical condition. Members are prohibited from purchasing, manufacturing, distributing, dispensing, possessing or using controlled substances or alcohol on office premises or on office time (41 USC § 8103). The lawful possession or use of prescribed medications or over-the-counter remedies is excluded from this prohibition.

Members who are authorized to consume alcohol as part of a special assignment shall not do so to the extent of impairing on-duty performance.

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Members shall notify a supervisor immediately if they observe behavior or other evidence that they believe demonstrates that a fellow member poses a risk to the health and safety of the member or others due to drug or alcohol use.

Members are required to notify their immediate supervisors of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction (41 USC § 8103).

200.5 EMPLOYEE ASSISTANCE PROGRAM

There may be available a voluntary employee assistance program to assist those who wish to seek help for alcohol and drug problems (41 USC § 8103). Insurance coverage that provides treatment for drug and alcohol abuse also may be available. Employees should contact the Personnel Department, their insurance providers, or the employee assistance program for additional information. It is the responsibility of each employee to seek assistance before alcohol or drug problems lead to performance problems.

200.6 WORK RESTRICTIONS

If a member informs a supervisor that he/she has consumed any alcohol, drug or medication that could interfere with a safe and efficient job performance, the member may be required to obtain clearance from his/her physician before continuing to work.

If the supervisor reasonably believes, based on objective facts, that a member is impaired by the consumption of alcohol or other drugs, the supervisor shall prevent the member from continuing work and shall ensure that he/she is safely transported away from the Office.

200.7 REQUESTING SCREENING TESTS

The supervisor may request an employee to submit to a screening test under the following circumstances:

(a) The supervisor reasonably believes, based upon objective facts, that the employee is under the influence of alcohol or drugs that are impairing his/her ability to perform duties safely and efficiently.

(b) The employee discharges a firearm, other than by accident, in the performance of his/her duties.

(c) During the performance of his/her duties, the employee drives a motor vehicle and becomes involved in an incident that results in bodily injury to him/herself or another person or substantial damage to property.

200.7.1 SUPERVISOR RESPONSIBILITY

The supervisor shall prepare a written record documenting the specific facts that led to the decision to request the test, and shall inform the employee in writing of the following:

(a) The test will be given to detect either alcohol or drugs, or both.

(b) The result of the test is not admissible in any criminal proceeding against the employee.

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(c) The employee may refuse the test, but refusal may result in dismissal or other disciplinary action.

200.7.2 SCREENING TEST REFUSAL
An employee may be subject to disciplinary action if he/she:

(a) Fails or refuses to submit to a screening test as requested.

(b) After taking a screening test that indicates the presence of a controlled substance, fails to provide proof, within 72 hours after being requested, that he/she took the controlled substance as directed, pursuant to a current and lawful prescription issued in his/her name.

(c) Violates any provisions of this policy.

200.8 COMPLIANCE WITH THE DRUG-FREE WORKPLACE ACT

No later than 30 days following notice of any drug statute conviction for a violation occurring in the workplace involving a member, the Office will take appropriate disciplinary action, up to and including dismissal, and/or requiring the member to satisfactorily participate in a drug abuse assistance or rehabilitation program (41 USC § 8104).

200.9 CONFIDENTIALITY

The Office recognizes the confidentiality and privacy due to its members. Disclosure of any information relating to substance abuse treatment, except on a need-to-know basis, shall only be with the express written consent of the member involved or pursuant to lawful process.

The written results of any screening tests and all documents generated by the employee assistance program are considered confidential medical records and shall be maintained separately from the employee's other personnel files.

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Financial Practices

201.1 PURPOSE AND SCOPE

The Sheriff shall prepare and present an annual budget request that ensures an adequate allocation of resources for facility operations and programming. Budget requests shall be prepared in the manner and detail prescribed by the Office. Service goals and objectives should be delineated in the budget plan.

201.2 POLICY

The Office's responsibilities include the development of a budget plan, submitting the plan to the County Administrator, and monitoring the facility's progress toward meeting its budget objectives throughout the fiscal year.

A fiscal system has been established that accounts for all income and expenditures on an ongoing basis. Methods for collecting, safeguarding and disbursing monies shall comply with established accounting procedures.

201.3 BUDGET PLAN

The Captain will establish a system of quarterly projections of expenditures for personnel, operating expenses, equipment and capital projects. A record of a historical pattern of expenditures along with a justification for new expenditures should be used as the supporting documentation in the development of the budget plan.

Once completed, the budget plan will be submitted to the Finance Department for review and approval and/or returned to the Office for additional development. Once the budget plan has been approved by the County Administrator or the authorized designee, the Office may initiate expenditures in accordance with the plan.

201.4 FISCAL ACCOUNTING AND MANAGEMENT OF APPROVED BUDGET

The Finance Department is responsible for monitoring the facility's progress toward meeting its budget objectives throughout the fiscal year. Data on key performance indicators should be collected and evaluated at regular intervals and reviewed by the Sheriff and the Captain's budget officials and other policy-makers. Reports should contain at a minimum the following information:

- The budget amount
- The amount expended for the month
- The year-to-date amount expended
- Any outstanding encumbrances
- The cumulative total year-to-date expenditures plus outstanding encumbrances

When the Captain receives the monthly budget report, they should review all of the expenditure accounts for risk indicators, such as:

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- Significant variations in expenditures in an account used consistently, where the amounts charged are expected to vary little, if any, from month to month.
- Expenditures that are significantly beyond the forecasted amounts or whether the year-to-date percentages expended are significantly higher than the percentage of time elapsed.
- Large balances of/or long-term outstanding encumbrances.

Fiscal data collected during the year should be used to formulate a budget for the following year.

201.5 TRANSFERRING FUNDS AMONG BUDGET CATEGORIES

Unless otherwise specified, the transfer of funds among budget categories may require the approval of the County Administrator.

201.6 FINANCIAL AUDITS

The Sheriff should ensure that a financial audit of the facility is conducted annually. The audit shall conform to generally accepted auditing standards.

201.6.1 FINANCIAL AUDITS OF THE INCARCERATED PERSON WELFARE FUND

An annual financial audit of the Incarcerated Person Welfare Fund shall be conducted and shall include the Office's budget and any monies placed into the Incarcerated Person Welfare Fund. The methods used for collecting, safeguarding, and disbursing monies, including incarcerated persons' personal funds held by the facility, shall comply with accepted accounting procedures.

201.6.2 POSITION CONTROL

Position control is the process used by the Office to exercise control over the size and cost of its workforce. It ensures that any new, regular employee added to an agency’s payroll basis is filling a position that has been approved and budgeted, and that the rate of pay for the position is within the salary range for the job classification in which the position resides.

This facility is one of the most labor-intensive functions and therefore control of payroll expenditures is a crucial part of managing the facility budget. In order to exercise control of payroll expenditures, the Office will utilize a system of position control as part of its ongoing budget process.

201.7 STAFFING PLAN

The Captain should maintain an up-to-date staffing plan for the purpose of exercising position control. The staffing plan should include a comprehensive list of all positions in this facility. Each position has a descriptive job title that is associated with a description of the position's duties and responsibilities. Each position will have a written job description for all position classifications and post assignments that define responsibilities, duties, and qualifications.

The Captain should adhere to the following strategies for the management of position control and personnel costs:

(a) Ensure that this facility is staffed with the appropriate number and type of staff. The proper allocation and deployment of staff across shifts and functional units is essential.

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In addition, the availability of the right classification of staff (e.g., custody staff supervising incarcerated persons, maintenance staff performing maintenance, food service staff preparing meals) with the appropriate job skills and training enhances efficiency.

(b) Strategically time the filling of newly authorized positions or vacancies in current positions. Strategic timing is important throughout the budget year to create vacancy savings that can be used to address current budget year shortfalls.

(c) Manage the use of overtime carefully. The historical use of overtime should be tracked to make the case for additional staff and/or to provide sufficient funding in an overtime line item. The use of overtime should also be monitored at regular intervals to verify that it is being used within projected levels.

(d) Manage the use of part-time staff. The number of hours worked by part-time staff should be monitored to ensure that part-time employees are not working in excess of what has been authorized (e.g., a part-time employee should be working no more than an average of 20 hours per week).

(e) Establish and maintain procedures to ensure the accuracy and integrity of payroll documentation. Time cards, time sheets, and related documentation should reflect actual hours worked.

(f) Consider the impact of position upgrades on the entire job classification. An upgrade for one position may set the stage for upgrades of similar positions within the same job classification.

(g) Monitor the use of merit increases. Caution should be exercised in granting merit increases as a way of making up for perceived shortfalls in cost-of-living increases. Each merit increase, unless it is a one-time bonus, increases the base pay and has an impact on continuation funding in future budget years.

201.7.1 INSURANCE REQUIREMENTS

The Office shall ensure, by way of office risk managers, the procurement of adequate liability coverage of the jail operations. Coverage shall include, at minimum, workers' compensation, civil liability and the public employee blanket bond.

201.7.2 PERFORMANCE MONITORING

Performance monitoring necessitates the establishment of benchmarks and performance targets. The Finance Department shall develop budget benchmarks so that actual performance output can be compared with these targets to determine whether this facility is meeting the goals and objectives articulated in the budget.

A quarterly monitoring report assessing the effectiveness, efficiency and quality of custody operations will be provided to the Sheriff for the purpose of developing the budget for the following year.

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Supervision of Incarcerated Persons

202.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure the safety and security of the facility through the application of appropriate staffing levels.

202.2 POLICY

It is the policy of this facility to provide for the safety and security of citizens, staff and incarcerated persons through appropriate staffing levels that are sufficient to operate the facility and perform functions related to the safety, security, custody, and supervision of incarcerated persons.

202.3 SUPERVISION OF INCARCERATED PERSONS

There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of incarcerated persons, to ensure the implementation and operation of all programs and activities as required by Title 15 CCR Minimum Jail Standards, and to respond to emergencies when needed. Such staff must not leave the facility while incarcerated persons are present and should not be assigned duties that could conflict with the supervision of incarcerated persons (15 CCR 1027).

When a person from each gender is being held at this facility, a minimum of one correctional officer from each gender should be on-duty in the jail at all times.

Staff members shall not be placed in positions of responsibility for the supervision and welfare of incarcerated persons of the opposite gender in circumstances that can be described as an invasion of privacy or that may be degrading or humiliating to the incarcerated persons.

To the extent reasonably practicable, incarcerated person bathrooms will contain modesty screens that preserve privacy without creating areas that cannot be properly supervised.

The Captain or the authorized designee shall be responsible for developing staffing plans to comply with this policy. Records of staff deployment should be maintained in accordance with established records retention schedules (Penal Code § 4021; 15 CCR 1027).

202.4 SEPARATION OF DUTIES

Maintenance personnel are employed to perform preventive, routine, and emergency maintenance functions. Custody staff will not be given physical plant maintenance duties that distract from their primary responsibility of supervising incarcerated persons.

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Prohibition on Incarcerated Person Control

203.1 PURPOSE AND SCOPE

The purpose of this policy is to define the requirement that staff should at all times exercise control of the incarcerated person population under their supervision and should prevent incarcerated persons from controlling other incarcerated persons within the facility.

203.2 POLICY

All staff, including support staff, contractors, and volunteers should exercise control and supervision of all incarcerated persons under their control. It is the policy of this office to prohibit any staff member to implicitly allow, or by dereliction of duty allow, any incarcerated person or group of incarcerated persons to exert authority over any other incarcerated person (Penal Code § 4019.5; 15 CCR 1083(b)).

203.3 EDUCATION, DRUG, OR ALCOHOL PROGRAM ASSISTANTS

Nothing in the policy is intended to restrict the legitimate use of incarcerated persons to assist in the instruction of educational or drug and alcohol programs. Any use of incarcerated persons in this manner will be expressly authorized by the Captain in a legally prescribed manner. Any program that uses incarcerated persons to assist in legitimate program activities will be closely supervised by facility employees or vocational instructors. Nothing in this section is intended to authorize an incarcerated person program assistant to engage in disciplining other incarcerated persons.

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Equipment Inventory and Supplies

204.1 PURPOSE AND SCOPE

This facility must have the materials, supplies and equipment that are necessary to maintain effective and efficient operations. This policy establishes responsibilities and requirements for purchasing, storing and inventory of those items.

204.2 POLICY

The Jail Commander shall ensure that all jail property and fixed assets are inventoried annually and that all supplies purchased are reconciled with the invoice prior to payment.

The Tehama County Sheriff's Office maintains a secure storage area for the purpose of storing supplies and equipment. The Jail Commander shall maintain oversight of the area.

With the exception of medical supplies, which are ordered by the medical staff, the Finance Department is responsible for the purchasing and acquisition of materials and equipment for this facility. Supplies and equipment that are not needed for immediate use should be stored in a secure storage area.

Requisition forms bearing the signature of the Office Finance Officer should be completed and received by the Finance Department before any supplies or equipment are purchased and distributed to the facility. Any encumbrance to this facility’s budget requires review and approval by the Jail Commander and the Finance Officer.

The Office Finance Department, in conformance with established policies, is responsible for negotiating all other purchases.

204.3 PURCHASING

The Jail Commander, along with the Finance Officer, is responsible for managing the purchasing process to ensure that amounts and types of purchases fall within budget parameters. The Jail Commander must also ensure that this facility's purchasing process complies with applicable laws, regulations and office policies.

With approval of the Jail Commander and the Finance Officer, small purchases of under $100 that are a critical need may be procured by way of The Sheriff's Revolving Fund.

Personnel with spending authority should adhere to the following strategies:

(a) Be knowledgeable about the county’s requirements and procedures for purchasing goods and services.

(b) Establish a working relationship with this facility’s purchasing agent.

(c) Provide the purchasing agent with information describing the types of goods and services required to operate the facility.

(d) Ensure that staff with spending authority follow procedures that outline the process for submission and approval of purchase requisitions.

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(e) Review purchase requisitions to verify the need, urgency and priority.

(f) Monitor service contracts to ensure that this facility is receiving the scope and quality of services specified in the contract.

(g) Regularly monitor expenditures to make certain the purchase of goods and services is charged to the appropriate accounts and within budget limits.

(h) Keep purchase records to maintain the integrity and availability of purchasing documents, including requisitions, purchase orders, receiving reports and invoices.

(i) Maintain inventory records of disposal in accordance with county requirements and procedures.

204.4 EQUIPMENT INVENTORY

The Jail Commander or authorized designee will conduct an audit on all supplies and equipment annually. All losses will be reported by the Sheriff to the County Administrator. The Finance Department may also conduct an interim audit on all fixed assets in order to maintain a complete and accurate accounting of equipment and its location.

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Tool and Culinary Equipment

205.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a tightly controlled process for the use of tools and culinary equipment in order to reduce the risk of such items becoming weapons for the incarcerated person population. While there are times that specific incarcerated workers may need to possess tools or equipment for legitimate daily operations, the possession and use of those tools must be carefully monitored and controlled by staff (15 CCR 1029(a)(6)).

205.2 POLICY

It is the policy of this facility to securely store, inventory, control and monitor the use of tools and culinary equipment to ensure accountability and the secure use of these items (15 CCR 1029(a)(6)).

205.2.1 CUSTODY TOOLS

Tools include all implements that are maintained within the secure perimeter of the facility to complete specific tasks. These tools include, but are not limited to, mops, brooms, dustpans and floor polishers.

All tools, culinary items or medical equipment shall be locked in secure cabinets or storage rooms when not in use.

Any time tools are brought into a secure area where inmates are present, staff supervising the area shall count the number of tools brought in to ensure that the same number of tools is taken out.

Any tool that is used within the secure perimeter of the facility must be closely monitored and controlled by the staff supervising the area so that it cannot be used as a weapon (15 CCR 1029(a)(6)). Inmates who are assigned tasks that require these tools shall be closely supervised.

An inventory of all tools used and stored within the secure perimeter of the facility shall be developed and maintained by the Jail Commander. Tools will be inventoried by an assigned staff member at least once every 24 hours. The loss of any tool will be immediately reported to the on-duty supervisor, who shall initiate immediate action to locate or account for the missing tool, including:

(a) Detaining and searching any inmate who had access to the tool.

(b) Conducting a thorough search of the immediate area for the missing item.

(c) Initiating a facility-wide search.

The staff member responsible for the supervision of the use of the missing tool will prepare and submit a jail incident report to the Shift Supervisor documenting the specific tool that is missing and the circumstances of the disappearance. The jail incident report will be forwarded to the Jail Commander. All staff members involved in the search will submit a jail incident report to the on-duty supervisor documenting their findings.

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205.2.2 MAINTENANCE OR CONSTRUCTION TOOLS

Maintenance or construction tools are those tools and equipment that are brought into and out of the secure perimeter of the facility by employees or contractors to facilitate repairs or construction of the physical plant. Only the tools and equipment needed specifically for the intended work will be permitted into the facility. All tools and equipment will be inventoried and a list of the tools will be provided to the control booth prior to any tools or equipment being brought inside the secure perimeter.

A staff member will check the tools being brought into this facility against the inventory list. Prior to entering the secure perimeter of the facility, the contractor shall be instructed to maintain personal possession of the tools at all times. When it is necessary to complete a task in an area where inmates are present, the inmates shall be locked down by staff supervising the area.

When the person has finished working in the area, a correctional officer will ensure that all tools are accounted for. In the event of a discrepancy, the on-duty supervisor shall be immediately notified and appropriate action taken to locate or account for the items. Once all tools have been accounted for, the inmates may be released from lockdown.

205.2.3 EXTERIOR-USE TOOLS

Exterior-use tools are those that are used by inmate workers outside of the secure perimeter. These tools include, but are not limited to, the following:

- Handheld tools
- Power tools
- Landscape maintenance tools
- Farm equipment

Only inmate workers who are classified to work outside the secure perimeter of the facility will be allowed to possess exterior-use tools. The correctional officer responsible for supervising inmate workers on outside work crews will inventory all tools assigned for this purpose at the beginning of the shift.

Any tool issued to an inmate will be logged with the inmate’s name, the tool type and serial number documented. When an inmate worker is finished with that tool, the responsible staff member shall check the tool against the check-out log and document its return. Inmate workers shall not be permitted to pass tools between each other except under the direct supervision of a correctional officer.

All tools will be checked-in and noted on the log and returned to the tool storage area at the end of each shift. Inmate workers should not be released from the work assignment until all tools are accounted for.

In the event that an exterior-use tool is missing, the correctional officer shall immediately notify a supervisor. A thorough search for the tool will be undertaken and an incident report shall be completed. Inmates may only be released from their work assignments when it has been

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determined that it is safe to do so, and upon the approval of the supervisor. The incident report with all relevant information shall be forwarded to the Jail Commander.

205.2.4 KITCHEN EQUIPMENT

Culinary tools are located in the kitchen and include common tools used in the preparation, service and delivery of meals.

All kitchen knives or metal tools with sharp edges shall be stored in a locked cabinet. There shall be an outline of the tool's assigned location in the cabinet so that any tool missing from the cabinet can be easily identified. When in use, all knives shall be tethered to the work area. All tools shall be returned to the secure cabinet when not in use.

The Civilian Staff assigned to the kitchen shall inventory all kitchen tools at the beginning of his/her shift and prior to the arrival of inmate workers. Kitchen tools will only be used by inmates who have been classified as inmate workers. Staff will supervise inmates at all times when the inmates are using tools.

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All tools will be returned to the kitchen tool cabinet at the end of each shift and must be accounted for prior to any inmate worker being released from the work assignment.

In the event that a kitchen tool is missing, the civilian kitchen staff shall immediately notify the on-duty supervisor, who shall initiate immediate action to locate or account for the missing tool. A thorough search for the tool will be undertaken and a jail incident report shall be completed by the correctional officer responsible for the supervision of the use of the tool. The incident report with all relevant information shall be forwarded to the Jail Commander.

205.2.5 SERVING AND INDIVIDUAL EATING TOOLS

Serving tools and individual eating tools are those culinary tools located outside of the kitchen. Only inmate workers who are assigned to serve food shall be in control of serving tools. These tools shall be assigned to each inmate worker by the kitchen Staff prior to leaving the kitchen. The tool type shall be documented. Upon returning to the kitchen from serving meals, the inmate workers shall individually check their tools in with the kitchen Staff, who shall document each one.

In the event that a serving tool is missing, the kitchen Staff shall notify a supervisor and a search for the tool shall be initiated.

205.3 CUSTODY TOOLS

Tools include all implements that are maintained within the secure perimeter of the facility to complete specific tasks. These tools include but are not limited to mops, brooms, dustpans, and floor polishers.

All tools, culinary items, or medical equipment shall be locked in secure cabinets or storage rooms when not in use.

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Any time tools are brought into a secure area where incarcerated persons are present, staff supervising the area shall count the number of tools brought in to ensure that the same number of tools is taken out.

Any tool that is used within the secure perimeter of the facility must be closely monitored and controlled by the staff supervising the area so that it cannot be used as a weapon (15 CCR 1029(a)(6)). Incarcerated persons who are assigned tasks that require these tools shall be closely supervised.

An inventory of all tools used and stored within the secure perimeter of the facility shall be developed and maintained by the Captain. Tools will be inventoried by an assigned staff member at least once every 24 hours. The loss of any tool will be immediately reported to the on-duty supervisor, who shall initiate immediate action to locate or account for the missing tool, including:

(a) Detaining and searching any incarcerated person who had access to the tool.

(b) Conducting a thorough search of the immediate area for the missing item.

(c) Initiating a facility-wide search.

The staff member responsible for the supervision of the use of the missing tool will prepare and submit a report to the Shift Supervisor documenting the specific tool that is missing and the circumstances of the disappearance. The report will be forwarded to the Captain. A report identifying all members involved in the search should be submitted to the on-duty supervisor documenting their findings.

205.4 MAINTENANCE OR CONSTRUCTION TOOLS

Maintenance or construction tools are those tools and equipment that are brought into and out of the secure perimeter of the facility by employees or contractors to facilitate repairs or construction of the physical plant. Only the tools and equipment needed specifically for the intended work will be permitted into the facility. All tools and equipment will be inventoried and a list of the tools will be provided to the control booth prior to any tools or equipment being brought inside the secure perimeter.

A staff member will check the tools being brought into this facility against the inventory list. Prior to entering the secure perimeter of the facility, the contractor shall be instructed to maintain personal possession of the tools at all times. When it is necessary to complete a task in an area where incarcerated persons are present, the incarcerated persons shall be locked down by staff supervising the area.

When the person has finished working in the area, a correctional officer will ensure that all tools are accounted for by checking the tool inventory. In the event of a discrepancy, the on-duty supervisor shall be immediately notified and appropriate action taken to locate or account for the items. Once all tools have been accounted for, the incarcerated persons may be released from lockdown.

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205.5 EXTERIOR-USE TOOLS

Exterior-use tools are those that are used by incarcerated workers outside of the secure perimeter. These tools include but are not limited to the following:

- Handheld tools
- Power tools
- Landscape maintenance tools
- Farm equipment

Only incarcerated workers who are classified to work outside the secure perimeter of the facility will be allowed to possess exterior-use tools. The correctional officer responsible for supervising incarcerated workers on outside work crews will inventory all tools assigned for this purpose at the beginning of the shift.

Any tool issued to an incarcerated worker will be logged with the incarcerated worker's name, the tool type, and serial number documented. When an incarcerated worker is finished with that tool, the responsible staff member shall check the tool against the check-out log and document its return. Incarcerated workers shall not be permitted to pass tools between each other except under the direct supervision of a correctional officer.

All tools will be checked in and noted on the log and returned to the tool storage area at the end of each shift. Until all tools are accounted for, incarcerated workers should not be released from the work assignment.

In the event that an exterior-use tool is missing, the correctional officer shall immediately notify a supervisor. A thorough search for the tool will be undertaken and an incident report shall be completed. Incarcerated workers may only be released from their work assignments when it has been determined that it is safe to do so, and upon the approval of the supervisor. The incident report with all relevant information shall be forwarded to the Captain.

205.6 KITCHEN EQUIPMENT

Culinary tools are located in the kitchen and include common tools used in the preparation, service, and delivery of meals.

All kitchen knives or metal tools with sharp edges shall be stored in a locked cabinet. There shall be an outline of the tool's assigned location in the cabinet so that any tool missing from the cabinet can be easily identified. When in use, all knives shall be tethered to the work area. All tools shall be returned to the secure cabinet when not in use.

The correctional officer assigned to the kitchen shall inventory all kitchen tools at the beginning of their shift and prior to the arrival of incarcerated workers. Kitchen tools will only be issued to incarcerated persons who have been classified as incarcerated workers. Staff will supervise incarcerated workers at all times when they are using tools.

Each tool issued will be assigned to an individual incarcerated worker and logged. The incarcerated worker's name and the tool type will be documented. When an incarcerated worker

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is finished with a tool, the tool shall be checked in with the correctional officer and documented. Incarcerated workers shall not be permitted to pass tools between each other except under the direct supervision of a correctional officer.

All tools will be returned to the kitchen tool cabinet at the end of each shift and must be accounted for prior to any incarcerated worker being released from the work assignment.

In the event that a kitchen tool is missing, the correctional officer shall immediately notify the on-duty supervisor, who shall initiate immediate action to locate or account for the missing tool. A thorough search for the tool will be undertaken and an incident report shall be completed by the correctional officer responsible for the supervision of the use of the tool. The incident report with all relevant information shall be forwarded to the Captain.

205.7 SERVING AND INDIVIDUAL EATING TOOLS

Serving tools and individual eating tools are those culinary tools located outside of the kitchen. Only incarcerated workers who are assigned to serve food shall be in control of serving tools. These tools shall be assigned to each incarcerated worker by the kitchen correctional officer prior to leaving the kitchen. The tool type shall be documented. Upon returning to the kitchen from serving meals, the incarcerated workers shall individually check their tools in with the kitchen correctional officer, who shall document each one.

In the event that a serving tool is missing, the kitchen correctional officer shall notify a supervisor and a search for the tool shall be initiated.

Eating utensils (forks/spoons/sporks) shall be counted by the correctional officer supervising the meal service prior to and at the completion of each meal. In the event that a utensil is missing, the housing unit shall be immediately locked down and a supervisor notified. A thorough search of the housing unit shall be initiated to locate the tool.

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Disposition of Evidence

206.1 PURPOSE AND SCOPE

The purpose of this policy is to provide direction regarding the proper handling and disposition of contraband and evidence to ensure that the chain of custody is maintained so that evidence is admissible in a court of law or disciplinary hearing.

206.2 POLICY

It is the policy of the Tehama County Sheriff's Office to seize evidence and contraband in accordance with current constitutional and search-and-seizure law. Members of this office shall properly handle all contraband and evidence in order to maintain its admissibility. All contraband and evidence shall be handled in a safe manner and in a way that will maintain the chain of custody.

206.3 INITIAL SEIZURE OF EVIDENCE

Any staff member who first comes into possession of any evidence should retain such evidence in their possession until it is properly tagged and booked. When handling evidence and contraband, staff should observe the following safety precautions:

(a) Unload any firearm located in the approved loading/unloading area outside of the facility. If it is a revolver, the cylinder should be left open. If it is a semi-automatic pistol, the magazine shall be removed and the slide locked back in an open position. The cartridges and/or magazine will be packaged separately and booked with the firearm.

(b) Sheath any knife or other stabbing instrument in its holster (if any), or attach (tape) stiff cardboard to completely cover the blade.

(c) Place needles, such as syringes, into a hard plastic container that cannot be punctured by the needle.

(d) If the contraband is a suspected "home brew" alcoholic beverage, the handling correctional officer shall place a sample of the liquid in a plastic container that can be safely sealed. The remainder of the liquid will be treated as a biohazard and carefully disposed of as recommended by the environmental health official.

206.4 PROPERTY BOOKING PROCEDURE

All property shall be booked prior to the employee going off-duty unless otherwise approved by a supervisor. Employees booking property shall observe the following guidelines:

(a) Complete the property form describing each item of property separately, listing all serial numbers, owner's name, finder's name and other identifying information or markings.

(b) Mark each item of evidence with the booking employee's initials and the date booked using the appropriate method to prevent defacing or damaging the value of the property.

(c) Complete an evidence/property tag and attach it to each package or envelope in which the property is stored.

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(d) Place the case number in the upper right corner of the bag or in the appropriate field of the evidence/property tag.

(e) The original property form shall be submitted with the case report. A copy shall be placed with the property in the temporary property locker or with the property if it is stored somewhere other than a property locker.

(f) When the property is too large to be placed in a locker, the item may be retained in the secure supply room or another area that can be secured from unauthorized entry. Place the completed property form into a numbered locker indicating the location of the property.

206.4.1 NARCOTICS AND DANGEROUS DRUGS

All narcotics and dangerous drugs shall be booked separately using a separate property form. Paraphernalia shall also be booked separately. All narcotics and dangerous drugs shall be properly weighed by the booking staff member. The weight of all narcotics and dangerous drugs shall be documented on the booking form. A copy of the booking form shall be placed with the evidence in the designated locker and shall also be distributed in accordance with current evidence booking procedures.

206.4.2 EXCEPTIONAL HANDLING

Certain property items require a separate process. Bodily fluids, such as blood or semen stains, shall be air-dried prior to booking.

206.4.3 RECORDING OF PROPERTY

The evidence technician receiving custody of evidence or property shall record on the property control card their signature, the date and time the property was received, and where the property will be stored.

A property number shall be obtained for each item or group of items. This number shall be recorded on the property tag and the property control card.

Any changes in the location of property held by the Office shall be noted in the property log book.

206.4.4 PROPERTY CONTROL

Every time property is released or received, an appropriate entry on the evidence package and property control card shall be completed to maintain the chain of custody. No property or evidence is to be released without first receiving written authorization from a supervisor or the employee who is managing the case.

Correctional officers desiring property for court shall contact the evidence technician at least one day prior to the court day.

Request for analysis for items other than narcotics and dangerous drugs shall be completed on the appropriate forms and submitted to the evidence technician. This request may be filled out any time after booking the property or evidence.

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206.4.5 TRANSFER OF EVIDENCE TO CRIME LABORATORY

The transporting employee will check the evidence out of property, indicating the date and time on the property control card, and complete a request for laboratory analysis.

The evidence technician releasing the evidence must complete the required information on the property control card. The lab forms will be transported with the property to the examining laboratory. Upon delivering the item, the correctional officer will record the delivery time on both copies and indicate the locker in which the item was placed or the employee to whom it was delivered. The original copy of the lab form will remain with the evidence and the copy will be returned to the Records Division for filing with the case.

206.4.6 STATUS OF PROPERTY

Each person receiving property will make the appropriate entry to document the chain of custody. Temporary release of property to a law enforcement authority for investigative purposes or for court shall be noted on the property control card, stating the date, time and to whom it was released.

The evidence technician shall obtain the signature of the person to whom the property was released and the reason for release. Any employee receiving property shall be responsible for such property until it is returned to property or released to another authorized person or entity.

The return of the property should be recorded on the property control card, indicating date, time and the name of the person who returned the property.

206.5 RELEASE OR DISPOSITION OF UNCLAIMED FUNDS AND PROPERTY

The employee managing the case or a supervisor shall authorize the disposition or release of all evidence and property coming into the care and custody of the Office.

All reasonable attempts should be made to return unclaimed property, found property, or evidence not needed for an investigation.

Release of property shall be made upon receipt of an authorized release form. The release authorization shall be signed by the approving staff member and must match the items listed on the property form or must specify the items to be released. A signature of the person receiving the property shall be recorded on the original property form. Upon release, the proper entry shall be documented on the property control card log and related forms.

The Property supervisor shall ensure that all cash not needed as evidence or funds that are left unclaimed by an incarcerated person, are transferred as soon as practical to the Finance Department. A record of the transfer shall be kept in the appropriate incarcerated person file.

The Property supervisor or the authorized designee shall submit a report of presumed abandoned property or funds once a year to the Sheriff and the Finance Department, or more frequently as directed. The Property supervisor may dispose of property in compliance with existing laws upon receipt of proper authorization from the Sheriff.

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Found property and property held for safekeeping shall be held for a minimum of 90 days during which time the evidence technician shall attempt to contact the rightful owner if sufficient identifying information is available. If no person appears to prove rightful ownership of the property during this period, the Office shall publish notice of its possession of any property valued at $250 or more at least once in a newspaper of general circulation. If, after seven days following the publication, a person does not appear to claim ownership, the property shall be sold at public auction. Property valued at less than $250 shall be sold at public auction if no person appears to prove rightful ownership within 90 days (Civil Code § 2080.3).

If such property is not sold at auction or otherwise lawfully claimed, it may thereafter be destroyed in accordance with applicable law. The final disposition of all such property shall be fully documented in related reports.

The evidence technician shall release the property upon proper identification presented by the person receiving the property for which an authorized release has been received. A signature of the person receiving the property shall be recorded on the original property form. Upon release, the proper entry shall be documented in the property log.

After release of all property listed on the property control card, the card shall be forwarded to the Records Division for filing with the case. If some items have not been released, the property card will remain in the property section.

206.6 DISPOSITION OF PROPERTY

All property not held for evidence in a pending criminal investigation or proceeding, and held for three months or longer because the owner has not been located or has failed to claim the property, may be disposed of in compliance with existing laws, upon receipt of proper authorization for disposal.

Property personnel shall make reasonable efforts to attempt to contact the owner when known. Property not held for any other purpose and not claimed within 90 days after notification (or receipt, if notification is not feasible) may be auctioned to the highest bidder at a properly published public auction. If such property is not sold at auction or otherwise lawfully claimed, it may thereafter be destroyed (Civil Code § 2080.6). The final disposition of all such property shall be fully documented on the property control card and in any related reports (Civil Code § 2080.6).

206.7 UNCLAIMED MONEY

Except as otherwise provided by law, money, excluding restitution to victims, that is in the custody of this office and is no longer needed as evidence, and that remains unclaimed after three years, will be transferred to the general fund after proper notice has been given. Before transferring the money to the general fund, the Office shall publish a notice each week for a period of two consecutive weeks in a local newspaper of general circulation, in accordance with all laws, ordinances and regulations (Government Code § 50050 et seq.). Such notice shall state the amount of money, the fund in which it is held and that the money will become the property of the office on a designated date, between 45 days and 60 days after the first publication of the notice (Government Code § 50051).

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If the money remains unclaimed as of the date designated in the published notice, the money will become the property of this office to fund official custody facility operations. Money representing restitution collected on behalf of victims shall either be deposited into a restitution fund or used for purposes of victim services.

Any individual item with a value of less than $15, or any amount of money if the depositor/owner’s name is unknown, that remains unclaimed for a year or by order of the court, may be transferred to the general fund without the necessity of public notice in accordance with applicable laws, ordinances and regulations (Government Code § 50055).

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Records and Data Practices

207.1 PURPOSE AND SCOPE

This policy establishes guidelines for the control and access of confidential records by staff, contractors and volunteers.

207.2 ACCESS TO CRIMINAL RECORDS

Official files, documents, records, electronic data, video and audio recordings and information held by the Tehama County Sheriff's Office or in the custody or control of office employees, volunteers or contractors are regarded as non-public and/or confidential.

Access to confidential paper or electronically generated records in this facility is restricted at various locations according to job function and the need to know. Employees working in assigned areas will only have access to the information that is necessary for the performance of their duties. Granting access to other employees or anyone outside of the work area must meet with supervisory approval. All requests for information received from outside the Office shall be forwarded to the Custodian of Records

Custody staff, volunteers and contractors shall not access, disclose or permit the disclosure or use of such files, documents, reports, records, video or audio recordings or other confidential information except as required in the performance of their official duties and in accordance with office policies, statutes, ordinances and regulations related to data practices.

Custody staff, volunteers and contractors who are uncertain of the confidentiality status of any document should consult with a supervisor or Custodian of Records to determine the status of the documents in question.

207.3 STAFF TRAINING

Prior to being allowed to work inside this facility, all custody staff, volunteers and contractors will receive training on office records, policies and confidentiality requirements, including the potential criminal and civil penalties that may result from a breach of confidentiality in violation of this policy and all applicable statutes.

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Research Involving Incarcerated Persons

208.1 PURPOSE AND SCOPE

The purpose of this policy is to establish safeguards and guidelines to protect incarcerated persons from being used as research subjects in medical and other research experiments based only on their status as incarcerated persons and without proper approval, review, or informed consent.

208.2 POLICY

The Tehama County Sheriff's Office will conduct and support research that improves operations, enhances professional knowledge, decreases recidivism, and advances the office's mission in accordance with existing laws and with appropriate protection of all incarcerated persons. However, the use of incarcerated persons for medical, pharmaceutical, or cosmetic experiments is prohibited.

208.3 AUTHORIZATION REQUIREMENTS

Prior to initiating any approved research, all persons conducting research in this facility must agree to abide by all office policies relating to the security and confidentiality of incarcerated person files. Based upon the intended use of the research, guidelines will be established regarding what information shall be accessible to the researcher or the research organization.

Any requests for an exception shall include a response to the following questions as part of the proposed research project:

- Who is conducting the research?
- What is the purpose of the research?
- What is the methodology?
- Do the researchers or persons advocating research involving the use of incarcerated persons have an understanding of their ethical responsibilities, including considerations for the establishment of an Institutional Review Board (IRB), as described in 45 CFR 46.301 et seq.?
- Any other information as deemed appropriate by the Captain or Sheriff.

Inquiries regarding proposed research projects from local, state, and federal executive and legislative bodies/agencies will be brought to the attention of the Sheriff immediately by the employee who receives the request. At the direction of the Sheriff, an appropriate and timely response will be made to each legitimate inquiry.

Research or studies involving more than the information identified as public information may require signed release/waiver forms from the involved incarcerated persons. The Sheriff should consult and seek guidance from the legal counsel serving the Office or other legal expert in these matters.

Incarcerated persons are not precluded from individual treatment based on the need for a specific medical procedure that is not generally available. An incarcerated person's treatment with a new

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medical procedure by the incarcerated person's own physician shall be undertaken only after the incarcerated person has received a full explanation of the positive and negative features of the treatment, and only with the incarcerated person's informed consent.

208.4 LEGAL CONSIDERATIONS

Any research conducted or supported by the United States Department of Health and Human Services (DHHS) will be required to comply with the provisions of 45 CFR 46.301 et seq.

208.4.1 BIOMEDICAL RESEARCH

Research relating to or involving biological, medical, or physical science shall not be conducted on any incarcerated person. This does not include the accumulation of statistical data in the assessment of the effectiveness of nonexperimental public health programs or treatment programs in which incarcerated persons routinely participate (Penal Code § 3502).

Records-based biomedical research using existing information, without prospective interaction with incarcerated persons, may be conducted consistent with Penal Code § 3500 et seq. and federal law.

208.5 INCARCERATED PERSONS IN COMMUNITY-BASED RESEARCH

When incarcerated persons who are participants in a community-based research protocol are admitted to the facility, the following shall occur:

(a) The intake nurse shall collect all relevant data, including name and contact information of the treating physician, and all available detail about the treatment regimen and the condition being treated.

(b) The responsible physician shall be contacted prior to the initiation of treatment.

(c) Consultation with community researchers shall be made by the responsible physician to determine the intent of the study and any necessary parameters to measure as the treatment period progresses.

(d) Necessary information shall be obtained so that withdrawal from the research protocol is done without harming the health of the incarcerated person.

208.6 HUMAN RESEARCH STUDIES

This office does not endorse enrolling incarcerated persons in human research studies. Requests to enroll incarcerated persons in human research studies will not ordinarily be approved. However, any request to enroll an incarcerated person into such a study must be reviewed by the Sheriff, the Responsible Physician, and legal counsel, and authorization provided prior to enrollment. Any authorized enrollments shall comply with all state and federal guidelines.

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Incarcerated Person Records

209.1 PURPOSE AND SCOPE

This policy establishes the procedures required to create and maintain accurate records of all persons booked and confined in this facility.

209.2 POLICY

It is the policy of this office that all records shall be complete and comprehensive, resulting in reliable data that provides information about each incarcerated person's period of confinement, as well as histories of previous confinement in this facility. All incarcerated person records are official office documents and should be used for official business only. Incarcerated person records are a vital component of the criminal justice system and should only be released to authorized persons.

209.2.1 RECORD MAINTENANCE

It shall be the responsibility of the Records Division to maintain the following records on all persons who have been committed or assigned to this facility, including, but not limited to, the following (15 CCR 1041):

- Information gathered during the admission process as provided in the Inmate Reception Policy
- Photographs and fingerprints cross referenced to the booking number
- Duration of confinement
- Court-generated background information
- Cash and property receipts
- Classification records, including inmate classification levels and housing restrictions
- Housing history records
- Reports of disciplinary events and dispositions
- Grievances and dispositions
- Reports of incidents or crimes committed during confinement
- Request forms
- Special visit forms
- Court appearances, documents and the disposition of hearings
- Work assignments
- Program participation
- Visitation records
- Telephone records

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- Medical, dental, mental health, drug and alcohol screenings, assessments, treatments, medications

The inmate records shall be identified and separated according to a format developed and approved by the Jail Commander or the authorized designee.

209.2.2 RELEASE OF INMATE RECORDS
Inmate records are confidential and shall be used for official business only. Any release of inmate records shall be made only in compliance with lawful court order or as authorized by state and federal law to persons having a legitimate criminal justice need, or with a consent form signed by the inmate (15 CCR 1045). A copy of the release authorization document shall be maintained in the inmate record file.

209.2.3 ELECTRONIC RECORD MAINTENANCE
All inmate records and data maintained in an electronic format shall be accessible only through a login/password-protected system capable of documenting by name, date and time any person who has accessed the information. The Jail Commander shall be responsible for working with the information technology personnel to ensure the security of the data and to develop and maintain a copy of the security plan.

209.2.4 RECORDS RETENTION
Inmate records shall be maintained consistent with the established records retention schedule.

209.3 RECORD MAINTENANCE

It shall be the responsibility of the Records Division to maintain records on all persons who have been committed or assigned to this facility, including but not limited to the following (15 CCR 1041):

- Information gathered during the admission process as provided in the Reception Policy
- Photographs and fingerprints cross-referenced to the booking number
- Duration of confinement
- Cash and property inventory and receipts
- Classification records, including incarcerated person classification levels and housing restrictions
- Housing history records
- Reports of disciplinary events and dispositions
- Grievances and dispositions
- Reports of incidents or crimes committed during confinement
- Request forms
- Special visit forms
- Court appearances, documents, and the disposition of hearings

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- Work documentation
- Program documentation
- Visitation records
- Telephone records
- Medical, dental, mental health, drug and alcohol screenings, assessments, treatments, and medications
- Non-medical information regarding disabilities and other limitations

The Captain or the authorized designee shall establish a procedure for managing incarcerated person records.

209.3.1 COURT ORDERS OF NAME OR GENDER CHANGE
When a court order is received that involves a name change of an incarcerated person, the Records Division shall document the new name in the incarcerated person's records and list any prior names as an alias. When a court order is received involving a gender change, appropriate adjustments will be made to the incarcerated person records (Code of Civil Procedure § 1279.5).

209.4 RELEASE OF INCARCERATED PERSON RECORDS
Incarcerated person records are confidential and shall be used for official business only. Any release of incarcerated person records shall be made only in compliance with a lawful court order or as authorized by state and federal law to persons having a legitimate criminal justice need, or with a consent form signed by the incarcerated person (15 CCR 1045). A copy of the release authorization document shall be maintained in the incarcerated person record file.

209.5 ELECTRONIC RECORD MAINTENANCE
All incarcerated person records and data maintained in an electronic format shall be accessible only through a login/password-protected system capable of documenting by name, date, and time any person who has accessed the information. The Captain shall be responsible for working with the information technology personnel to ensure the security of the data and to develop and maintain a copy of the security plan.

209.6 RECORDS RETENTION
Incarcerated person records shall be maintained consistent with the established records retention schedule.

209.7 INFORMATION SHARING REGARDING IMMIGRATION STATUS
No member of this office will prohibit, or in any way restrict, another member from doing any of the following regarding the citizenship or immigration status, lawful or unlawful, of any individual (8 USC § 1373; Government Code § 7284.6):

(a) Sending information to, or requesting or receiving such information from federal immigration officials

(b) Maintaining such information in office records

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(c) Exchanging such information with any other federal, state or local government entity

Nothing in this policy restricts sharing information permissible under the California Values Act.

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Report Preparation

210.1 PURPOSE AND SCOPE

Report preparation is a major part of each correctional officer's job. The purpose of reports is to refresh the correctional officer's memory and to provide sufficient information for a follow-up investigation and successful prosecution or a disciplinary proceeding. Report writing is the subject of substantial formal and on-the-job training.

210.2 REPORT PREPARATION

Employees should ensure that reports are sufficiently detailed for their purpose and free from errors prior to submission. Reports shall be prepared by the staff assigned to investigate or document an incident, approved by a supervisor and submitted to the Jail Commander or the authorized designee in a timely manner (15 CCR 1044). Any incident resulting in death, injury or endangerment to staff or a visitor, serious injury to an inmate, escape, a major disturbance, a facility emergency or an unsafe condition at the facility shall be submitted to the Jail Commander as soon as practicable but within 24 hours of the incident. It is the responsibility of the assigned employee to ensure that all the above listed reports meet this requirement or that supervisory approval has been obtained to delay the report. The supervisor must determine whether the report will be available in time for appropriate action to be taken, such as administrative notifications or resolution, investigative leads or an inmate disciplinary proceeding.

Handwritten reports must be prepared legibly. If the report is not prepared legibly, the employee shall be required by the reviewing supervisor to promptly correct the report. Employees who dictate reports by any means shall use appropriate grammar, as content is not the responsibility of the typist. Employees who generate reports on computers are subject to all requirements of this policy.

All reports shall accurately reflect the identity of the persons involved, all pertinent information seen, heard or assimilated by any other sense, and any actions taken. Employees shall not suppress, conceal or distort the facts of any reported incident, nor shall any employee make a false report orally or in writing. Generally, the reporting employee's opinions should not be included in reports unless specifically identified as such.

210.3 REQUIRED REPORTING

Written reports are required in all of the following situations on the appropriate office-approved form unless otherwise approved by a supervisor (15 CCR 1044).

210.3.1 CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of self-initiated activity, and becomes aware of any activity where a crime has occurred, the employee is required to document the activity. The fact that a victim is not desirous of prosecution is not an exception to documentation.

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210.3.2 INCIDENT REPORTING

Incident reports generally serve as an in-house notation of occurrences in the facility and to initiate, document and support the inmate disciplinary process. The Office shall establish a filing system that differentiates between incident reports, crime reports and disciplinary actions.

Incidents that shall be documented using the appropriate approved report include (15 CCR 1044):

(a) Non-criminal incidents of rule violations by inmates.

(b) Attempted suicide or suicidal ideation on the part of an inmate, if known.

(c) Non-criminal breaches of security or evidence of an escape attempt.

(d) Non-criminal security threats, including intelligence related to jail activities.

(e) Significant incidents related to medical issues, health or safety in the jail.

(f) Discovery of contraband in the possession of inmates or their housing areas.

(g) Detaining or handcuffing any visitor at the facility.

(h) Traffic collisions involving office vehicles.

(i) Risk management incidents to include injuries to inmates and lost or damaged property.

(j) Accidental injuries of staff, inmates or the general public.

(k) Injury to a citizen on County owned property.

210.3.3 DEATHS

All deaths shall be investigated and a report completed by a qualified investigating officer to determine the manner of death and to gather information, including statements of inmates and staff who were in the area at the time the death occurred.

Reporting of deaths will be handled in accordance with the Reporting Inmate Deaths Policy.

210.3.4 INJURY OR DAMAGE BY OFFICE PERSONNEL

Reports shall be taken if an injury occurs that is a result of an act of an employee. Reports shall be taken involving damage to property or equipment.

210.3.5 USE OF FORCE

Reports related to the use of force shall be made in accordance with the Use of Force Policy.

210.4 GENERAL POLICY OF EXPEDITIOUS REPORTING

In general, all employees and supervisors shall act with promptness and efficiency in the preparation and processing of all reports. An incomplete report, unorganized reports or reports delayed without supervisory approval are not acceptable. Reports shall be processed according to established priorities or according to special priority necessary under exceptional circumstances.

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210.4.1 GENERAL POLICY OF HANDWRITTEN REPORTS
Some incidents and report forms lend themselves to block print rather than typing. In general, the narrative portion of those reports in which there is a long narrative should be typed or dictated.

Supervisors may require, with the foregoing general policy in mind, block printing or typing of reports of any nature for office consistency.

210.4.2 GENERAL USE OF OTHER HANDWRITTEN FORMS
County, state and federal agency forms may be block printed as appropriate. In general, the form itself may make the requirement for typing apparent.

210.5 REPORT CORRECTIONS

Supervisors shall review reports for content and accuracy. If a correction is necessary, the reviewing supervisor should return it to the reporting employee for correction as soon as practicable. It shall be the responsibility of the originating employee to ensure that any report returned for correction is processed in a timely manner. It shall be the responsibility of the supervisor rejecting the report to follow up on any report corrections not received in a timely manner.

210.6 REPORT CHANGES OR ALTERATIONS

Reports that have been approved by a supervisor and submitted to the Records Division for filing and distribution shall not be modified or altered except by way of a supplemental report. Reviewed reports that have not yet been submitted to the Records Division may be corrected or modified by the authoring employee only with the knowledge and authorization of the reviewing supervisor. Reviewing supervisors should not alter reports. When modifications are required, these should be the responsibility of the authoring employee.

210.7 ELECTRONIC SIGNATURES

The Tehama Jail has established an electronic signature procedure for use by all employees of the Tehama Jail. The Jail Commander or the authorized designee shall be responsible for maintaining the electronic signature system and ensuring that each employee creates a unique, confidential password for his/her electronic signature. The system use and design shall follow the requirements of Civil Code § 1633 et seq. when applicable.

(a) Employees may only use their electronic signature for official reports or other official communications.

(b) Each employee shall be responsible for the security and use of his/her electronic signature and shall promptly notify a supervisor if the electronic signature has or may have been compromised or misused.

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Key and Electronic Access Device Control

211.1 PURPOSE AND SCOPE

The control and accountability of facility keys and electronic access devices are vital factors in maintaining a safe and secure environment for incarcerated persons, staff, volunteers, contractors, and the public (15 CCR 1029(a)(6)). This policy outlines the methods that the Office will use in maintaining strict security of its keys and electronic access devices. For ease of reference, the term "key" as used in this policy includes all physical means of access to or exit from the secure areas of the facility.

211.2 POLICY

It is the policy of this office that all keys used to access secure areas of the facility or to exit the secure areas of the facility are strictly controlled. Employees and supervisors will be held accountable for the security and safety of the facility. All key control activities shall be accurately documented on a daily basis (15 CCR 1029(a)(6)).

211.3 KEY CONTROL RECORDS

A shift roster will be maintained for the accounting and security of all key sets. Each shift is responsible for reporting any key malfunctions or missing key sets. Key control measures shall be documented by the control room staff on logs and forms, and the records retained in accordance with established records retention schedules.

211.4 ELECTRONIC ACCESS DEVICES

Proximity cards, fobs, or other devices may be issued to staff to allow access to restricted or controlled areas of the facility. In the event of a lost or stolen device, an employee shall notify their supervisor as soon as it is known the device is missing. The device shall be immediately deactivated to prevent unauthorized use.

211.5 KEY IDENTIFICATION

All keys that open any doors within the facility shall be marked with unique identification codes that will allow for quick inventory. Keys that are bundled together as a set shall be numbered or coded with a tag to identify that set and the number of keys on the ring. The identifying numbers or code on keys shall not correspond to numbers/codes on locks.

A separate secure document identifying all keys will be maintained by the Booking supervisor.

211.6 KEY SET CONTENTS

Key sets issued to staff for use within the secure perimeter of the facility shall not contain any key that would permit access to areas outside the secure perimeter. The armory key shall not be permitted inside the secure perimeter. Exterior door keys shall not be permitted inside the facility except during an emergency requiring access to the exterior doors.

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211.7 KEY CONTROL

All facility keys shall be maintained in a locked key box within the Booking room. This room shall have controlled access for staff only. Each person assigned to the facility shall be issued key tags bearing their employee number. Key sets will be exchanged for key tags to maintain a record of which employee has which set. At the end of a shift, employees shall exchange all keys for their key tags.

Under no circumstances shall an employee pass a key or key set to another employee. All keys must be checked out through the control process. Employees shall not possess any key for which they have not been authorized.

Employees shall not duplicate, mark, alter, or manufacture any key without written authorization from the Captain or the authorized designee.

Booking staff shall, at the beginning and end of their respective shifts, inventory the key box and its contents. All keys must be accounted for before the end of shift.

Under no circumstances will security keys be made available to incarcerated persons regardless of their status.

211.8 LOCK POLICY

All security perimeter entrances, Booking doors and cell doors shall be kept locked, except when used for admission or exit of employees, incarcerated persons, or visitors, and in an emergency. Operators of sallyports shall ensure that only one of the doors of a sallyport is opened at any time for entry or exit purposes, except where the entry or exit of emergency personnel requires the operator to override the doors and allow for rapid entry or exit. Each time the override function is engaged, the officer must submit a written report to the on-duty supervisor prior to the end of their shift.

211.9 TESTING

The Shift Supervisor shall ensure locks to security doors or gates are tested for proper function at least weekly to ensure proper operation. This testing shall be documented and a weekly report forwarded to the facility administrator.

211.10 EXTERIOR DOOR AND ARMORY KEYS

Keys for exterior doors to the facility and the armory shall be kept in a locked cabinet in a secure location, outside of the facility’s secure perimeter. Supervisors shall, at the beginning and end of their respective shifts, inventory and account for these keys.

211.11 EMERGENCY KEY SET

At least one key set containing every key for the facility shall be kept separate from all other key sets in a secure location and made accessible only to the Captain, the Shift Supervisor, the supervisor, or the authorized designee in the event of an emergency.

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211.12 MISSING KEYS

Any staff member who discovers that a key or key set is missing shall immediately make a verbal report to a supervisor and shall prepare a written incident report as directed by the supervisor. The supervisor shall immediately initiate a search for the missing key. If a reasonable effort to locate the key fails, the supervisor shall order a lockdown of the facility. All incarcerated persons shall be locked in their cells/housing units and a headcount conducted. Incarcerated persons shall not be allowed to pass into or out of the facility without being thoroughly searched for the missing key. The supervisor shall, as soon as practicable, notify the Captain regarding the loss of the key, when it was discovered and the circumstances involved.

A methodical and thorough search of the entire facility will be made by the on-duty staff.

Additional staff may be called to assist with the search. If, after a thorough search, the key or key set is not located, the Captain will determine whether to re-key any locks that may have been compromised, and whether this should be done immediately.

The Captain shall initiate an investigation into the disappearance of the keys to reexamine the procedures for key control, and shall notify the Sheriff of their findings. Based upon the findings of the investigation and any recommendations, the procedures governing this policy may be amended.

211.13 DAMAGED KEYS OR LOCK

Damaged keys or locks shall be promptly reported to a supervisor. No part of a broken key shall be left in the lock. All portions of the damaged key must be turned in to the Shift Supervisor, who will ensure duplicate keys are provided as needed. Damaged locks shall be replaced or repaired as soon as practicable. Appropriate security measures shall be taken until such time as the lock is properly restored. No lock to a security door or gate shall be permitted to be inoperable or left in an unsuitable condition. No incarcerated person shall be secured in a cell, detention room, or area that has inoperable locks.

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Daily Activity Logs and Shift Reports

212.1 PURPOSE AND SCOPE

Accurate and legible records are vital to the management of the facility. They provide a means for managers to review events and emergency situations that have occurred within the facility.

This policy provides guidance for creating and maintaining accurate and legible records necessary for the management of the facility.

212.2 POLICY

This policy establishes the requirement for the preparation, maintenance and retention of permanent logs and shift reports to provide a record of both routine activities and unusual events such as emergencies or other notable occurrences.

212.3 PROCEDURES

All members assigned to a security post shall prepare an accurate daily activity log and shift report. The daily activity log and shift report is a permanent record of daily activities. Members who falsify any official document may be subject to disciplinary action, up to and including termination, as well as criminal prosecution.

All members will adhere to the following procedures when preparing a daily activity log or shift report:

(a) Blue ink pen shall be used, unless entries are logged into an electronic record.

(b) Entries should be legible and provide sufficient detail to ensure that the log entry or report properly reflects the events of the day.

(c) Entries shall include the name and badge number of the individual making the entry.

(d) Entries shall reflect the date and time of the event logged.

(e) Entries created and stored electronically shall not be modified. If corrections or changes become necessary, they shall be done by way of a supplemental entry, leaving the original entry unaltered and retrievable.

(f) Handwritten log entries requiring modification shall be crossed out with one line and a new entry made, noting that it is a correction.

212.4 SHIFT ACTIVITY LOG/ LOG BOOK

All pertinent activities should be documented in the daily activity log. At a minimum this includes:

- Personnel on-duty
- Well-being checks, security checks and inspections and routine activities
- All searches/shakedowns
- Inmate movement within the facility and inmates for unusual occurrences or to meet needs of this facility

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- Professional visits to the housing units, specifically maintenance work and tours or anything deemed noteworthy/ significant by supervisor
- Alarms and security equipment tests
- Inmate complaint of illness or injury and the action taken
- Disciplinary actions
- Unusual inmate behavior
- Discovered contraband
- Unusual occurrences
- Sanitation inspections
- Use of emergency equipment
- Any use of force
- Key counts

The daily activity log will be retained in accordance with established records retention schedules.

212.5 SHIFT ACTIVITY LOG/ SHIFT REPORT/ SUPERVISORS DAILY

Each member assigned to a security post, as well as the supervisor, shall prepare a shift report for the oncoming staff. This report shall include the following:

(a) The formal inmate count at the beginning and end of each shift

(b) Key count and exchange

(c) Supervisor rounds to the housing area and/or to specific inmates

(d) Any or all occurrences listed in 212.4 that the supervisors deems needs to be passed onto other supervisory staff

(e) Information that would assist the oncoming staff

(f) Unusual occurrences

The shift report will be retained in accordance with established records retention schedules.

212.6 SUPERVISOR RESPONSIBILITIES

Supervisors shall review the daily activity logs and shift reports during the course of each shift. When appropriate, supervisors should include comments in the logbook with regard to an incident or unusual occurrence in the facility.

Whenever a major event in the facility requires a coordinated command response, the Incident Commander (IC) should designate someone to keep a running log that identifies, at a minimum, the following:

- Date and time the incident began
- Specific location of the incident

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- Times of significant response measures taken during the incident
- Name, identification number and time of arrival of personnel on-scene
- Orders issued by the IC
- Significant events that occurred as a result of the incident

The above information should remain available to the IC throughout the event to assist with ongoing response planning.

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Personnel Records

213.1 PURPOSE AND SCOPE

This policy governs maintenance and access to personnel records. Personnel records include any file maintained under an individual member's name.

213.2 REQUESTS FOR DISCLOSURE

Any member receiving a request for a personnel record shall promptly notify the custodian of records or other person charged with the maintenance of such records.

Upon receipt of any such request, the responsible person shall notify the affected member as soon as practicable that such a request has been made (Evidence Code § 1043).

The responsible person shall further ensure that an appropriate response to the request is made in a timely manner, consistent with applicable law. In many cases, this may require assistance of available legal counsel.

All requests for disclosure that result in access to a member’s personnel records shall be logged in the corresponding file.

213.2.1 SUBPOENAS

Personnel files may be subpoenaed by a third party. If employment records are subpoenaed under state authority, the employee may be notified and has the right to object to production of the records under certain circumstances.

Any subpoena duces tecum should be promptly provided to a supervisor for review and processing. While a subpoena duces tecum may ultimately be subject to compliance, it is not an order from the court that will automatically require the release of the requested information.

All questions regarding compliance with any subpoena or subpoena duces tecum should be promptly referred to legal counsel for the Office so that a timely response can be prepared.

213.2.2 RELEASE OF PERSONNEL INFORMATION

Personnel records shall not be disclosed except as allowed by law (Penal Code § 832.7; Evidence Code § 1043).

Any person who maliciously, and with the intent to obstruct justice or the due administration of the laws, publishes, disseminates, or otherwise discloses the residence address or telephone number of any member of this office may be guilty of a misdemeanor (Penal Code § 146e).

The Office may release any factual information concerning a disciplinary investigation if the member who is the subject of the investigation (or the member's representative) publicly makes a statement that is published in the media and that the member (or representative) knows to be false. The disclosure of such information, if any, shall be limited to facts that refute any such false statement (Penal Code § 832.7).

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The Office may, without a request, disclose to the public the cause of termination for a disclosable incident involving a former correctional officer, as permitted by law (Penal Code § 832.7)(b)(13)).

213.2.3 REQUESTS FOR DISCLOSURE OF FORMER EMPLOYEE FILES
Members receiving requests for information from another agency regarding allegations of sexual abuse or sexual harassment involving a former employee should work with counsel to ensure compliance with Prison Rape Elimination Act (PREA) requirements (28 CFR 115.17).

213.2.4 RELEASE OF LAW ENFORCEMENT GANG INFORMATION
Information relating to the termination of a correctional officer from this office for participation in a law enforcement gang shall be disclosed to another law enforcement agency that is conducting a preemployment background investigation except where specifically prohibited by law (Penal Code § 13670).

213.3 MEMBERS' ACCESS TO THEIR PERSONNEL RECORDS

Any member may request access to the member's own personnel records during the normal business hours of those responsible for maintaining such files. Any member seeking the removal of any item from the member's personnel records shall file a written request to the Sheriff through the chain of command. The Office shall remove any such item if appropriate, or within 30 days provide the member with a written explanation of why the contested item will not be removed. If the contested item is not removed from the file, the member’s request and the written response from the Office shall be retained with the contested item in the member’s corresponding personnel record (Government Code § 3306.5).

Members may be restricted from accessing files containing any of the following information:

(a) An ongoing internal affairs investigations to the extent that it could jeopardize or compromise the investigation pending final disposition or notice to the member of the intent to discipline

(b) Confidential portions of internal affairs files that have not been sustained against the member

(c) Criminal investigations involving the member.

(d) Letters of reference concerning employment/appointment, licensing, or issuance of permits regarding the member.

(e) Any portion of a test document, except the cumulative total test score for either a section of the test document or for the entire test document

(f) Materials used by the Office for staff management planning, including judgments or recommendations concerning future salary increases and other wage treatments, management bonus plans, promotions and job assignments or other comments or ratings used for office planning purposes

(g) Information of a personal nature about a person other than the member if disclosure of the information would constitute a clearly unwarranted invasion of the other person's privacy

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(h) Records relevant to any other pending claim between the Office and the member that may be discovered in a judicial proceeding

213.4 RETENTION AND PURGING

Unless provided otherwise in this policy, personnel records shall be maintained in accordance with the established records retention schedule.

(a) During the preparation of each member's performance evaluation, all personnel complaints and disciplinary actions should be reviewed to determine the relevancy, if any, to progressive discipline, training, and career development. Each supervisor responsible for completing the member's performance evaluation should determine whether any prior sustained disciplinary file should be retained beyond the required period for reasons other than pending litigation or other ongoing legal proceedings.

(b) If a supervisor determines that records of prior discipline should be retained beyond the required period, approval for such retention should be obtained through the chain of command from the Sheriff.

(c) If, in the opinion of the Sheriff, a personnel complaint or disciplinary action maintained beyond the required retention period is no longer relevant, all records of such matter may be destroyed in accordance with the established records retention schedule.

213.5 BRADY MATERIAL IN PERSONNEL FILES

The purpose of this section is to establish a procedure for releasing potentially exculpatory information (*Brady* material) contained within personnel files.

If a member is a material witness in a criminal case, a person or persons designated by the Sheriff may examine the subject correctional officer's personnel file to determine whether it contains *Brady* material.

Brady material includes all material evidence and facts that are reasonably believed to be exculpatory to any individual in a case (to impeach a witness, for example). Evidence or facts are considered material if there is a reasonable probability that they may affect the result of any criminal proceeding, including sentencing. If potential *Brady* material is located, the prosecuting attorney shall be notified.

Because a determination of what is or is not *Brady* material will often require legal or even judicial review, any questions should be resolved by the prosecuting attorney.

Prior to the release of any information pursuant to this process, a protective order should be requested from the court limiting the use of such materials to the involved case and requiring the return of all copies upon completion of the case.

213.6 RELEASE OF PERSONNEL RECORDS AND RECORDS RELATED TO CERTAIN INCIDENTS, COMPLAINTS, AND INVESTIGATIONS OF OFFICERS/DEPUTIES

Personnel records and records related to certain incidents, complaints, and investigations of correctional officers shall be released pursuant to a proper request under the Public Records Act and subject to redaction and delayed release as provided by law.

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The custodian of records should work as appropriate with the Sheriff or the Internal Affairs Unit supervisor in determining what records may qualify for disclosure when a request for records is received and if the requested record is subject to redaction or delay from disclosure.

For purposes of this section, a record includes (Penal Code § 832.7(b)(3)):

- All investigation reports.
- Photographic, audio, and video evidence.
- Transcripts or recordings of interviews.
- Autopsy reports.
- All materials compiled and presented for review to the District Attorney or to any person or body charged with determining whether to file criminal charges against a correctional officer in connection with an incident, whether the correctional officer's action was consistent with law and office policy for purposes of discipline or administrative action, or what discipline to impose or corrective action to take.
- Documents setting forth findings or recommending findings.
- Copies of disciplinary records relating to the incident, including any letters of intent to impose discipline, any documents reflecting modifications of discipline due to the *Skelly* or grievance process, and letters indicating final imposition of discipline or other documentation reflecting implementation of corrective action.

Unless a record or information is confidential or qualifies for delayed disclosure as provided by Penal Code § 832.7(b)(8) or other law, the following records (hereinafter referred to as "qualifying records") shall be made available for public inspection no later than 45 days from the date of a request (Penal Code § 832.7(b)(1)):

(a) Records relating to the report, investigation, or findings of:

1. The discharge of a firearm at another person by a correctional officer.
2. The use of force against a person resulting in death or in great bodily injury (as defined by Penal Code § 243(f)(4)) by a correctional officer.
3. A sustained finding involving a complaint that alleges unreasonable or excessive force.
4. A sustained finding that a correctional officer failed to intervene against another correctional officer using force that is clearly unreasonable or excessive.

(b) Records relating to an incident where a sustained finding was made by the Office or oversight agency regarding:

1. A correctional officer engaged in sexual assault of a member of the public (as defined by Penal Code § 832.7(b)).
2. Dishonesty of a correctional officer relating to the reporting, investigation, or prosecution of a crime, or directly relating to the reporting of, or investigation of misconduct by another correctional officer, including but not limited to any false

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statements, filing false reports, destruction, falsifying, or concealing of evidence, or perjury.

3. A correctional officer engaged in conduct including but not limited to verbal statements, writings, online posts, recordings, and gestures involving prejudice or discrimination against a person on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.
4. A correctional officer made an unlawful arrest or conducted an unlawful search.

Qualifying records will be made available regardless of whether the correctional officer resigns before the office or an oversight agency concludes its investigation (Penal Code § 832.7(b)(3)).

A record from a separate and prior investigation or assessment of a separate incident shall not be released unless it is independently subject to disclosure (Penal Code § 832.7(b)(4)).

When an investigation involves multiple correctional officers, the Office shall not release information about allegations of misconduct or the analysis or disposition of an investigation of a correctional officer unless it relates to a sustained finding of a qualified allegation as provided by Penal Code § 832.7(b)(5). However, factual information about the action of the correctional officer during an incident or the statements of a correctional officer shall be released if the statements are relevant to a finding of the qualified allegation against another correctional officer that is subject to release (Penal Code § 832.7(b)(5)).

A record of a complaint, or the investigations, findings, or dispositions of that complaint, shall not be released if the complaint is frivolous or if the complaint is unfounded (Penal Code § 832.7(b)(9)).

213.6.1 REDACTION

The custodian of records, in consultation with the Sheriff or the authorized designee, shall redact the following portions of qualifying records made available for release (Penal Code § 832.7(b)(6)):

(a) Personal data or information (e.g., home address, telephone number, identities of family members) other than the names and work-related information of correctional officers

(b) Information that would compromise the anonymity of whistleblowers, complainants, victims, and witnesses

(c) Confidential medical, financial, or other information where disclosure is prohibited by federal law or would cause an unwarranted invasion of personal privacy that clearly outweighs the strong public interest in records about possible misconduct and use of force

(d) Where there is a specific, articulable, and particularized reason to believe that disclosure of the record would pose a significant danger to the physical safety of the correctional officer or another person

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Additionally, a record may be redacted, including redacting personal identifying information, where, on the facts of the particular case, the public interest served by not disclosing the information clearly outweighs the public interest served by disclosing it (Penal Code § 832.7(b)(7)).

213.6.2 DELAY OF RELEASE

Unless otherwise directed by the Sheriff, the custodian of records should consult with a supervisor familiar with the underlying investigation to determine whether to delay disclosure of qualifying records due to any of the following conditions (Penal Code § 832.7):

(a) Active criminal investigations

1. Disclosure may be delayed 60 days from the date the misconduct or use of force occurred or until the District Attorney determines whether to file criminal charges, whichever occurs sooner.
2. After the initial 60 days, delay of disclosure may be continued if the disclosure could reasonably be expected to interfere with a criminal enforcement proceeding against a correctional officer or against someone other than a correctional officer who engaged in misconduct or used the force.

(b) Filed criminal charges

1. When charges are filed related to an incident in which misconduct occurred or force was used, disclosure may be delayed until a verdict on those charges is returned at trial or, if a plea of guilty or no contest is entered, the time to withdraw the plea has passed.

(c) Administrative Investigations

1. Disclosure may be delayed until there is a determination from the investigation whether the misconduct or use of force violated law or office policy, but no longer than 180 days after the date of the office's discovery of the misconduct or use of force or allegation of misconduct or use of force.

213.6.3 NOTICE OF DELAY OF RECORDS

When there is justification for delay of disclosure of qualifying records, the custodian of records shall provide written notice of the reason for any delay to a requester as follows (Penal Code § 832.7):

(a) Provide the specific basis for the determination that the interest in delaying disclosure clearly outweighs the public interest in disclosure. The notice shall also include the estimated date for the disclosure of the withheld information.

(b) When delay is continued beyond the initial 60 days because of criminal enforcement proceedings against anyone at 180-day intervals provide, the specific basis that disclosure could reasonably be expected to interfere with a criminal enforcement proceeding and the estimated date for disclosure.

1. Information withheld shall be disclosed when the specific basis for withholding the information is resolved, the investigation or proceeding is no longer active, or no later than 18 months after the date of the incident, whichever occurs sooner, unless:

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(a) When the criminal proceeding is against someone other than a correctional officer and there are extraordinary circumstances to warrant a continued delay due to the ongoing criminal investigation or proceeding, then the Office must show by clear and convincing evidence that the interest in preventing prejudice to the active and ongoing criminal investigation or proceeding outweighs the public interest for prompt disclosure of records about misconduct or use of force by correctional officers.

In cases where an action to compel disclosure is brought pursuant to Government Code § 7923.000, the Office may justify delay by filing an application to seal the basis for withholding if disclosure of the written basis itself would impact a privilege or compromise a pending investigation (Penal Code § 832.7(b)(8)).

213.7 POLICY

It is the policy of this office to maintain personnel records and preserve the confidentiality of personnel records pursuant to the Constitution and the laws of California (Penal Code § 832.7).

213.8 OFFICE FILE

The Office file shall be maintained as a record of a person's employment/appointment with this office. The office file should contain at a minimum:

(a) Personal data, including photographs, marital status, names of family members, educational and employment history, or similar information. A photograph of the member should be permanently retained.

(b) Election of employee benefits.

(c) Personnel action reports reflecting assignments, promotions, and other changes in employment/appointment status. These should be permanently retained.

(d) Original performance evaluations. These should be permanently retained.

(e) Discipline records including copies of sustained personnel complaints (see the Personnel Complaints Policy.

1. Disciplinary action resulting from sustained internally initiated complaints or observation of misconduct shall be maintained pursuant to the established records retention schedule and at least four years (Government Code § 12946).
2. Disciplinary action resulting from a sustained civilian’s complaint involving misconduct shall be maintained pursuant to the established records retention schedule and at least 15 years (Penal Code § 832.5).
3. A civilian’s complaint involving misconduct that was not sustained shall be maintained pursuant to the established records retention schedule and at least five years (Penal Code § 832.5).

(f) Adverse comments, such as supervisor notes or memos may be retained in the office file after the member has had the opportunity to read and initial the comment (Government Code § 3305).

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1. Once a member has had an opportunity to read and initial any adverse comment, the member shall be given the opportunity to respond in writing to the adverse comment within 30 days (Government Code § 3306).
2. Any member response shall be attached to and retained with the original adverse comment (Government Code § 3306).
3. If a member refuses to initial or sign an adverse comment, at least one supervisor should note the date and time of such refusal on the original comment and the member should sign or initial the noted refusal. Such a refusal, however, shall not be deemed insubordination, nor shall it prohibit the entry of the adverse comment into the member's file (Government Code § 3305).

(g) Commendations and awards.

(h) Any other information, the disclosure of which would constitute an unwarranted invasion of personal privacy.

213.9 DIVISION FILE

Division files may be separately maintained internally by a member's supervisor for the purpose of completing timely performance evaluations. The Division file may contain supervisor comments, notes, notices to correct, and other materials that are intended to serve as a foundation for the completion of timely performance evaluations.

All materials intended for this interim file shall be provided to the employee prior to being placed in the file in accordance with Government Code § 3305 and Government Code § 3306.

213.10 TRAINING FILE

An individual training file shall be maintained by the Training Manager for each member. Training files will contain records of all training; original or photocopies of available certificates, transcripts, diplomas, and other documentation; and education and firearms qualifications. Training records may also be created and stored remotely, either manually or automatically (e.g., Daily Training Bulletin (DTB) records).

(a) The involved member is responsible for providing the Training Manager or immediate supervisor with evidence of completed training/education in a timely manner.

(b) The Training Manager or supervisor shall ensure that copies of such training records are placed in the member's training file.

213.11 SECURITY

Personnel records should be maintained in a secured location and locked either in a cabinet or access-controlled room. Personnel records maintained in an electronic format should have adequate password protection.

Personnel records are subject to disclosure only as provided in this policy or according to applicable discovery procedures.

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Nothing in this policy is intended to preclude review of personnel records by the County Administrator, County Counsel, or other attorneys or representatives of the county in connection with official business.

213.12 MEDICAL FILE

A medical file shall be maintained separately from all other personnel records and shall contain all documents relating to the member's medical condition and history, including but not limited to:

(a) Materials relating to a medical leave of absence, including leave under the Family and Medical Leave Act (FMLA).

(b) Documents relating to workers' compensation claims or the receipt of short- or long-term disability benefits.

(c) Fitness-for-duty examinations, psychological and physical examinations, follow-up inquiries, and related documents.

(d) Medical release forms, doctor's slips, and attendance records that reveal a member's medical condition.

(e) Any other documents or material that reveals the member's medical history or medical condition, including past, present, or future anticipated mental, psychological, or physical limitations.

213.13 INTERNAL AFFAIRS UNIT FILE

Internal affairs files shall be maintained under the exclusive control of the Internal Affairs Unit in conjunction with the office of the Sheriff. Access to these files may only be approved by the Sheriff or the Internal Affairs Unit supervisor.

These files shall contain the complete investigation of all formal complaints of member misconduct, regardless of disposition (Penal Code § 832.12). Investigations of complaints that result in the following findings shall not be placed in the member's file, but will be maintained in the internal affairs file:

(a) Not sustained

(b) Unfounded

(c) Exonerated

Investigation files arising out of sustained civilian's complaints involving misconduct shall be maintained pursuant to the established records retention schedule and for a period of at least 15 years. Investigations that resulted in other than a sustained finding may not be used by the Office to adversely affect an employee's career (Penal Code § 832.5).

Investigation files arising out of internally generated complaints shall be maintained pursuant to the established records retention schedule and for at least four years (Government Code § 12946).

Investigation files arising out of a civilian complaint involving misconduct that was not sustained shall be maintained pursuant to the established records retention schedule and at least five years (Penal Code § 832.5).

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Administrative and Supervisory Inspections

215.1 PURPOSE AND SCOPE

The purpose of this policy is to establish both regularly scheduled and unannounced inspections of the facility's living and activity areas. This is to encourage contact with staff and incarcerated persons and to observe incarcerated person living and working conditions. Inspections may be useful in identifying deficiencies, which can be corrected, as well as processes working properly, which may be replicated elsewhere in the facility.

215.2 POLICY

Tours and inspections shall be conducted by administrative and supervisory staff throughout the jail at least weekly to facilitate and encourage communication among administrators, managers, supervisors, staff employees, incarcerated persons, and the visiting public.

215.3 INSPECTIONS

The Captain is responsible for ensuring that scheduled and unscheduled inspections, visits, and contacts are implemented to minimally include:

(a) The general conditions and overall climate of the facility.

(b) The living and working conditions of incarcerated persons.

(c) Communication between administrators, managers, supervisors, staff, incarcerated persons, and the visiting public.

(d) Compliance with policies.

(e) Safety, security, and sanitation concerns.

(f) Incarcerated person concerns.

(g) Meal services.

215.3.1 AREAS TO BE INSPECTED

Supervisor inspections should occur in all occupied areas of the facility on a daily basis, including weekends and holidays. Inspections should be conducted randomly, and special effort should be given to tour and informally inspect the following areas:

- Incarcerated person housing areas
- Booking and receiving areas, including holding cells
- Exercise yard and recreation areas
- Visiting and program areas
- Medical and dental service areas
- Vocational work areas, e.g., the kitchen, janitorial closets
- Sallyports and transportation staging areas

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215.4 INSPECTIONS OF SECURITY EQUIPMENT

The Captain shall be responsible for designating a qualified person to conduct weekly inspections of all security devices, identifying those in need of repair or maintenance and providing a written report of the results of the inspection. The Captain shall document all action taken to correct identified deficiencies, including maintenance records, and shall retain those records in accordance with established records retention schedules.

215.5 DOCUMENTATION AND REPORTING

Each staff member conducting the inspection or tour shall document the activity in the appropriate station form or facility log. The log should include any significant findings that indicate remedial action or training may be needed. Significant issues of security or safety shall be addressed promptly. Commendable or successful actions that should be replicated elsewhere in the facility should also be noted in the log.

The Shift Supervisor shall review the logs daily and ensure that any deficiencies noted are addressed or forwarded through the chain of command, as appropriate, and that commendable actions are also appropriately addressed.

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Perimeter Security

216.1 PURPOSE AND SCOPE

The purpose of this policy is to establish this facility's perimeters, to ensure that incarcerated persons remain inside the perimeters, and that visitor, vendor, volunteer, and employee access is granted only with proper authorization and through designated safety vestibules and sallyports. The secure perimeter of this facility will provide protection from the escape of persons being processed, held, or housed, and will act as a defense against the entry of unauthorized persons. It shall be maintained to prevent contraband from entering the secure areas of the facility (15 CCR 1029(a)(6)).

216.2 POLICY

All entry points to the secure perimeter of the facility shall be monitored and controlled continuously by Booking staff. The entire perimeter shall be inspected, maintained, monitored, and continuously assessed to ensure its physical integrity and prevent unauthorized entry, incarcerated person escape, and contraband from entering the facility.

216.2.1 VISITORS

This facility shall be maintained as a secure area and no person shall enter any portion of the inner perimeter without specific authorization from the Captain or the authorized designee. All visitors shall be required to provide satisfactory identification, such as a valid driver's license, valid passport or military identification. Visitors shall be required to sign in on the visitor log and state the reason for the visit. Visitors must wear a visitor's badge at all times and shall be escorted by one or more staff members at all times while they are in the secure areas of the facility.

216.3 PROCEDURE

The secure perimeter shall be maintained by assigned staff as well as a contracted law enforcement agency. The Captain or the authorized designee shall ensure that a staffing plan is in place to monitor the secure perimeter of this facility. Suspicious activity at or near the perimeter shall immediately be reported to the Shift Supervisor and the Booking. The Booking staff shall initiate an appropriate law enforcement response.

Individuals suspected to be in violation of any law may be subject to detention or arrest. Warrant checks should be conducted on all individuals who are on the property without proper authorization. Individuals found to be loitering on or around the perimeter of the facility will be stopped and questioned to determine the circumstances of their presence. They may be denied entrance into the facility.

The Booking staff shall identify all persons seeking to gain access to the secure perimeter of the facility. Persons delivering goods or services shall identify themselves to the Booking staff prior to being allowed access to the delivery area.

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Perimeter Security

Materials delivered to or transported from the facility's secure perimeter shall be inspected for contraband. Vendors making deliveries into the secure area of the facility will do so under the supervision of custody staff.

Keys to the secure perimeter shall be easily identifiable and issued only in emergency situations or with the authorization of the Captain.

Weapons lockers are provided outside all secure perimeter entrances. All weapons must be secured prior to an individual being allowed to enter the facility.

The sallyport and the secure garage are to be used for the transfer of incarcerated persons.

Operation of the sallyport doors will be done in such a manner as to effectively control movement into and out of the secure inner perimeter of this facility. Booking staff are responsible for ensuring all perimeter surveillance equipment is in good working order and shall immediately report malfunctions or failures to the on-duty supervisor.

Outer perimeter security may be accomplished by using fencing or another type of barrier. These barriers should be designed to route vehicular and pedestrian traffic away from non-public areas. Outer perimeter lighting should be designed to illuminate all areas of the exterior to allow visual inspection by video monitor or perimeter patrols.

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Accessibility - Facility and Equipment

217.1 PURPOSE AND SCOPE

This policy is intended to ensure that staff and the general public have access to the facility, in compliance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act (29 USC § 794).

217.1.1 DISABILITY DEFINED

A disability is any physical or mental impairment that substantially limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity. Additionally, disability includes a physical or mental impairment that would inhibit a person’s ability to meet the requirements established by the Office for conducting visitation or other business in the facility.

217.2 POLICY

The Tehama County Sheriff's Office prohibits discrimination against persons with disabilities. The Tehama County Sheriff's Office adheres to the ADA and all other applicable federal and state laws, regulations and guidelines in providing reasonable accommodations to ensure that the facility is reasonably accessible to and usable by individuals.

217.2.1 ACCOMMODATIONS

As part of the compliance with the ADA and the commitment to provide access to persons with disabilities, the Office will provide reasonable accommodations in areas that include, but are not limited to:

- Vehicle parking areas that accommodate cars and vans or other vehicles with wheelchair lifts.
- Public areas that are wheelchair accessible.
- Drinking fountains that can accommodate wheelchairs or other mobility devices.
- ADA-compliant elevators.
- Restroom areas that are wheelchair compliant and meet ADA standards for accessibility.
- Search areas and metal detection devices, including private areas where alternative search methods may be performed.
- Services and equipment for the deaf and hard of hearing.
- Visitor check-in areas.
- Visitation areas, including attorney interview rooms that can accommodate wheelchairs and other mobility devices.

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217.2.2 ADA COORDINATOR

The Jail Commander should appoint a staff member to serve as the ADA Coordinator, whose primary responsibilities include, but are not limited to, coordinating compliance with ADA requirements. The ADA Coordinator should be knowledgeable and experienced in a variety of areas, including:

(a) The office structure, activities and employees, including special issues relating to the requirements of the jail.

(b) The ADA and other laws that address the rights of people with disabilities, such as Section 504 of the Rehabilitation Act, 29 USC § 794.

(c) The accommodation needs of people with a broad range of disabilities.

(d) Alternative formats and technologies that enable staff, inmates and the public with disabilities to communicate, participate and perform tasks related to jail activities.

(e) Construction and remodeling requirements with respect to ADA design standards.

(f) Working cooperatively with staff, inmates and the public with disabilities.

(g) Local disability advocacy groups or other disability groups.

(h) Negotiation and mediation.

217.2.3 TRAINING

The ADA Coordinator should work with the Training Manager as appropriate, developing training regarding issues specifically related, but not limited to:

(a) The requirements of Section 504 of the Rehabilitation Act, 29 USC § 794.

(b) Office policies and procedures relating to ADA requirements.

217.3 MEMBER RESPONSIBILITIES

Members receiving a request for accommodations should make reasonable attempts to do so. If a request cannot be reasonably accommodated, a supervisor should be notified.

Members becoming aware of any potential ADA violation should document the issue in a memorandum and forward the memorandum to the Jail Commander/Captain with a copy to the ADA coordinator.

Members receiving a complaint of disability discrimination or inability to reasonably access the facility, or any other complaint related to the ADA, should document the complaint and refer the matter to the ADA coordinator.

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News Media Relations

218.1 PURPOSE AND SCOPE

This policy provides guidelines for media releases and media access to this facility's incidents and general public information.

218.2 POLICY

It is the policy of this office that the ultimate authority and responsibility for the release of information to the media shall remain with the Sheriff. However, in situations not warranting immediate notice to the Sheriff and in situations where the Sheriff has given prior approval, the Captain or designated Public Information Officer may prepare and release information to the media in accordance with this policy and applicable law (15 CCR 1045).

218.3 MEDIA ACCESS

Authorized members of the media may be provided access to scenes of disasters, investigations, emergencies, and other law enforcement activities related to this facility, subject to the following conditions:

(a) The media representative shall produce valid press credentials that shall be prominently displayed at all times.

(b) Media representatives may be prevented from interfering with emergency operations and investigations.

1. In situations where media access would reasonably appear to interfere with the facility's security, emergency operations, or an investigation, every reasonable effort should be made to provide media representatives with information regarding the incident in such a manner that does not compromise the safety and security of the incarcerated persons, staff, or the facility itself. All information released to the media should be coordinated through the Public Information Officer or other designated spokesperson.

(c) No member of this office shall be subjected to media visits or interviews without the consent of the involved employee.

(d) Media interviews with individuals who are in custody shall not be permitted without the approval of the Sheriff and the express consent of the person in custody. The supervisor shall obtain a signed waiver from the incarcerated person prior to being interviewed, photographed, or videotaped.

218.4 SCOPE OF INFORMATION SUBJECT TO RELEASE

The Office will maintain a daily log of individuals who are currently in custody or were recently booked. Unless restricted by law and except to the extent that disclosure of a particular item of information would endanger the safety of a person involved in an investigation or would endanger the successful completion of the investigation or a related investigation, the following information on incarcerated persons and persons booked is considered public information and can be released upon request:

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(a) The full name and occupation of the incarcerated person

(b) The incarcerated person's physical description, including age

(c) Date and time of arrest

(d) Date and time of booking

(e) Location of arrest

(f) The factual circumstances surrounding the incarcerated person's arrest

(g) All charges the incarcerated person is being held on, including outstanding warrants, probation/parole holds

(h) Amount of bail

(i) The time and manner of the incarcerated person's release or the location where the incarcerated person is currently being held

(j) Court appearance dates

(k) Arresting agency

Information on this facility's policies and procedures regarding non-security related matters, (e.g., programs, facility rules and regulations, visitation, health care, religious services) can be released to the general public by any custody staff member. A copy of the applicable portions of this facility's policy and procedures manual can be made available for public review with the approval of the Sheriff.

Any information related to the safety, security, and maintenance of order shall be redacted before being provided to the general public. Applicable regulations for the operation of a custody facility can be made available for review by the public and incarcerated persons. Incarcerated persons can request a copy through the incarcerated person programs staff.

Information related to escapes, suicides, or crimes occurring in this facility shall only be released with the approval of the Captain or the authorized designee.

Identifying information pertaining to a juvenile detainee shall not be publicly released without prior approval of a competent court, except as otherwise authorized by law. Information concerning incidents involving certain sex crimes and other offenses set forth in all applicable laws shall be restricted.

Identifying information concerning deceased individuals shall not be released to the media until notification of next of kin or until otherwise cleared by the coroner's/medical examiner's office or otherwise required by law.

218.4.1 RESTRICTED INFORMATION

It shall be the responsibility of the Captain or the authorized designee to ensure that restricted information is not inappropriately released to the media by this office. When in doubt, authorized and available legal counsel should be consulted.

Examples of such restricted information include, but are not limited to:

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(a) Confidential personnel information concerning staff and volunteers of the Office.

1. The identities of custody personnel involved in major incidents may only be released to the media pursuant to consent of the involved personnel or upon a request processed in accordance with the Public Records Act.

(b) Criminal history information.

(c) Information that would tend to endanger the safety of any individual or jeopardize the successful completion of any ongoing investigation.

(d) Information pertaining to pending litigation involving this office.

(e) Information obtained in confidence.

(f) Any information that is otherwise privileged or restricted under state or federal law.

218.5 MEDIA REQUEST

Any media request for information or access to this facility shall be referred to the designated Public Information Officer or, if unavailable, to the first available supervisor. Prior to releasing any information to the media, employees shall consider the following:

(a) At no time shall any employee of this office make any comment or release any official information to the media without prior approval from a supervisor or the designated Public Information Officer.

(b) In any situation involving a law enforcement agency, reasonable efforts shall be made to coordinate media releases with the authorized representative of each involved agency prior to the release of any information by this office.

(c) Under no circumstance should any member of this office make any comment to the media regarding any law enforcement or corrections-related incident that does not involve this office without prior approval of the Sheriff or the authorized designee.

218.6 PROVIDING ADVANCE INFORMATION

To protect the safety and rights of personnel working in this facility, advance information about planned actions by custody personnel, such as movement of persons in custody or the execution of a mass arrest in which field booking is arranged, should not be disclosed to the news media nor should media representatives be invited to be present at such actions except with the prior approval of the Sheriff.

Any exceptions to the above should only be considered for the furtherance of this facility's legitimate purposes. Prior to approving any exception, the Sheriff will consider, at a minimum, whether the release of information or the presence of the media would unreasonably endanger any individual, prejudice the rights of any person, or is otherwise prohibited by law.

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Community Relations and Public Information

219.1 PURPOSE AND SCOPE

This policy provides guidelines to custody personnel when dealing with the general public or interested groups when requests are received to share information regarding the operations and policies of the facility (see the News Media Relations Policy for guidance on media releases) (15 CCR 1045).

219.2 POLICY

It is the policy of the Tehama County Sheriff's Office to protect the privacy rights of individuals while releasing non-confidential information to interested groups when requests are received. Information that has the potential to affect the safety and security of the Jail or an investigation will not be released.

219.3 RESPONSIBILITIES

The Captain is responsible for ensuring that the following information is public and available to all who inquire about it.

(a) The Board of State and Community Corrections Minimum Standards for Local Detention Facilities as found in Title 15 of the California Code of Regulations.

(b) Facility rules and procedures affecting incarcerated persons as specified in 15 CCR sections:

1. 1045, Public Information Plan
2. 1061, Education Plan
3. 1062, Visiting
4. 1063, Correspondence
5. 1064, Library Service
6. 1065, Exercise and Out of Cell Time
7. 1066, Books, Newspapers, Periodicals, and Writings
8. 1067, Access to Telephone
9. 1068, Access to Courts and Counsel
10. 1069, Orientation
11. 1070, Individual/Family Service Programs
12. 1071, Voting
13. 1072, Religious Observance
14. 1073, Grievance Procedure
15. 1080, Rules and Disciplinary Actions
16. 1081, Plan for Incarcerated Person Discipline

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17. 1082, Forms of Discipline
18. 1083, Limitations on Disciplinary Actions
19. 1200, Responsibility for Health Care Services

This information is to be made available at the facility's front desk and assembled into a binder or clearly posted for public viewing. Additionally, a copy should be made available in this facility's library or provided by other means for use by incarcerated persons. At the discretion of the Sheriff, the information may also be made available electronically. No information will be released on persons whose booking process is not completed.

219.4 PROHIBITED MATERIALS

Policies, procedures, and other information and materials related to the safety and security of incarcerated persons, custody personnel, the facility, or the maintenance of order should not be provided as a part of the public information material unless directed by the Sheriff.

219.5 TOURS OF THE CUSTODY FACILITY

Tours of this facility may be arranged through the Captain. Authorized tours are subject to facility rules and restrictions:

(a) Persons who tour this facility must be of an appropriate age as determined by the Sheriff.

(b) A short application form must be completed and a background check for warrants will be conducted before an applicant is approved to participate in a tour.

A record of all facility tours should be maintained in accordance with applicable retention requirements.

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Victim Notification

220.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure victims of crimes receive notice when an incarcerated person held for those crimes is released or escapes, and that victims receive any other notification required by California law.

220.2 POLICY

It is the policy of this office to act in accordance with all laws regarding victim notification.

220.3 PROCEDURE

The Captain shall ensure that a system is in place for individuals to request release or escape notification on any incarcerated person housed in this facility.

Notification requests or requirements that are known during the booking process should be documented in the appropriate designated section of the incarcerated person's booking file.

In the event that an individual contacts this facility and requests notification on any incarcerated person housed in this facility, staff should notify a supervisor, who will determine whether notifications are required or appropriate, and ensure the notification request and determination is documented in the incarcerated person's file. The supervisor will also ensure that the requesting individual is advised of the determination.

220.4 NOTIFICATION

Members tasked with the release of an incarcerated person or investigating an escape shall verify whether there is a required release notification in the incarcerated person's file.

Members shall document notification efforts in the incarcerated person's file.

Unless ordered by the court or a supervisor, no victim or witness information shall be provided to any incarcerated person by any employee or volunteer of this facility. Any unauthorized access or release of victim information is a direct violation of victim confidentiality and applicable policies, and may subject the person releasing the information to disciplinary action, up to and including termination from employment and/or criminal prosecution.

220.4.1 REQUIRED NOTIFICATIONS

The Shift Supervisor or the authorized designee shall make a reasonable and good faith effort to make all notifications required by law including:

(a) Notice to any person a court identifies as a victim of the offense, a family member of the victim, or a witness to the offense not less than 15 days prior to the release of any person convicted of stalking under Penal Code § 646.9 or convicted of a felony involving domestic violence (Penal Code § 646.92(a)).

(b) Notice to any person a court identifies as a victim of the offense, a family member of the victim, or a witness upon escape and capture of any person convicted of violating

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Penal Code § 646.9 or convicted of a felony offense involving domestic violence (Penal Code § 646.92(d)).

(c) Notice to any victim or other affected person who has requested notification that an incarcerated person convicted of the offenses listed in Penal Code § 679.02(a)(13) has been ordered placed on probation and the proposed date of release (Penal Code § 679.02(a)(14)).

(d) Upon request by the victim, or the next of kin of the victim, if the crime was a homicide, within 60 days of an incarcerated person's placement in a reentry or work furlough program, or of the incarcerated person's escape (Penal Code § 679.02(a)(6)).

(e) Notice of the release of any incarcerated person to victims of crime who have requested to be notified.

(f) Notice to law enforcement agencies known to be involved with the case upon any escape and capture of an incarcerated person.

Notification should be made by telephone, certified mail, or electronic mail, using the method of communication selected by the person to be notified, if that method is reasonably available. In the event the person's contact information provided to the Office is no longer current, the Office shall make a diligent, good faith effort to learn the whereabouts of the victim in order to comply with these notification requirements. Notification shall only be left on a messaging system if the person has indicated in the notification request that such notification is acceptable or if staff has attempted and cannot make other contact with the person.

If contact cannot be made and no means exist to leave a message with the person, the Shift Supervisor or the authorized designee should request the law enforcement agency having jurisdiction where the person resides perform a welfare check. Subsequent and continuing attempts shall be made to contact the person using the numbers listed in the notification request. All attempts to contact shall be documented on the victim notification request form.

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Vehicle Safety

222.1 PURPOSE AND SCOPE

It is the policy of this office to maintain and operate the vehicles assigned to this facility in a lawful and safe manner. The Office utilizes office-owned motor vehicles for a variety of applications. To maintain a system of accountability and ensure that office-owned vehicles are used appropriately, regulations relating to the use of these vehicles have been established. The term "office-owned" as used in this section also refers to any vehicle leased or rented by the Office.

222.2 USE AND SECURITY OF OFFICE VEHICLES

All staff members who operate office-owned or leased vehicles must comply with all applicable state laws and must possess a valid driver’s license endorsed for the type of vehicle operated.

A list of individuals who are authorized to drive office vehicles shall be maintained by the Captain. The list shall be updated monthly to ensure that only qualified personnel who are in possession of a current and appropriately endorsed operator’s license are on the list.

222.2.1 USE OF SEAT BELTS

The use of seat belts and other safety restraints significantly reduces the chance of death or injury in case of a traffic collision. This policy establishes guidelines for seat belt use to promote maximum operator and passenger safety, thus reducing the possibility of death or injury as the result of a motor vehicle crash. This policy will apply to all members operating or riding in office vehicles.

All members shall wear properly adjusted safety restraints when operating or riding in a seat equipped with restraints, in any vehicle owned, leased, or rented by this office, while on- or off-duty, or in any privately owned vehicle while on-duty. The member driving such a vehicle shall ensure that all other occupants, including non-members, are also properly restrained.

Exceptions to the requirement to wear safety restraints may be made only in exceptional situations where, due to unusual circumstances, wearing a seat belt would endanger the member or the public. Members must be prepared to justify any deviation from this requirement.

Whenever possible, incarcerated persons should be secured in a prisoner restraint system or, when a prisoner restraint system is not available, by seat belts. The incarcerated person should be in the seating position for which seat belts have been provided by the vehicle manufacturer. The prisoner restraint system is not intended to be a substitute for handcuffs or other appendage restraints.

No person shall operate any office vehicle in which the seat belt in the driver's position is inoperable. No person shall be transported in a seated position in which the seat belt is inoperable.

No person shall modify, remove, deactivate, or otherwise tamper with the vehicle safety belts, except for vehicle maintenance and repair staff, who shall do so only with the express authorization of the Sheriff.

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Members who discover an inoperable restraint system shall report the defect to the appropriate supervisor. Prompt action will be taken to replace or repair the system.

222.2.2 VEHICLE SECURITY

Office vehicles will be locked and the keys will be secured when not in use. The staff will make every effort to ensure that the vehicles are parked in a secure location.

Under no circumstances will incarcerated persons be allowed to operate a vehicle or have possession of any vehicle keys. Incarcerated workers who are assigned to clean vehicles must be closely supervised by staff.

The loss of any vehicle key shall be promptly reported, in writing, to the on-duty supervisor.

222.3 VEHICLE INSPECTIONS

All office-owned vehicles are subject to inspection and or search at any time by a supervisor. No member assigned to or operating such vehicle shall be entitled to any expectation of privacy with respect to the vehicle or any of its contents, regardless of who owns the contents.

222.4 VEHICLE SAFETY REPAIRS

Anyone authorized to drive office vehicles is responsible for assisting in maintaining the vehicles so that they are properly equipped, maintained, and refueled and present a clean appearance.

Anyone authorized to drive office vehicles is responsible for inspecting the interior and exterior of any assigned vehicle before placing the vehicle into service and again at the conclusion of their shift. Any previously unreported damage, mechanical problems, unauthorized contents, or other problems with the vehicle shall be promptly reported to a supervisor and documented as appropriate.

Vehicles that are deemed as unsafe shall not be used until necessary repairs are made. The written request for repairs shall be submitted before the operator checks out a replacement vehicle. The Captain or the authorized designee shall monitor the maintenance requests and ensure that the necessary repairs are made before the vehicle is placed back into service.

Annual vehicle safety inspections will be conducted on all vehicles that are owned, leased, or used by the Office. The inspection will be conducted by a qualified individual designated by the Captain. Inspection reports will be forwarded to and maintained by the Captain.

222.5 USE OF PERSONAL VEHICLES

The use of personal vehicles for official business must be approved by the Captain. The Captain or the authorized designee shall verify that the personal vehicle meets the state's insurance requirements. A copy of the insurance card shall be retained in facility files. All policies and procedures applicable to facility vehicles shall apply to the personal vehicle while it is being used for official business.

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222.6 COLLISION DAMAGE, ABUSE AND MISUSE

When any office-owned or leased vehicle is involved in a traffic collision, the involved member shall promptly notify a supervisor. A traffic collision report shall be filed with the agency having jurisdiction. The member shall complete the office's vehicle collision form.

When a collision involves any office vehicle or when a member of this office is an involved driver in a collision that occurs in this jurisdiction, and the collision results in serious injury or death or potentially involves any criminal charge, an outside agency should be summoned to handle the investigation. If the member is incapable of completing the office's vehicle collision form, a supervisor shall complete the form.

Any damage to a vehicle that was not caused by a traffic collision shall be immediately reported during the shift in which the damage was discovered. It shall be documented in memorandum format and forwarded to the Shift Supervisor. An administrative investigation will be conducted to determine if there is any vehicle abuse or misuse. If it is determined that misuse or abuse was a result of negligent conduct or operation, appropriate disciplinary action may result.

222.7 TOLL ROAD USE

Law enforcement vehicles are not routinely exempt from incurring toll road charges. Pursuant to the non-revenue policy of the toll roads, law enforcement agencies responding to an emergency or incident on the toll roads while on-duty are exempt from paying the toll.

Commuting or returning to the Office after an emergency does not qualify for this exemption; personnel using office-owned vehicles are subject to the toll charge.

To avoid unnecessary toll road violation charges, all members operating a office-owned vehicle on a toll road shall adhere to the following:

(a) Members operating office-owned vehicles for any reason other than an initial response to an emergency shall stop and pay the appropriate toll charge.

(b) Members may submit for reimbursement from the Office for any toll fees.

(c) Members driving office-owned vehicles through a toll plaza or booth during a response to an emergency shall draft a memo to their supervisor within five working days, explaining the circumstances.

222.8 POLICY

The Tehama County Sheriff's Office provides vehicles for official business use and may assign take-home vehicles based on its determination of operational efficiency, economic impact to the [AgencyOffice, tactical deployments, and other considerations.

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Fitness for Duty

223.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all correctional officers of this office are fit for duty and able to perform their job functions upon hire, and remain fit for duty throughout their employment.

223.2 POLICY

This policy requires all correctional officers to be free from any physical, emotional, or mental condition that might adversely affect their ability to effectively perform their duties throughout their employment.

(a) It shall be the responsibility of each employee of this office to maintain physical, emotional, and mental conditions sufficient to safely and properly perform the essential duties of their job classification.

(b) Each employee of this office shall perform their respective duties without physical, emotional, and/or mental constraints.

(c) During working hours, all employees are required to be alert, attentive, and capable of performing the assigned responsibilities.

(d) Any employee who feels unable to perform their duties shall promptly notify a supervisor. In the event that an employee believes another employee is unable to perform their duties, such observations and/or beliefs shall be promptly reported to a supervisor.

223.3 SUPERVISOR RESPONSIBILITIES

(a) A supervisor observing an employee or receiving a report of an employee who is perceived as being unable to safely perform their duties due to a physical, emotional, or mental condition, shall take prompt and appropriate action to resolve the situation.

(b) Whenever reasonably feasible, the supervisor shall attempt to ascertain the reason or source of the problem. In all cases, a preliminary evaluation should be made to determine the employee's level of inability to perform their duties.

(c) In the event the employee appears to be in need of immediate medical or mental health treatment, all reasonable efforts should be made to provide such care.

(d) The employee's Shift Supervisor or the Captain should determine whether the employee should be temporarily relieved of duty.

(e) The Captain shall be promptly notified in the event that any employee is relieved of duty.

223.4 NON-WORK RELATED CONDITIONS

Any employee suffering from a non-work related condition that warrants a temporary relief from duty may be required to use sick leave or other paid time off in order to obtain medical treatment or other reasonable relief from symptoms. If the condition is a serious health condition of the employee or a qualified family member, the employee’s supervisor should facilitate the employee’s

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contact with the appropriate person to initiate the leave process under the Family and Medical Leave Act.

223.5 WORK-RELATED CONDITIONS

Any employee suffering from a work-related condition that warrants temporary relief from duty shall comply with personnel rules and guidelines for processing such claims.

Upon the recommendation of the Shift Supervisor or supervisor, and with the concurrence of the Captain, any employee whose actions or use of force result in death or serious injury to another may be temporarily removed from regularly assigned duties and/or placed on paid administrative leave for the well-being of the employee, and until such time as the following may be completed:

(a) A preliminary determination indicates that the employee's conduct appears to be in compliance with policy and appropriate for the circumstances.

(b) The employee has had the opportunity to receive necessary counseling and any necessary or required psychological or medical clearance to return to full duty.

223.6 PHYSICAL AND PSYCHOLOGICAL EXAMINATIONS

(a) Whenever circumstances reasonably indicate that the employee may be unfit for duty, the Captain or the authorized designee may serve that employee with a written order to undergo a physical and/or psychological examination in cooperation with office personnel to determine the level of the employee's fitness for duty. The order shall indicate the date, time, and place for the examination.

(b) The examining physician or therapist will provide the Office with a report indicating whether the employee is fit for duty. If the employee is not fit for duty, the report should list any functional limitations that restrict their ability to perform the job duties. If the employee places their condition at issue in any subsequent or related administrative action/grievance, the examining physician or therapist may be required to disclose any information that is relevant to such proceedings.

(c) In order to facilitate the examination of any employee, the Office will provide all appropriate documents and available information to assist in the evaluation and/or treatment.

(d) All reports and evaluations submitted by the treating physician or therapist shall be part of the employee's confidential personnel file.

(e) Any employee ordered to receive a fitness-for-duty examination shall comply with the terms of the order and cooperate fully with the examining physician or therapist regarding any clinical interview, tests administered, or other procedures. Any failure to comply with such an order and any failure to cooperate with the examining physician or therapist, including signing of releases, may be deemed insubordination and shall be subject to discipline, up to and including termination.

(f) Once an employee has been deemed fit for duty by the examining physician or therapist, the employee will be notified to resume their duties.

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223.7 APPEALS

An employee whose salary is reduced or withheld due to a fitness-for-duty exam shall be entitled to an administrative appeal.

223.8 MEDICAL RECORDS

All employee medical information and records shall be treated as confidential and stored in the employee’s separate medical file.

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Staffing Plan

224.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a comprehensive staffing plan and analysis to identify staffing needs sufficient to maintain the safety and security of the facility, staff, visitors, incarcerated persons, and the public.

224.2 POLICY

It is the policy of the Tehama County Sheriff's Office to ensure the safety, security and efficient operation of this facility by assigning custody personnel according to a detailed staffing plan that is developed and maintained in accordance with law.

224.3 STAFFING PLAN REQUIREMENTS

The Captain shall ensure that a staffing plan conforming to the class type and size of this facility is prepared and maintained as described in the following section. The plan should detail all custody personnel assignments, including work hours and weekly schedules, and should account for holidays, vacations, training schedules, and other atypical situations (15 CCR 1027).

At minimum, the staffing plan will include the following:

- Facility administration and supervision
- Facility programs, including exercise and out of cell time
- Incarcerated person supervision and custody
- Support services including medical, food services, maintenance, and clerical
- Other jail-related functions such as escort and transportation of incarcerated persons

224.4 STAFFING ANALYSIS

The Sheriff or the authorized designee shall complete an annual comprehensive staffing analysis to evaluate personnel requirements and available staffing levels. The staffing analysis will be used to determine staffing needs and to develop staffing plans.

This analysis shall include information gathered in collaboration with the health care provider in each facility regarding staffing requirements. The analysis relating to health care personnel shall be annually reviewed for adequacy by the health authority.

The Captain, in conjunction with the PREA coordinator, should ensure that staffing levels are sufficient to consistently and adequately fill essential positions, as determined by the staffing plan (28 CFR 115.13). Relief factors for each classification and position should be calculated into the staffing analysis to ensure staffing levels will consistently meet requirements. Staff should be deployed in an efficient and cost-effective manner that provides for the safety and security of the staff, incarcerated persons, and the public.

The staffing analysis should be used to identify whether required activities are being performed competently and in compliance with current laws and office policies. If deficiencies are noted, the

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staffing analysis should also include recommendations regarding what corrective measures may be needed, including the following:

(a) Operational change

(b) Equipment requirement

(c) Additional training

(d) Supervisory intervention

(e) Additional personnel

224.4.1 DATA COLLECTION FOR ANALYSIS

The following data should be collected and included in the annual staffing analysis:

- All categories of leave usage for each staff member working in the jail
- Date of hire or assignment to a jail position for each member
- Date of transfer from the jail to another non-custody position for each member
- Annual hours of authorized overtime expended during the previous year
- Number of part-time or extra personnel hired during the previous year
- Details of any unusual occurrence or significant medical issues in the jail that were related to staffing during the previous year
- Details of claims or litigation, if any, that were related to staffing levels and were initiated against the facility in the previous year
- Labor contracts/collective bargaining agreements relating to corrections and medical personnel
- Annual training requirements that affected staffing levels in the jail
- Concerns expressed by members of the public
- Any investigations or reports by the grand jury or other government agency, jail monitor, or ombudsperson
- Other data that may influence the number of personnel available to occupy posted positions

224.5 REPORTING

The facility staffing plan shall be made available for review to the Board of State and Community Corrections (BSCC) staff at the time of their biennial inspection. The Captain shall report the results of the BSCC biennial review and recommendations to the officials with fiscal responsibility for the facility (15 CCR 1027).

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Speech, Expression, and Social Networking

225.1 PURPOSE AND SCOPE

This policy is intended to address issues associated with employee use of social networking sites and to provide guidelines for the regulation and balancing of employee speech and expression with the legitimate needs of the Office.

Nothing in this policy is intended to prohibit or infringe upon any communication, speech or expression that is protected or privileged under law. This includes speech and expression protected under state or federal constitutions as well as labor or other applicable laws. For example, this policy does not limit an employee from speaking as a private citizen, including acting as an authorized member of a recognized bargaining unit, about matters of public concern, such as misconduct or corruption.

Employees are encouraged to consult with their supervisor regarding any questions arising from the application or potential application of this policy.

225.1.1 APPLICABILITY

This policy applies to all forms of communication including, but not limited to, film, video, print media, public or private speech, use of all internet services, including the World Wide Web, email, file transfer, remote computer access, news services, social networking, social media, instant messaging, blogs, forums, video, and other file-sharing sites.

225.2 POLICY

Public employees occupy a trusted position in the community, and thus, their statements have the potential to contravene the policies and performance of this office. Due to the nature of the work and influence associated with the law enforcement profession, it is necessary that employees of this office be subject to certain reasonable limitations on their speech and expression. To achieve its mission and efficiently provide service to the public, the Tehama County Sheriff's Office will carefully balance the individual employee’s rights against the Office’s needs and interests when exercising a reasonable degree of control over its employees’ speech and expression.

225.3 SAFETY

Employees should consider carefully the implications of their speech or any other form of expression when using the internet. Speech and expression that may negatively affect the safety of the Tehama County Sheriff's Office employees, such as posting personal information in a public forum, can result in compromising an employee’s home address or family ties. Employees should therefore not disseminate or post any information on any forum or medium that could reasonably be anticipated to compromise the safety of any employee, an employee’s family or associates. Examples of the type of information that could reasonably be expected to compromise safety include:

- Disclosing a photograph and name or address of a correctional officer who is working undercover.

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- Disclosing the address of a fellow correctional officer.
- Otherwise disclosing where another correctional officer can be located off-duty.

225.4 PROHIBITED SPEECH, EXPRESSION, AND CONDUCT

To meet the office's safety, performance and public-trust needs, the following are prohibited unless the speech is otherwise protected (for example, an employee speaking as a private citizen, including acting as an authorized member of a recognized bargaining unit, on a matter of public concern):

(a) Speech or expression made pursuant to an official duty that tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees.

(b) Speech or expression that, while not made pursuant to an official duty, is significantly linked to, or related to, the Office and tends to compromise or damage the mission, function, reputation or professionalism of the Office or its employees. Examples may include:

1. Statements that indicate disregard for the law or the state or U.S. Constitution.
2. Expression that demonstrates support for criminal activity.
3. Participating in sexually explicit photographs or videos for compensation or distribution.

(c) Speech or expression that could reasonably be foreseen as having a negative impact on the credibility of the employee as a witness. For example, posting statements or expressions to a website that glorify or endorse dishonesty, unlawful discrimination or illegal behavior.

(d) Speech or expression of any form that could reasonably be foreseen as having a negative impact on the safety of the employees of the jail. For example, a statement on a blog that provides specific details as to how and when prisoner transportations are made could reasonably be foreseen as potentially jeopardizing employees by informing criminals of details that could facilitate an escape or attempted escape.

(e) Speech or expression that is contrary to this office's Code of Ethics.

(f) Use or disclosure, through whatever means, of any information, photograph, video or other recording obtained or accessible as a result of employment with the jail for financial or personal gain, or any disclosure of such materials without the express authorization of the Sheriff or the authorized designee.

(g) Posting, transmitting or disseminating any photographs, video or audio recordings, likenesses or images of office logos, emblems, uniforms, badges, patches, marked vehicles, equipment or other material that specifically identifies the Office on any personal or social networking or other website or web page, without the express authorization of the Sheriff.

(h) Accessing websites for non-authorized purposes, or use of any personal communication device, game device or media device, whether personally or office-owned, for personal purposes while on-duty, except in the following circumstances:

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1. When brief personal communication may be warranted by the circumstances (e.g., inform family of extended hours).
2. During authorized breaks such usage should be limited as much as practicable to areas out of sight and sound of the public and shall not be disruptive to the work environment.

Employees must take reasonable and prompt action to remove any content, including content posted by others, that is in violation of this policy from any web page or website maintained by the employee (e.g., social or personal website).

225.4.1 UNAUTHORIZED ENDORSEMENTS AND ADVERTISEMENTS

While employees are not restricted from engaging in the following activities as private citizens or as authorized members of a recognized bargaining unit, employees may not represent the Office or identify themselves in any way that could be reasonably perceived as representing the Office in order to do any of the following, unless specifically authorized by the Sheriff (Government Code § 3206; Government Code § 3302):

(a) Endorse, support, oppose, or contradict any political campaign or initiative.

(b) Endorse, support, oppose, or contradict any social issue, cause or religion.

(c) Endorse, support or oppose any product, service, company, or other commercial entity.

(d) Appear in any commercial, social or nonprofit publication, or any motion picture, film, video, public broadcast, or on any website.

Additionally, when it can reasonably be construed that an employee, acting in their individual capacity or through an outside group or organization (e.g., bargaining group), is affiliated with this office, the employee shall give a specific disclaiming statement that any such speech or expression is not representative of the Office.

Employees retain their right to vote as they choose, to support candidates of their choice, and to express their opinions as private citizens, including as authorized members of a recognized bargaining unit, on political subjects and candidates at all times while off-duty. However, employees may not use their official authority or influence to interfere with or affect the result of an election or a nomination for office. Employees are also prohibited from directly or indirectly using their official authority to coerce, command, or advise another employee to pay, lend, or contribute anything of value to a party, committee, organization, agency, or person for political purposes (5 USC § 1502).

225.5 PRIVACY EXPECTATION

Employees forfeit any expectation of privacy with regard to anything published or maintained through file-sharing software or any internet site open to public view (e.g., Facebook).

The Office also reserves the right to access, audit, and disclose for whatever reason all messages, including attachments, and any information transmitted over any technology that is issued or

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maintained by the Office, including the office email system, computer network, or any information placed into storage on any office system or device.

All messages, pictures and attachments transmitted, accessed or received over office networks are considered office records and, therefore, are the property of the Office. The Office reserves the right to access, audit and disclose for whatever reason all messages, including attachments, that have been transmitted, accessed or received through any office system or device, or any such information placed into any office storage area or device. This includes records of all key strokes or web-browsing history made at any office computer or over any office network. The fact that access to a database, service or website requires a user name or password will not create an expectation of privacy if it is accessed through office computers or networks.

225.6 CONSIDERATIONS

In determining whether to grant authorization of any speech or conduct that is prohibited under this policy, the factors that the Sheriff or authorized designee should consider include:

(a) Whether the speech or conduct would negatively affect the efficiency of delivering public services.

(b) Whether the speech or conduct would be contrary to the good order of the Office or the efficiency or morale of its members.

(c) Whether the speech or conduct would reflect unfavorably upon the Office.

(d) Whether the speech or conduct would negatively affect the member's appearance of impartiality in the performance of their duties.

(e) Whether similar speech or conduct has been previously authorized.

(f) Whether the speech or conduct may be protected and outweighs any interest of the Office.

225.7 TRAINING

Subject to available resources, the Office should provide training regarding employee speech and the use of social networking to all members of the office.

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Information Technology Use

226.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the proper use of office information technology resources, including computers, electronic devices, hardware, software, and systems.

226.1.1 DEFINITIONS

Definitions related to this policy include:

Computer system - All computers (on-site and portable), electronic devices, hardware, software, and resources owned, leased, rented or licensed by the Tehama County Sheriff's Office that are provided for official use by its members. This includes all access to, and use of, Internet Service Providers (ISP) or other service providers provided by or through the Office or office funding.

Hardware - Includes, but is not limited to, computers, computer terminals, network equipment, electronic devices, telephones including cellular and satellite, pagers, modems or any other tangible computer device generally understood to comprise hardware.

Software - Includes, but is not limited to, all computer programs, systems and applications including "shareware." This does not include files created by the individual user.

Temporary file, permanent file or file - Any electronic document, information or data residing or located, in whole or in part, on the system including, but not limited to, spreadsheets, calendar entries, appointments, tasks, notes, letters, reports, messages, photographs or videos.

226.2 POLICY

Tehama County Sheriff's Office members shall use information technology resources, including computers, software and systems, that are issued or maintained by the Office in a professional manner and in accordance with this policy.

226.3 PRIVACY EXPECTATION

Members forfeit any expectation of privacy with regard to emails, texts, or anything published, shared, transmitted, or maintained through file-sharing software or any internet site that is accessed, transmitted, received, or reviewed on any office technology system.

The Office reserves the right to access, audit, and disclose, for whatever reason, any message, including attachments, and any information accessed, transmitted, received, or reviewed over any technology that is issued or maintained by the Office, including the office email system, computer network, or any information placed into storage on any office system or device. This includes records of all keystrokes or web-browsing history made at any office computer or over any office network. The fact that access to a database, service, or website requires a username or password will not create an expectation of privacy if it is accessed through office computers, electronic devices, or networks.

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226.4 RESTRICTED USE

Members shall not access computers, devices, software or systems for which they have not received prior authorization or the required training. Members shall immediately report unauthorized access or use of computers, devices, software or systems by another member to the Shift Supervisor.

Members shall not use another person’s access passwords, logon information and other individual security data, protocols and procedures unless directed to do so by the Shift Supervisor.

226.4.1 SOFTWARE

Members shall not copy or duplicate any copyrighted or licensed software except for a single copy for backup purposes, in accordance with the software company’s copyright and license agreement.

To reduce the risk of a computer virus or malicious software infection, members shall not install any unlicensed or unauthorized software on any office computer. Members shall not install personal copies of any software on any office computer. Any files or software that a member finds necessary to install on office computers or networks shall be installed only with the approval of office information systems technology (IT) staff and only after being properly scanned for malicious attachments.

When related to criminal investigations, software program files may be downloaded only with the approval of IT staff and with the authorization of the Sheriff or the authorized designee.

No member shall knowingly make, acquire or use unauthorized copies of computer software that is not licensed to the Office while on office premises, computer system or electronic device. Such unauthorized use of software exposes the Office and involved members to severe civil and criminal penalties.

Introduction of software by members should only occur as a part of the automated maintenance or update process of office- or county-approved or installed programs by the original manufacturer, producer or developer of the software. Any other introduction of software requires prior authorization from IT staff.

226.4.2 HARDWARE

Access to technology resources provided by or through the Office shall be strictly limited to office-related activities. Data stored on or available through office computer systems shall only be accessed by authorized members who are engaged in an active investigation, assisting in an active investigation, or who otherwise have a legitimate law enforcement or office-related purpose to access such data. Any exceptions to this policy must be approved by the Shift Supervisor.

226.4.3 INTERNET USE

Internet access provided by or through the Office shall be strictly limited to office-related activities. Internet sites containing information that is not appropriate or applicable to office use and which shall not be intentionally accessed include but are not limited to adult forums, pornography,

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gambling, chat rooms, and similar or related internet sites. Certain exceptions may be permitted with the express approval of the Shift Supervisor as a function of a member's assignment.

Downloaded information from the internet shall be limited to messages, mail, and data files.

226.4.4 OFF-DUTY USE

Members shall only use technological resources related to their job while on-duty or in conjunction with specific on-call assignments unless specifically authorized by the Shift Supervisor. This includes the use of telephones, cell phones, texting, email, or any other off-the-clock work-related activities.

226.5 PROTECTION OF SYSTEMS AND FILES

All members have a duty to protect the computer system and related systems and devices from physical and environmental damage and are responsible for the correct use, operation, care and maintenance of the computer system.

Members shall ensure office computers and access terminals are not viewable by persons who are not authorized users. Computers and terminals should be secured, users logged off, and password protections enabled whenever the user is not present. Access passwords, logon information, and other individual security data, protocols, and procedures are confidential information and are not to be shared. Password length, format, structure, and content shall meet the prescribed standards required by the computer system or as directed by the Shift Supervisor and shall be changed at intervals as directed by IT staff or the Shift Supervisor.

It is prohibited for a member to allow an unauthorized user to access the computer system at any time or for any reason. Members shall promptly report any unauthorized access to the computer system or suspected intrusion from outside sources (including the internet) to the Shift Supervisor.

226.6 INSPECTION OR REVIEW

The Shift Supervisor or the authorized designee has the express authority to inspect or review the computer system, all temporary or permanent files, related electronic systems or devices, and any contents thereof, whether such inspection or review is in the ordinary course of their duties or based on cause.

Reasons for inspection or review may include but are not limited to computer system malfunctions, problems, or general computer system failure, a lawsuit against the Office involving one of its members or a member's duties, an alleged or suspected violation of any office policy, request for disclosure of data, or a need to perform or provide a service.

The IT staff may extract, download, or otherwise obtain any and all temporary or permanent files residing or located in or on the office computer system when requested by the Shift Supervisor or during the course of regular duties that require such information.

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Payroll Records

227.1 PURPOSE AND SCOPE

This policy provides the guidelines for completing and submitting payroll records of office members who are eligible for the payment of wages.

227.2 POLICY

The Tehama County Sheriff's Office maintains timely and accurate payroll records.

227.3 RESPONSIBILITIES

Members are responsible for the accurate completion and timely submission of their payroll records for the payment of wages.

Supervisors are responsible for approving the payroll records for those under their commands.

227.4 TIME REQUIREMENTS

Members who are eligible for the payment of wages are paid on a scheduled, periodic basis, generally on the same day or date each period, with certain exceptions, such as holidays. Payroll records shall be completed and submitted to Administration as established by the county payroll procedures.

227.5 RECORDS

The Captain shall ensure that accurate and timely payroll records are maintained as required by 29 CFR 516.2 for a minimum of three years (29 CFR 516.5).

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Temporary Modified-Duty Assignments

228.1 PURPOSE AND SCOPE

This policy establishes procedures for providing temporary modified-duty assignments. This policy is not intended to affect the rights or benefits of employees under federal or state law, county rules, current memorandums of understanding or collective bargaining agreements. For example, nothing in this policy affects the obligation of the Office to engage in a good faith, interactive process to consider reasonable accommodations for any employee with a temporary or permanent disability or limitation that is protected under federal or state law.

228.2 POLICY

Subject to operational considerations, the Tehama County Sheriff's Office may identify temporary modified-duty assignments for employees who have an injury or medical condition resulting in temporary work limitations or restrictions. A temporary assignment allows the employee to work, while providing the Office with a productive employee during the temporary period.

228.3 GENERAL CONSIDERATIONS

Priority consideration for temporary modified-duty assignments will be given to employees with work-related injuries or illnesses that are temporary in nature. Employees having disabilities covered under the Americans with Disabilities Act (ADA) or the California Fair Employment and Housing Act (Government Code § 12940 et seq.) shall be treated equally, without regard to any preference for a work-related injury.

No position in the Tehama County Sheriff's Office shall be created or maintained as a temporary modified-duty assignment.

Temporary modified-duty assignments are a management prerogative and not an employee right. The availability of temporary modified-duty assignments will be determined on a case-by-case basis, consistent with the operational needs of the Office. Temporary modified-duty assignments are subject to continuous reassessment, with consideration given to operational needs and the employee’s ability to perform in a modified-duty assignment.

The Sheriff or the authorized designee may restrict employees working in temporary modified-duty assignments from wearing a uniform, displaying a badge, carrying a firearm, operating an office-owned vehicle, or engaging in outside employment, or may otherwise limit them in employing their peace officer powers.

Temporary modified-duty assignments shall generally not exceed a cumulative total of 1,040 hours in any one-year period.

228.4 PROCEDURE

Employees may request a temporary modified-duty assignment for short-term injuries or illnesses.

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Employees seeking a temporary modified-duty assignment should submit a written request to the Captain or the authorized designee. The request should, as applicable, include a certification from the treating medical professional containing:

(a) An assessment of the nature and probable duration of the illness or injury.

(b) The prognosis for recovery.

(c) The nature and scope of limitations and/or work restrictions.

(d) A statement regarding any required workplace accommodations, mobility aids, or medical devices.

(e) A statement that the employee can safely perform the duties of the temporary modified-duty assignment.

The Captain will make a recommendation through the chain of command to the Sheriff regarding temporary modified-duty assignments that may be available based on the needs of the Office and the limitations of the employee. The Sheriff or the authorized designee shall confer with the Personnel Department or the County Counsel as appropriate.

Requests for a temporary modified-duty assignment of 20 hours or less per week may be approved and facilitated by the Captain or the Captain, with notice to the Sheriff.

228.5 ACCOUNTABILITY

Written notification of assignments, work schedules, and any restrictions should be provided to employees assigned to temporary modified-duty assignments and their supervisors. Those assignments and schedules may be adjusted to accommodate office operations and the employee's medical appointments, as mutually agreed upon with the Captain.

228.5.1 EMPLOYEE RESPONSIBILITIES

The responsibilities of employees assigned to temporary modified duty shall include but are not limited to:

(a) Communicating and coordinating any required medical and physical therapy appointments in advance with their supervisors.

(b) Promptly notifying their supervisors of any change in restrictions or limitations after each appointment with their treating medical professionals.

(c) Communicating a status update to their supervisors no less than once every 30 days while assigned to temporary modified duty.

(d) Submitting a written status report to the Captain that contains a status update and anticipated date of return to full duty when a temporary modified-duty assignment extends beyond 60 days.

228.5.2 SUPERVISOR RESPONSIBILITIES

The employee's immediate supervisor shall monitor and manage the work schedule of those assigned to temporary modified duty.

The responsibilities of supervisors shall include but are not limited to:

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(a) Periodically apprising the Captain of the status and performance of employees assigned to temporary modified duty.

(b) Notifying the Captain and ensuring that the required documentation facilitating a return to full duty is received from the employee.

(c) Ensuring that employees returning to full duty have completed any required training and certification.

228.6 MEDICAL EXAMINATIONS

Prior to returning to full-duty status, employees shall be required to provide certification from their treating medical professionals stating that they are medically cleared to perform the essential functions of their jobs without restrictions or limitations.

The Office may require a fitness-for-duty examination prior to returning an employee to full-duty status, in accordance with the Fitness for Duty Policy.

228.7 PREGNANCY

If an employee is temporarily unable to perform regular duties due to a pregnancy, childbirth, or a related medical condition, the employee will be treated the same as any other temporarily disabled employee (42 USC § 2000e(k)). A pregnant employee shall not be involuntarily transferred to a temporary modified-duty assignment. Nothing in this policy limits a pregnant employee's right to a temporary modified-duty assignment if required under Government Code § 12945.

If notified by an employee or the employee's representative regarding a limitation related to pregnancy, childbirth, or related medical conditions, the Office should make reasonable efforts to provide an accommodation for the employee in accordance with federal and state law. The accommodation should be provided without unnecessary delay, as appropriate (42 USC § 2000gg-1; 29 CFR 1636.3; 29 CFR 1636.4; Government Code § 12945).

228.7.1 NOTIFICATION

Pregnant employees should notify their immediate supervisors as soon as practicable and provide a statement from their medical providers identifying any pregnancy-related job restrictions or limitations. If at any point during the pregnancy it becomes necessary for the employee to take a leave of absence, such leave shall be granted in accordance with the county’s personnel rules and regulations regarding family and medical care leave.

228.8 PROBATIONARY EMPLOYEES

Probationary employees who are assigned to a temporary modified-duty assignment may have their probation extended by a period of time equal to their assignment to temporary modified duty.

228.9 MAINTENANCE OF CERTIFICATION AND TRAINING

Employees assigned to temporary modified duty shall maintain all certification, training, and qualifications appropriate to both their regular and temporary duties, provided that the certification, training, or qualifications are not in conflict with any medical limitations or restrictions. Employees

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who are assigned to temporary modified duty shall inform their supervisors of any inability to maintain any certification, training, or qualifications.

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Illness and Injury Prevention

229.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an ongoing and effective plan to reduce the incidence of illness and injury for members of the Tehama County Sheriff's Office, in accordance with the requirements of 8 CCR 3203.

This policy specifically applies to illness and injury that results in lost time or that requires medical treatment beyond first aid. Although this policy provides the essential guidelines for a plan that reduces illness and injury, it may be supplemented by procedures outside the Custody Manual.

This policy does not supersede, but supplements any related county-wide safety efforts.

229.2 POLICY

The Tehama County Sheriff's Office is committed to providing a safe environment for its members and visitors and to minimizing the incidence of work-related illness and injuries. The Office will establish and maintain an illness and injury prevention plan and will provide tools, training, and safeguards designed to reduce the potential for accidents, illness, and injuries. It is the intent of the Office to comply with all laws and regulations related to occupational safety.

229.3 ILLNESS AND INJURY PREVENTION PLAN

The Administration Captain is responsible for developing an illness and injury prevention plan that shall include:

(a) Workplace safety and health training programs.

(b) Regularly scheduled safety meetings.

(c) Posted or distributed safety information.

(d) A system for members to anonymously inform management about workplace hazards.

(e) Establishment of a safety and health committee that will:

1. Meet regularly.
2. Prepare a written record of safety and health committee meetings.
3. Review the results of periodic scheduled inspections.
4. Review investigations of accidents and exposures.
5. Make suggestions to command staff for the prevention of future incidents.
6. Review investigations of alleged hazardous conditions.
7. Submit recommendations to assist in the evaluation of member safety suggestions.
8. Assess the effectiveness of efforts made by the Office to meet relevant standards.

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(f) Establishment of a process to ensure serious illnesses or injuries and deaths are reported as required by the Division of Occupational Safety and Health (Cal/OSHA) (8 CCR 342).

229.4 ADMINISTRATION CAPTAIN RESPONSIBILITIES

The responsibilities of the Administration Captain include but are not limited to:

(a) Managing and implementing a plan to reduce the incidence of member illness and injury.

(b) Ensuring that a system of communication is in place that facilitates a continuous flow of safety and health information between supervisors and members. This system shall include:

1. New member orientation that includes a discussion of safety and health policies and procedures.
2. Regular member review of the illness and injury prevention plan.
3. Access to the illness and injury prevention plan to members or their representatives as set forth in 8 CCR 3203.

(c) Ensuring that all safety and health policies and procedures are clearly communicated and understood by all members.

(d) Taking reasonable steps to ensure that all members comply with safety rules in order to maintain a safe work environment. This includes but is not limited to:

1. Informing members of the illness and injury prevention guidelines.
2. Recognizing members who perform safe work practices.
3. Ensuring that the member evaluation process includes member safety performance.
4. Ensuring office compliance to meet standards regarding the following:
   (a) Respiratory protection (8 CCR 5144)
   (b) Bloodborne pathogens (8 CCR 5193)
   (c) Aerosol transmissible diseases (8 CCR 5199)
   (d) Heat illness (8 CCR 3395)
   (e) Emergency Action Plan (8 CCR 3220). See the Fire Safety and Evacuation policies.
   (f) Fire Prevention Plan (8 CCR 3221)
   (g) Hazards associated with wildfire smoke (8 CCR 5141.1)

(e) Making available the Identified Hazards and Correction Record form to document inspections, unsafe conditions, or unsafe work practices, and actions taken to correct unsafe conditions and work practices.

(f) Making available the Investigation/Corrective Action Report to document individual incidents or accidents.

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(g) Making available a form to document the safety and health training of each member. This form will include the member's name or other identifier, training dates, type of training, and training providers.

(h) Conducting and documenting a regular review of the illness and injury prevention plan.

229.5 SUPERVISOR RESPONSIBILITIES

Supervisor responsibilities include but are not limited to:

(a) Ensuring member compliance with illness and injury prevention guidelines and answering questions from members about this policy.

(b) Training, counseling, instructing, or making informal verbal admonishments any time safety performance is deficient. Supervisors may also initiate discipline when it is reasonable and appropriate under the Standards of Conduct Policy.

(c) Establishing and maintaining communication with members on health and safety issues. This is essential for an injury-free, productive workplace.

(d) Completing required forms and reports relating to illness and injury prevention; such forms and reports shall be submitted to the Captain.

(e) Notifying the Captain when:

1. New substances, processes, procedures, or equipment that present potential new hazards are introduced into the work environment.
2. New, previously unidentified hazards are recognized.
3. Occupational illnesses and injuries occur.
4. New and/or permanent or intermittent members are hired or reassigned to processes, operations, or tasks for which a hazard evaluation has not been previously conducted.
5. Workplace conditions warrant an inspection.

229.6 HAZARDS

All members should report and/or take reasonable steps to correct unsafe or unhealthy work conditions, practices, or procedures in a timely manner. Members should make their reports to a supervisor (as a general rule, their own supervisors).

Supervisors should make reasonable efforts to correct unsafe or unhealthy work conditions in a timely manner, based on the severity of the hazard. These hazards should be corrected when observed or discovered, when it is reasonable to do so. When a hazard exists that cannot be immediately abated without endangering members or property, supervisors should protect or remove all exposed members from the area or item, except those necessary to correct the existing condition.

Members who are necessary to correct the hazardous condition shall be provided with the necessary protection.

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All significant actions taken and dates they are completed shall be documented on an Identified Hazards and Correction Record form. This form should be forwarded to the Captain via the chain of command.

The Captain will take appropriate action to ensure the illness and injury prevention plan addresses potential hazards upon such notification.

229.7 INSPECTIONS

Safety inspections are crucial to a safe work environment. These inspections identify and evaluate workplace hazards and permit mitigation of those hazards. A hazard assessment checklist should be used for documentation and to ensure a thorough assessment of the work environment.

The Administration Captain shall ensure that the appropriate documentation is completed for each inspection.

229.7.1 EQUIPMENT

Members are charged with daily inspections of their assigned areas and of their PPE as described in the Sanitation Inspections and Daily Activity Logs and Shift Reports policies. Members shall complete the Identified Hazards and Correction Record form if an unsafe condition cannot be immediately corrected. Members should forward this form to their supervisors.

229.8 INVESTIGATIONS

Any member sustaining any work-related illness or injury, as well as any member who is involved in any accident or hazardous substance exposure while on-duty, shall report such event as soon as practicable to a supervisor. Members observing or learning of a potentially hazardous condition are to promptly report the condition to their immediate supervisors.

A supervisor receiving such a report should personally investigate the incident or ensure that an investigation is conducted. Investigative procedures for workplace accidents and hazardous substance exposures should include:

(a) A visit to the accident scene as soon as possible.

(b) An interview of the injured member and witnesses.

(c) An examination of the workplace for factors associated with the accident/exposure.

(d) Determination of the cause of the accident/exposure.

(e) Corrective action to prevent the accident/exposure from reoccurring.

(f) Documentation of the findings and corrective actions taken.

(g) Completion of an Investigation/Corrective Action Report form.

(h) Completion of an Identified Hazards and Correction Record form.

Additionally, the supervisor should proceed with the steps to report an on-duty injury, as required under the Occupational Disease and Work-Related Illness and Injury Reporting Policy, in conjunction with this investigation to avoid duplication and ensure timely reporting.

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229.9 TRAINING

The Captain should work with the Training Manager to provide all members, including supervisors, with training on general and job-specific workplace safety and health practices. Training shall be provided:

(a) To supervisors to familiarize them with the safety and health hazards to which members under their immediate direction and control may be exposed.

(b) To all members with respect to hazards specific to each member's job assignment.

(c) To all members given new job assignments for which training has not previously been provided.

(d) Whenever new substances, processes, procedures, or equipment are introduced to the workplace and represent a new hazard.

(e) Whenever the Office is made aware of a new or previously unrecognized hazard.

229.9.1 TRAINING TOPICS

The Training Manager shall ensure that training includes:

(a) Reporting unsafe conditions, work practices, and injuries, and informing a supervisor when additional instruction is needed.

(b) Use of appropriate clothing, including gloves and footwear.

(c) Use of respiratory equipment.

(d) Availability of toilet, hand-washing, and drinking-water facilities.

(e) Provisions for medical services and first aid.

(f) Handling of bloodborne pathogens and other biological hazards.

(g) Prevention of heat and cold stress.

(h) Identification and handling of hazardous materials, including chemical hazards to which members could be exposed, and review of resources for identifying and mitigating hazards (e.g., hazard labels, Safety Data Sheets (SDS)).

(i) Mitigation of physical hazards, such as heat and cold stress, noise, and ionizing and non-ionizing radiation.

(j) Identification and mitigation of ergonomic hazards, including working on ladders or in a stooped posture for prolonged periods.

(k) Back exercises/stretches and proper lifting techniques.

(l) Avoidance of slips and falls.

(m) Good housekeeping and fire prevention.

(n) Other job-specific safety concerns.

229.10 RECORDS

Records and training documentation relating to illness and injury prevention will be maintained in accordance with the established records retention schedule.

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Occupational Disease and Work-Related Injury Reporting

230.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidance regarding the timely reporting of occupational diseases, mental health issues, and work-related injuries.

230.1.1 DEFINITIONS

Definitions related to this policy include:

Occupational disease or work-related injury - An injury, disease, or mental health issue arising out of employment (Labor Code § 3208; Labor Code § 3208.3; Labor Code § 3212 et seq.).

230.2 POLICY

The Tehama County Sheriff's Office will address occupational diseases and work-related injuries appropriately, and will comply with applicable state workers' compensation requirements (Labor Code § 3200 et seq.).

230.3 RESPONSIBILITIES

230.3.1 MEMBER RESPONSIBILITIES

Any member sustaining any occupational disease or work-related injury shall report such event as soon as practicable, but within 24 hours, to a supervisor, and shall seek medical care when appropriate (8 CCR 14300.35).

230.3.2 SUPERVISOR RESPONSIBILITIES

A supervisor learning of any occupational disease or work-related injury should ensure the member receives medical care as appropriate.

Supervisors shall ensure that required documents regarding workers' compensation are completed and forwarded promptly. Any related countywide disease- or injury-reporting protocol shall also be followed.

Supervisors shall determine whether the Illness and Injury Prevention Policy applies and take additional action as required.

230.3.3 FACILITYMANAGER RESPONSIBILITIES

The Captain who receives a report of an occupational disease or work-related injury should review the report for accuracy and determine what additional action should be taken. The report shall then be forwarded to the Sheriff, the county's risk management entity, and the Administration Captain to ensure any required Division of Occupational Safety and Health (Cal/OSHA) reporting is made as required in the illness and injury prevention plan identified in the Illness and Injury Prevention Policy.

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230.3.4 AGENCYHEAD RESPONSIBILITIES
The Sheriff shall review and forward copies of the report to the Personnel Department. Copies of the report and related documents retained by the Office shall be filed in the member’s confidential medical file.

230.4 OTHER DISEASE OR INJURY
Diseases and injuries caused or occurring on-duty that do not qualify for workers' compensation reporting shall be documented on the designated report of injury form, which shall be signed by a supervisor. A copy of the completed form shall be forwarded to the appropriate Captain through the chain of command and a copy sent to the Administration Captain.

Unless the injury is extremely minor, this report shall be signed by the affected member, indicating that they desired no medical attention at the time of the report. By signing, the member does not preclude their ability to later seek medical attention.

230.5 SETTLEMENT OFFERS
When a member sustains an occupational disease or work-related injury that is caused by another person and is subsequently contacted by that person, their agent, insurance company, or attorney and offered a settlement, the member shall take no action other than to submit a written report of this contact to their supervisor as soon as possible.

230.5.1 NO SETTLEMENT WITHOUT PRIOR APPROVAL
No less than 10 days prior to accepting and finalizing the settlement of any third-party claim arising out of or related to an occupational disease or work-related injury, the member shall provide the Sheriff with written notice of the proposed terms of such settlement. In no case shall the member accept a settlement without first providing written notice to the Sheriff. The purpose of such notice is to permit the county to determine whether the offered settlement will affect any claim the county may have regarding payment for damage to equipment or reimbursement for wages against the person who caused the disease or injury, and to protect the county's right of subrogation, while ensuring that the member's right to receive compensation is not affected.

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Evaluation of Employees

231.1 PURPOSE AND SCOPE

The Office's employee performance evaluation system is designed to record work performance for both the Office and the employee, providing recognition for good work and developing a guide for improvement.

231.2 POLICY

The Tehama County Sheriff's Office utilizes a performance evaluation report to measure performance and to use as a factor in making personnel decisions that relate to merit increases, promotion, reassignment, discipline, demotion, and termination. The evaluation report is intended to serve as a guide for work planning and review by the supervisor and employee. It gives supervisors a way to create an objective history of work performance based on job standards.

The Office evaluates employees in a nondiscriminatory manner based upon job-related factors specific to the employee's position, without regard to actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law.

231.3 EVALUATION PROCESS

Evaluation reports will cover a specific period of time and should be based on documented performance during that period. Evaluation reports will be completed by each employee's immediate supervisor. Other supervisors directly familiar with the employee's performance during the rating period should be consulted by the immediate supervisor for their input.

All sworn and Non-sworn supervisory personnel shall attend an approved supervisory course that includes training on the completion of performance evaluations within one year of the supervisory appointment.

Each supervisor should discuss the tasks of the position, standards of performance expected and the evaluation criteria with each employee at the beginning of the rating period. Supervisors should document this discussion in the prescribed manner.

Assessment of an employee's job performance is an ongoing process. Continued coaching and feedback provides supervisors and employees with opportunities to correct performance issues as they arise.

Non-probationary employees demonstrating substandard performance shall be notified in writing as soon as possible in order to have an opportunity to remediate the issues. Such notification should occur at the earliest opportunity, with the goal being a minimum of 90 days' written notice prior to the end of the evaluation period.

Employees who disagree with their evaluation and who desire to provide a formal response or a rebuttal may do so in writing in the prescribed format and time period.

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231.4 FULL-TIME PROBATIONARY PERSONNEL

Non-sworn personnel are on probation for [12 months] before being eligible for certification as permanent employees. An evaluation is completed monthly for all full-time Non-sworn personnel during the probationary period.

Sworn personnel are on probation for [12 months] before being eligible for certification as permanent employees. Probationary correctional officers are evaluated daily, weekly, and monthly during the probationary period.

231.5 FULL-TIME PERMANENT STATUS PERSONNEL

Permanent employees are subject to three types of performance evaluations:

Regular - An Employee Performance Evaluation shall be completed once each year by the employee's immediate supervisor on the anniversary of the employee's date of hire except for employees who have been promoted in which case an Employee Performance Evaluation shall be completed on the anniversary of the employee's date of last promotion.

Transfer - If an employee is transferred from one assignment to another in the middle of an evaluation period and less than six months have transpired since the transfer, then an evaluation shall be completed by the current supervisor with input from the previous supervisor.

Special - A special evaluation may be completed any time the rater and the rater's supervisor feel one is necessary due to employee performance that is deemed less than standard. Generally, the special evaluation will be the tool used to demonstrate those areas of performance deemed less than standard when follow-up action is planned (action plan, remedial training, retraining). The evaluation form and the attached documentation shall be submitted as one package.

231.5.1 RATINGS

When completing the Employee Performance Evaluation, the rater will place a check mark in the column that best describes the employee's performance. The definition of each rating category is as follows:

Outstanding - Is actual performance well beyond that required for the position. It is exceptional performance, definitely superior or extraordinary.

Exceeds standards - Represents performance that is better than expected of a fully competent employee. It is superior to what is expected, but is not of such rare nature to warrant outstanding.

Meets standards - Is the performance of a fully competent employee. It means satisfactory performance that meets the standards required of the position.

Needs improvement - Is the level of performance less than that expected of a fully competent employee and less than standards required of the position. A needs improvement rating shall be thoroughly discussed with the employee.

Unsatisfactory - Performance is inferior to the standards required of the position. It is inadequate or undesirable performance that cannot be tolerated.

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Space for written comments is provided at the end of the evaluation in the rater comments section. This section allows the rater to document the employee's strengths, weaknesses, and suggestions for improvement. Any rating under any job dimension marked unsatisfactory or outstanding shall be substantiated in the rater comments section.

231.6 EVALUATION INTERVIEW

When the supervisor has completed the preliminary evaluation, arrangements shall be made for a private discussion of the evaluation with the employee. The supervisor should discuss the results of the just completed rating period and clarify any questions the employee may have. If the employee has valid and reasonable protests of any of the ratings, the supervisor may make appropriate changes to the evaluation. Areas needing improvement and goals for reaching the expected level of performance should be identified and discussed. The supervisor should provide relevant counseling regarding advancement, specialty positions, and training opportunities. The supervisor and employee will sign and date the evaluation. Permanent employees may also write comments in the Employee Comments section of the performance evaluation report.

231.6.1 DISCRIMINATORY HARASSMENT FORM

At the time of each employee’s annual evaluation, the reviewing supervisor shall require the employee to read the county and Tehama County Sheriff's Office harassment and discrimination policies. Following such policy review, the supervisor shall provide the employee a form to be completed and returned by the employee certifying the following:

(a) That the employee understands the harassment and discrimination policies.

(b) Whether any questions the employee has have been sufficiently addressed.

(c) That the employee knows how and where to report harassment policy violations.

(d) Whether the employee has been the subject of, or witness to, any conduct that violates the discrimination or harassment policy which has not been previously reported.

The completed form should be returned to the supervisor (or other authorized individual if the employee is uncomfortable returning the form to the presenting supervisor) within one week.

The employee’s completed answers shall be attached to the evaluation. If the employee has expressed any questions or concerns, the receiving supervisor or other authorized individual shall ensure that appropriate follow-up action is taken.

231.7 EVALUATION REVIEW

After the supervisor finishes the discussion with the employee, the signed performance evaluation is forwarded to the rater's supervisor. The Captain shall review the evaluation for fairness, impartiality, uniformity, and consistency. The Captain shall evaluate the supervisor on the quality of ratings given.

231.8 EVALUATION DISTRIBUTION

The original performance evaluation shall be maintained in the employee's personnel file in the office of the Office for the tenure of the employee's employment.

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Evaluation of Employees

A copy will be given to the employee and a copy will be forwarded to the county Personnel Department.

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Chapter 3 - Recruitment Selection and Planning

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Employee Orientation

301.1 PURPOSE AND SCOPE

The purpose of this policy is to define the parameters for new employee orientation.

301.2 NEW EMPLOYEE ORIENTATION

Each new facility employee shall receive an orientation prior to assuming their duties. At a minimum, the orientation shall include the following:

- Working conditions
- Code of ethics
- Personnel policy manual
- Employee rights and responsibilities
- Overview of the criminal justice system
- Tour of the facility
- Facility goals and objectives
- Facility organization
- Staff rules and regulations
- Program overview

301.3 EMPLOYEE ACKNOWLEDGEMENTS

Office personnel assigned to provide the new employee orientation will ensure that each new employee is given copies of work rules and regulations, office ethics, and any other office documents, for which the employee will be held accountable.

A staff member will collect a signature page from the employee, acknowledging receipt, review and understanding of the documents. A copy of the signature page shall be retained in the employee's personnel file in accordance with established records retention schedules.

301.4 POLICY

It is the policy of the Tehama County Sheriff's Office to provide new employees with basic information about the facility and the environment in which they will be working. Orientation is not meant to supplant other basic training required by law, ordinance, or regulations.

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Continuing Education and Professional Development

302.1 PURPOSE AND SCOPE

This policy is designed to support the ongoing professional education and professional development of office personnel at all levels.

302.2 OBJECTIVES

The objective for continuing education and professional development is for all members to enhance their knowledge and skills to their fullest potential.

Members who engage in furthering their education in conjunction with skills-based training make for well-rounded employees who can better serve the mission of the Office and the community.

Supervisors should accommodate, to the extent feasible and schedules permitting, requests by personnel for shift adjustments and available leave time to assist personnel with their continuing education and professional development efforts.

302.3 POLICY

It is the policy of the Tehama County Sheriff's Office to encourage members to participate in continuing education and professional development opportunities whenever practicable.

The Office encourages all personnel to participate in formal education on a continuing basis.

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Jail Training Officer

304.1 PURPOSE AND SCOPE

The jail training officer program is intended to provide a standardized program to facilitate the correctional officer's transition from the academic setting to the actual performance of general corrections duties.

304.2 TRAINING OFFICER

The Training Officer (TO) is an experienced correctional officer trained in the art and science of supervising, training, and evaluating entry-level correctional officers in the application of their previously acquired knowledge and skills.

304.2.1 SELECTION PROCESS

Training officers will be selected based on certain requirements, including:

(a) A desire to perform the training mission.

(b) A minimum of three years as a correctional officer.

(c) A demonstrated ability to be a positive role model.

(d) Evaluation by supervisors and current TOs.

(e) A certificate from the state's law enforcement certifying agency, where applicable.

304.2.2 TRAINING

All TOs shall successfully complete a 40-hour course of instruction prior to being assigned a trainee.

All TOs must complete a 24-hour update course every three years while assigned to the position of TO.

304.3 TRAINING OFFICER RESPONSIBILITIES

(a) TOs shall complete and submit a written evaluation on the performance of their assigned trainee to the TO’s immediate supervisor on a daily basis.

(b) TOs shall review the performance evaluations with the trainee each day.

(c) A detailed end-of-phase performance evaluation on the assigned trainee shall be completed by the TO at the end of each phase of training.

(d) TOs shall be responsible for signing off all completed topics contained in the Training Manual, noting the methods of learning and evaluating the performance of the assigned trainee.

304.4 TRAINING OFFICER PROGRAM SUPERVISOR

The TO program supervisor will be selected from the rank of sergeant or above by the Captain or the authorized designee and shall possess supervisory credentials from the state's law

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enforcement certifying agency, where applicable. The supervisor's responsibilities include the following:

(a) Assignment of trainees to TOs

(b) Conduct TO meetings

(c) Maintain and ensure TO/trainee performance evaluations are completed in a timely manner

(d) Maintain, update, and issue the training manual to each trainee

(e) Monitor individual TO performance

(f) Monitor the overall TO program

(g) Develop ongoing training for TOs

304.5 POLICY

It is the policy of this office to assign all new correctional officers to a structured jail training officer program designed to prepare the new correctional officer to perform in a custody assignment, and to provide training on all skills needed to operate in a safe, productive, and professional manner.

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Recruitment and Selection

305.1 PURPOSE AND SCOPE

This policy provides a framework for employee recruiting efforts and identifying job-related standards for the selection process. This policy supplements the rules that govern employment practices for the Tehama County Sheriff's Office and that are promulgated and maintained by the Personnel Department.

305.2 APPLICANT QUALIFICATIONS

In addition to being at least 18 years of age, applicants must be either a United States citizen or naturalized citizen prior to appointment and meet all standards that have been adopted for employment in a custody facility.

Applicants for job openings will be selected based on merit, ability, competence and experience. All correctional officer applicants must meet the minimum standards described in applicable laws, ordinances and regulations, in addition to the employment standards established by this office.

305.3 DISQUALIFICATION GUIDELINES

As a general rule, performance indicators, candidate information, and records shall be evaluated by considering the candidate as a whole, and taking into consideration the following:

- Age at the time the behavior occurred
- Passage of time
- Patterns of past behavior
- Severity of behavior
- Probable consequences if past behavior is repeated or made public
- Likelihood of recurrence
- Relevance of past behavior to public safety employment
- Aggravating and mitigating factors
- Other relevant considerations

A candidate’s qualifications will be assessed on a case-by-case basis, using a totality-of-the-circumstances framework.

305.3.1 MANDATORY DISQUALIFICATION

No members or contractors shall be hired who have (28 CFR 115.17):

(a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC § 1997).

(b) Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, by overt or implied threats of force, or by coercion, or if the victim did not consent, or was unable to consent or refuse.

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(c) Been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b) of this section.

The Office shall ask all candidates who may have contact with incarcerated persons to disclose any conduct described above in written applications or interviews. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

The Office shall make reasonable efforts to contact prior institutions that the candidate has been employed by to inquire about sexual abuse allegations in accordance with 28 CFR 115.17.

305.4 POLICY

In accordance with applicable federal, state, and local law, the Tehama County Sheriff's Office provides equal opportunities for applicants and employees, regardless of actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law. The Office does not show partiality or grant any special status to any applicant, employee, or group of employees unless otherwise required by law.

The Office will recruit and hire only those individuals who demonstrate a commitment to service and who possess the traits and characteristics that reflect personal integrity and high ethical standards.

305.5 RECRUITMENT

The Administration Captain should employ a comprehensive recruitment and selection strategy to recruit and select employees from a qualified and diverse pool of candidates. The strategy should include:

(a) Identification of racially and culturally diverse target markets.

(b) Use of marketing strategies to target diverse applicant pools.

(c) Expanded use of technology and maintenance of a strong internet presence. This may include an interactive office website and the use of office-managed social networking sites, if resources permit.

(d) Expanded outreach through partnerships with media, community groups, citizen academies, local colleges, universities, and the military.

(e) Employee referral and recruitment incentive programs.

(f) Consideration of shared or collaborative regional testing processes.

The Administration Captain shall avoid advertising, recruiting, and screening practices that tend to stereotype, focus on homogeneous applicant pools, or screen applicants in a discriminatory manner.

The Administration Captain should strive to facilitate and expedite the screening and testing process, and should periodically inform each candidate of their status in the recruiting process.

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305.6 SELECTION PROCESS

The Office shall actively strive to identify a diverse group of candidates who have in some manner distinguished themselves as being outstanding prospects.

Minimally, the Office should employ a comprehensive screening, background investigation, and selection process that assesses cognitive and physical abilities and includes review and verification of the following:

(a) A comprehensive application for employment (including previous employment, references, current and prior addresses, education, military record)

1. The personnel records of any applicant with prior peace officer experience in this state shall be requested from the appropriate law enforcement agency and reviewed prior to extending an offer of employment (Penal Code § 832.12).
2. This includes review of prior law enforcement employment information maintained by the California Commission on Peace Officer Standards and Training (POST) (Penal Code § 13510.9).

(b) Driving record

(c) Reference checks

(d) Employment eligibility, including U.S. Citizenship and Immigration Services (USCIS) Employment Eligibility Verification Form I-9 and acceptable identity and employment authorization documents consistent with Labor Code § 1019.1. This required documentation should not be requested until a candidate is hired. This does not prohibit obtaining documents required for other purposes.

(e) Information obtained from public internet sites

(f) Financial history consistent with the Fair Credit Reporting Act (FCRA) (15 USC § 1681 et seq.)

(g) Local, state, and federal criminal history record checks

(h) Lie detector test (when legally permissible) (Labor Code § 432.2)

(i) Medical and psychological examination (may only be given after a conditional offer of employment)

1. The Medical Suitability Declaration (POST form 2-363) provided by the evaluating physician shall be maintained in the candidate's background investigation file (11 CCR 1954).
2. The Psychological Suitability Declaration (POST form 2-364) provided by the evaluator shall be maintained in the candidate's background investigation file (11 CCR 1955).

(j) Review board or selection committee assessment

305.6.1 VETERAN'S PREFERENCE

Qualifying veterans of the United States Armed Forces who receive a passing score on an entrance examination shall be ranked in the top rank of any resulting eligibility list. The veteran’s

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preference shall also apply to a widow or widower of a veteran or a spouse of a 100 percent disabled veteran (Government Code § 18973.1).

305.7 BACKGROUND INVESTIGATION

Every candidate shall undergo a thorough background investigation to verify their personal integrity and high ethical standards, and to identify any past behavior that may be indicative of the candidate's unsuitability to perform duties relevant to the operation of the Tehama County Sheriff's Office (11 CCR 1953).

The narrative report and any other relevant background information shall be shared with the psychological evaluator. Information shall also be shared with others involved in the hiring process if it is relevant to their respective evaluations (11 CCR 1953).

305.7.1 BACKGROUND INVESTIGATION UPDATE

A background investigation update may, at the discretion of the Sheriff, be conducted in lieu of a complete new background investigation on a peace officer candidate who is reappointed within 180 days of voluntary separation from the Tehama County Sheriff's Office (11 CCR 1953(f)).

305.7.2 NOTICES

Background investigators shall ensure that investigations are conducted and notices provided in accordance with the requirements of the FCRA and the California Investigative Consumer Reporting Agencies Act (15 USC § 1681d; Civil Code § 1786.16).

305.7.3 STATE NOTICES

If information disclosed in a candidate’s criminal offender record information (CORI) is the basis for an adverse employment decision, a copy of the CORI shall be provided to the applicant (Penal Code § 11105).

305.7.4 REVIEW OF SOCIAL MEDIA SITES

All peace officer candidates shall be subject to a social media search for statements, postings, and/or endorsements made by the candidate that are relevant to suitability for peace officer employment, including bias-relevant information consistent with the requirements of 11 CCR 1955(d)(3), and any public expression of hate made in an online forum as defined in Penal Code § 13680(g) (11 CCR 1953(e)(12)).

Due to the potential for accessing unsubstantiated, private, or protected information, the Office shall not require candidates to provide passwords, account information, or access to password-protected social media accounts (Labor Code § 980).

The Administration Captain should consider utilizing the services of an appropriately trained and experienced third party to conduct open-source, internet-based searches and/or review information from social media sites to ensure that:

(a) The legal rights of candidates are protected.

(b) Material and information to be considered are verified, accurate, and validated.

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(c) The Office fully complies with applicable privacy protections and local, state, and federal law.

Regardless of whether a third party is used, the Office should ensure that potentially impermissible information is not available to any person involved in the candidate selection process.

305.7.5 RECORDS RETENTION

The background report and all supporting documentation shall be maintained according to the established records retention schedule and at a minimum as follows (Government Code § 12946; 11 CCR 1953):

(a) Reports and documentation for candidates hired by the office shall be retained for the entire term of employment and for a minimum of four years after separation from the office.

(b) Reports and documentation for candidates not hired by the office for a minimum of four years.

305.7.6 DOCUMENTING AND REPORTING

The background investigator shall summarize the results of the background investigation in a narrative report that includes sufficient information to allow the reviewing authority to decide whether to extend a conditional offer of employment. The report shall include sections that summarize relevant Background Investigation Dimensions and include any findings of behaviors, traits, and/or attributes relevant to bias per the Bias Assessment Framework as described in the POST Background Investigation Manual: Guidelines for the Investigator. The report shall identify the data sources reviewed for the findings, regardless of weight given. The report shall include narrative information in the format described in 11 CCR 1953(g)(1). The report shall also include whether the candidate has engaged or is engaging in membership in a hate group, participating in hate group activity, advocacy, or public expressions of hate pursuant to Penal Code § 13680 et seq. (11 CCR 1953).

The report shall not include any information that is prohibited from use, including that from social media sites, in making employment decisions. The report and all supporting documentation, including relevant documentation of bias-related findings and documentation obtained through the social media search, shall be included in the candidate's background investigation file (11 CCR 1953).

The background investigator shall document proof of verification of qualification for peace officer appointment on the Verification of Qualification for Peace Officer Appointment form and forward it to the Administration Captain for final review and submission to POST (11 CCR 1953).

The background investigation file shall be made available during POST compliance inspections (11 CCR 1953).

305.7.7 CONFIDENTIAL POST RECORDS

Records released to the Tehama County Sheriff's Office from POST that were previously withheld from the candidate by POST shall be kept confidential as provided in Penal Code § 13510.9.

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305.8 EMPLOYMENT STANDARDS

All candidates shall meet the minimum standards required by state law (Government Code § 1029; Government Code § 1031; Penal Code § 13510.1; 11 CCR 1950 et seq.). Candidates will be evaluated based on merit, ability, competence, and experience, in accordance with the high standards of integrity and ethics valued by the Office and the community. The California Commission on Peace Officer Standards and Training (POST) developed a Job Dimensions list, which is used as a professional standard in background investigations.

Validated, job-related, and nondiscriminatory employment standards shall be established for each job classification and shall minimally identify the training, abilities, knowledge, and skills required to perform the position's essential duties in a satisfactory manner. Each standard should include performance indicators for candidate evaluation. The Personnel Department should maintain validated standards for all positions.

305.8.1 STANDARDS FOR CORRECTIONAL OFFICERS

Candidates shall meet the minimum standards established by POST or required by state law (Government Code § 1029; Government Code § 1031; 11 CCR 1950 et seq.):

(a) Free of any felony convictions

(b) Legally authorized to work in the United States under federal law

(c) At least 21 years of age except as provided by Government Code § 1031.4

(d) Fingerprinted for local, state, and national fingerprint check

(e) Good moral character as determined by a thorough background investigation (11 CCR 1953)

(f) High school graduate, passed the GED or other high school equivalency test, or obtained a two-year, four-year, or advanced degree from an accredited or approved institution

(g) Free from any physical, emotional, or mental condition, including bias against race or ethnicity, gender, nationality, religion, disability, or sexual orientation, that might adversely affect the exercise of police powers (11 CCR 1954; 11 CCR 1955)

(h) Free of hate group memberships, participation in hate group activities, or advocacy of public expressions of hate within the previous seven years and since age 18 as determined by a background investigation (Penal Code § 13681)

(i) Candidates must also satisfy the POST selection requirements, including (11 CCR 1950 et seq.):

    1. Reading and writing ability assessment (11 CCR 1951)

    2. Oral interview to determine suitability for law enforcement service (11 CCR 1952)

(j) POST certification that has not been revoked, denied, or voluntarily surrendered pursuant to Penal Code § 13510.8(f)

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(k) Not identified in the National Decertification Index of the International Association of Directors of Law Enforcement Standards and Training or similar federal government database that reflects revoked certification for misconduct or reflects misconduct that would result in a revoked certification in California

In addition to the above minimum POST required standards, candidates may be subjected to additional standards established by the Office (Penal Code § 13510(d)).

305.9 PROBATIONARY PERIODS

The Administration Captain should coordinate with the Tehama Personnel Department to identify positions subject to probationary periods and procedures for:

(a) Appraising performance during probation.

(b) Assessing the level of performance required to complete probation.

(c) Extending probation.

(d) Documenting successful or unsuccessful completion of probation.

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Training

306.1 PURPOSE AND SCOPE

This policy establishes training requirements and guidelines for correctional officers, support personnel, supervisors, and managers. The policy addresses the training program and the probationary period.

306.2 MINIMUM TRAINING REQUIREMENTS

All correctional officers, full- or part-time, shall successfully complete the Adult Corrections Officer Core Course as described in 15 CCR 179 within one year from the date of assignment (15 CCR 1020(a)).

Custodial personnel who have successfully completed the course of instruction required by Penal Code § 832.3 shall successfully complete the Corrections Officer Basic Academy Supplemental Core Course as described in 15 CCR 180, within one year of the date of assignment (15 CCR 1020(b)).

Individuals assigned to work in the facility prior to completing the required training may do so only when under the direct supervision of a fully trained correctional officer.

Transfer courses may be utilized to meet Adult Corrections Officer Core Course requirements when the member has had the relevant probation or juvenile corrections training (15 CCR 179.1; 15 CCR 179.2).

306.2.1 TRAINING FOR MANAGERS AND SUPERVISORS

All supervisory personnel shall have completed the Corrections Core Course training requirements in accordance with 15 CCR 1020, as specified in this policy, before assuming supervisory responsibilities (15 CCR 1021).

All Captains and supervisors (full- or part-time) shall receive management and supervision training specified by the Commission on Peace Officer Standards and Training (POST) and the Standards and Training for Corrections Program (STC) within the first year of their appointment as described in 15 CCR 181 (15 CCR 1021).

Managers shall receive required management training as described in 15 CCR 182 or complete the POST management course within one year from the date of assignment (15 CCR 1023).

306.2.2 REQUIRED ANNUAL TRAINING

With the exception of the year that the correctional officer is enrolled in a core training module, all facility/system administrators, managers, supervisors, and custodial staff members shall complete the annual required training specified in 15 CCR 184. Additionally, correctional officers shall complete annual in-service training on mental and behavioral health (15 CCR 184; 15 CCR 1025).

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306.2.3 REQUIRED CPR TRAINING
All correctional officers shall complete CPR certification as required by 15 CCR 184. Training shall include that when it is safe and appropriate, CPR shall begin on a nonresponsive person without obtaining approval from a supervisor or medical staff (15 CCR 184).

306.3 JAIL TRAINING PROGRAM PHASES
The jail training program is designed to build upon the conceptual foundation taught in the basic academy or core training module, whereupon the theoretical knowledge gained can be molded into a practical skill set. The jail training program consists of the five phases described below.

306.3.1 FIRST PHASE - FACILITY ORIENTATION
The trainee will be assigned to a Training Officer (TO). The TO will, at a minimum:

(a) Brief the trainee on the purpose, scope and responsibilities expected during the training program.

(b) Explain the evaluation system and acquaint the trainee with the rating forms that will be used.

(c) Provide the trainee with any required equipment or materials.

(d) Tour the entire facility and support services with the trainee.

(e) Introduce the trainee to the Captain and key supervisory, administrative and support personnel.

306.3.2 SECOND PHASE - SHADOWING
In this phase, the trainee will be exposed to the many duties at each post by observing the TO demonstrate how each task is to be performed. The TO should provide instruction to the trainee and encourage the trainee to ask questions.

Time should be made available during this phase to allow the trainee to study policies and procedures, directives, post orders, and any other materials deemed necessary by the TO.

The TO will monitor the trainee's progress by asking questions and administering tests on the materials and demonstrations that have been provided to the trainee.

The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

306.3.3 THIRD PHASE - HANDS-ON WITH CLOSE SUPERVISION
During this phase, the TO will instruct the trainee in each required activity at each post. Once each task is demonstrated, the trainee will be directed to perform each activity under the close supervision of the TO.

The TO will provide direction as needed to the trainee during the hands-on activities.

The work performance of the trainee will be evaluated and recorded daily by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

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306.3.4 FOURTH PHASE - SOLO WITH MONITORING
During this phase the trainee will be directed to work solo in each area that training has been provided.

The solo activities of the trainee will be monitored by the TO and a supervisor.

The work performance of the trainee will be evaluated and recorded by the TO. Areas of deficiency will be discussed and remedial training provided if deemed necessary by the TO.

306.3.5 FIFTH PHASE - WORKING INDEPENDENTLY WITH SUPERVISION
Provided that there are no concerns about the trainee's ability, the trainee will be assigned to a shift and will be supervised regularly by the supervisor.

The supervisor, in consultation with the TO and the Captain, will make a recommendation to pass the trainee on to their assignment, to continue training, or to terminate the employee.

306.4 PROBATIONARY PERIOD EVALUATION

Probationary employees will receive a written evaluation of their job skills and learning progress at least once a month or at the completion of each phase of training, whichever occurs first. Prior to being permanently appointed, each probationary employee will receive a final evaluation. These evaluations shall be in writing and discussed with the employee by their supervisor. The final evaluation shall be made a part of the employee's personnel record.

306.5 POLICY

It is the policy of this office to assign all members to a structured jail training program designed to prepare the member to perform their assigned duties in a custodial jail in a safe, productive, and professional manner.

306.6 TRAINING OBJECTIVES

The objectives of the training program are to:

(a) Improve the competency of staff at all levels.

(b) Ensure that staff can carry out the mission of the Office through a thoroughly demonstrated knowledge of office policies and procedures.

(c) Increase the technical expertise and overall effectiveness of personnel.

(d) Provide for continued professional development of office personnel.

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Specialized Training

307.1 PURPOSE AND SCOPE

Correctional officers who are assigned to specialized response units will receive training commensurate with the complexity of their specialty and must be able to demonstrate proficiency in the specific skills related to their specialized function.

307.2 QUALIFICATIONS

To be eligible for assignment to a specialized emergency unit, correctional officers are required to be off probation and to have at least three years of experience as a correctional officer.

307.3 TRAINING

The Training Manager is responsible for ensuring that all personnel who are assigned to a specialized emergency unit will receive not less than 16 hours of specialized training as specified above or as a part of their annual training requirement.

The Office will use courses certified by a competent government or standards-setting organization whenever practicable. All training should include testing to identify and document the employee’s knowledge in the subject matter presented.

It shall be the responsibility of the employee to provide the Training Manager or immediate supervisor with evidence of completed training and education in a timely manner. The Training Manager or supervisor shall ensure that copies of training records are placed in the employee’s training file.

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Firearms Training

308.1 PURPOSE AND SCOPE

This policy is intended to ensure that all personnel legally assigned a firearm will develop proficiency in the use, care and safety of firearms through a regular training schedule in accordance with all laws and regulations.

308.2 FIREARMS TRAINING

Whenever possible, the Office will use firearm training courses certified by a competent government or standards-setting organization. Whenever training is provided by the Office, the Training Manager should ensure that a course outline and/or lesson plan, a roster signed and dated by those in attendance and the name of the person coordinating the event are on file.

Personnel who are authorized to carry a firearm in the performance of their duties are required to maintain proficiency with firearms used in the course of their assignment. All custody personnel who carry firearms are required to qualify quarterly with their duty weapon on an approved range course.

The Rangemaster shall keep accurate records of quarterly qualifications, repairs, maintenance and training records as directed by the Training Manager. In addition to regular qualification schedules, the Rangemaster shall be responsible for providing all affected personnel with annual practical training that is designed to simulate situations that may occur in a custody facility setting. At least annually, all personnel carrying a firearm will receive training on the Use of Force Policy and demonstrate their knowledge and understanding by passing either a performance or written test.

308.3 FIREARMS NON-QUALIFICATION

If any staff member is unable to qualify for any reason, including injury, illness, duty status, or scheduling conflict, that staff member shall submit a memorandum to their immediate supervisor prior to the end of the required shooting period.

Members who repeatedly fail to qualify will be relieved from the assignment that required a firearm; appropriate disciplinary action may follow.

Personnel who fail to qualify on the first shooting attempt shall be provided remedial training until proficiency is demonstrated, and will be subject to the following requirements:

(a) Additional range assignments may be required until consistent weapon proficiency is demonstrated.

(b) Members shall be given credit for a range qualification after remedial training and a qualifying score is obtained.

(c) No range credit will be given for the following:

1. Unauthorized range makeup
2. Failure to qualify after remedial training

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308.4 POLICY

All personnel authorized to use firearms shall receive training in accordance with state law.

Notwithstanding any statutory and regulatory requirements, at a minimum, firearms training will include the use and care of firearms and knowledge of the office Use of Force Policy and of relevant state and federal regulations involving the use of firearms.

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Chemical Agents Training

309.1 PURPOSE AND SCOPE

This policy establishes the required training for members to be authorized to carry and use chemical agents.

309.2 POLICY

The Office authorizes the use of selected chemical agents. Chemical agents are weapons used to minimize the potential for injury to members, incarcerated persons, and others. Chemical agents should only be used in situations where such force reasonably appears justified and necessary.

309.3 CHEMICAL AGENT TRAINING

Only members trained and having shown adequate proficiency in the use of any chemical agent and the Use of Force Policy are authorized to carry the device.

(a) The Training Manager shall ensure that appropriate training for all chemical agents occurs annually at a minimum.

(b) All initial and proficiency training for chemical agents will be documented in the member's training file.

(c) Members failing to demonstrate continuing proficiency with chemical agents or knowledge of the Use of Force Policy will lose their authorization to carry or use the devices and will be provided remedial training. If, after two remedial training sessions, a member fails to demonstrate proficiency with chemical agents or knowledge of the Use of Force Policy, the member may be subject to discipline.

(d) The Training Manager shall be responsible for ensuring that all personnel who are authorized to use chemical agents have also been trained in the proper medical treatment of persons who have been affected by the use of chemical agents. Training should include the initial treatment (e.g., providing the proper solution to cleanse the affected area) and knowing when to summon medical personnel for more severe effects.

309.4 PROFICIENCY TESTING

The Training Manager shall ensure that all training delivered to staff should also test proficiency in order to document that the member understands the subject matter, and that proficiency training is monitored and documented by a certified weapons or tactical instructor.

309.5 TRAINING RECORDS

It shall be the responsibility of the Training Manager to ensure that the following is maintained on file for all training provided by the Office:

- A course outline or lesson plan
- A roster signed and dated by those in attendance
- The name of the person coordinating the training

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The Training Manager shall ensure that copies of such training records are placed in the member's training file and retained in accordance with established records retention schedules.

309.6 REVIEW, INSPECTION AND APPROVAL

Every chemical agent delivery device will be periodically inspected by the Rangemaster or the designated instructor for a particular device.

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Prison Rape Elimination Act Training

310.1 PURPOSE AND SCOPE

This policy establishes an education and training process related to implementation of the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation (PREA Rule) (28 CFR 115.5 et seq.).

310.2 POLICY

The Tehama County Sheriff's Office endeavors to comply with the training standards in the PREA Rule and to ensure that all staff, volunteers, and contractors, are aware of their responsibilities and that staff, volunteers, contractors, and incarcerated persons are aware of the policies and procedures of the facility as they relate to PREA.

310.3 MEMBER TRAINING

All staff, volunteers, and contractors who may have contact with incarcerated persons shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Manager shall ensure that the staff receives training and testing in prevention and intervention techniques, that they have sufficient knowledge to answer any questions the arrestees and incarcerated persons may have regarding sexual assault or abuse, and that they are familiar enough with the reporting process to take an initial report of a sexual assault or abuse. The Training Manager shall be responsible for developing and administering this training, covering at minimum (28 CFR 115.31; 28 CFR 115.32):

(a) The zero-tolerance policy for sexual abuse and sexual harassment and how to report such incidents.

(b) The dynamics of sexual abuse and sexual harassment in confinement.

(c) The common reactions of sexual abuse and sexual harassment victims.

(d) Prevention and intervention techniques to avoid sexual abuse and sexual harassment in the jail.

(e) Procedures for the investigation of a report of sexual abuse and/or sexual harassment.

(f) Individual responsibilities under sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.

(g) An individual's right to be free from sexual abuse and sexual harassment.

(h) The right of incarcerated persons to be free from retaliation for reporting sexual abuse and sexual harassment.

(i) How to detect and respond to signs of threatened and actual sexual abuse.

(j) How to communicate effectively and professionally with incarcerated persons, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming incarcerated persons.

(k) How to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment to outside authorities.

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(l) How to avoid inappropriate relationships with incarcerated persons.

Training shall be tailored according to the gender of the incarcerated persons at the facility. Staff should receive additional training on security measures and the separation of multiple gendered populations in the same facility if incarcerated persons have been reassigned from a facility that houses only a single gender incarcerated person population.

Training should include written testing to validate knowledge and understanding of the material. The Training Manager shall document, through signature or electronic verification, that staff, volunteers, and contractors have received and understand the training. The Training Unit will maintain training records on all those receiving training in accordance with procedures developed by the Training Manager.

The Training Manager shall ensure that members undergo annual refresher training that covers the office's sexual abuse and sexual harassment policies and related procedures (28 CFR 115.31)

310.4 SPECIALIZED MEDICAL TRAINING

All full- and part-time qualified health care and mental health professionals who work regularly in the facility shall receive all of the member training listed above, as well as training that includes (28 CFR 115.35):

(a) Detecting and assessing signs of sexual abuse and sexual harassment.

(b) Preserving physical evidence of sexual abuse.

(c) Responding effectively and professionally to victims of sexual abuse and sexual harassment.

(d) Reporting allegations or suspicions of sexual abuse and sexual harassment.

If the qualified health care and mental health professionals employed by this facility conduct forensic examinations, they shall receive the appropriate training to conduct such examinations.

The Training Manager shall maintain documentation that the facility's health care and mental health professionals have received the training referenced above, either from this office or elsewhere.

310.5 SPECIALIZED INVESTIGATIVE TRAINING

Specialized investigative training for investigators shall include the uniform evidence protocol to maximize potential for obtaining useable physical evidence; techniques for interviewing sexual abuse victims; proper use of *Miranda* and *Garrity* warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution (28 CFR 115.21; 28 CFR 115.34).

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Health Care Staff Orientation

311.1 PURPOSE AND SCOPE

The purpose of this policy is to establish an orientation period for all new health care staff working in the facility, in cooperation with the health authority. The goal is to improve the competency of the health care staff and the effectiveness of the care delivered, as well as to maintain the safety and security of the custody environment and to comply with all applicable laws, regulations and national health care standards observed by the Office.

311.2 NEW HEALTH CARE STAFF ORIENTATION

All new health care staff shall complete an orientation program before independently working in their assignments. At a minimum, the orientation program will cover the following:

(a) The purpose, goals, policies, and procedures for the Tehama County Sheriff's Office

(b) Security and contraband regulations

(c) Access control to include use of keys

(d) Appropriate conduct with incarcerated persons

(e) Responsibilities and rights of facility employees and contractors

(f) Universal and standard precautions

(g) Occupational exposure

(h) Personal protective equipment (PPE)

(i) Biohazardous waste disposal

(j) An overview of the correctional field as it relates to custody functions

(k) Health care delivery protocols

311.3 HEALTH CARE STAFF REFRESHER TRAINING

All health care staff shall meet refresher-training requirements as established by the local public health entity or their minimum licensing requirements as established by the state licensing body.

311.4 FACILITY-SPECIFIC TRAINING

The Training Manager should include these staff members in training and training exercises relative to facility safety and security including, but not limited to, the following:

- Emergency medical triage in the facility
- Emergency evacuation routes and procedures
- Communication systems during facility emergencies
- Security during facility emergencies
- Qualified health care professional response during “officer down” incidents
- Responding to critical facility emergencies

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- Facility hostage policy and medical response tactics
- Medical emergency transportation procedures
- Media relations

311.5 TESTING

All training delivered to qualified health care professionals should include a testing component to document that the employees understand the subject material.

311.6 TRAINING RECORDS

The Training Manager, in coordination with the Responsible Physician, shall be responsible for developing and maintaining training records in accordance with established records retention schedules. The Training Manager shall also maintain a file of professional licensure and certifications for each member of the health care staff.

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Volunteer Program

312.1 PURPOSE AND SCOPE

It is the policy of this office to use qualified volunteers to assist in the daily operation through their contribution of services to the incarcerated person and the families of incarcerated persons, and to serve as a link between the facility and the community. Volunteers are intended to supplement and support, rather than supplant, correctional officers and other personnel. Volunteers can be an important part of any organization and are proven to be a valuable asset to corrections institutions.

312.1.1 DEFINITION OF VOLUNTEER

An individual who performs a service for the Office without promise, expectation or receipt of compensation for services rendered. This may include unpaid chaplains, unpaid reserve correctional officers, interns and persons providing administrative support.

312.2 VOLUNTEER PROGRAM MANAGEMENT

312.2.1 PROGRAM COORDINATOR

The program coordinator shall be appointed by the Captain. The function of the program coordinator is to provide a central coordinating point for effective program management within the Office, and to direct and assist staff and volunteer efforts to provide more productive services. The program coordinator should work with other Office staff on an ongoing basis to assist in the development and implementation of volunteer positions.

The program coordinator or the authorized designee shall be responsible for:

(a) Developing and maintaining a volunteer recruiting plan.

(b) Developing and maintaining a handbook that minimally identifies expectations and the lines of authority, responsibility and accountability for the various volunteer assignments.

(c) Recruiting, selecting and training qualified volunteers for various positions.

(d) Facilitating the implementation of new volunteer activities and assignments.

(e) Maintaining records for each volunteer.

(f) Tracking and evaluating the contribution of volunteers.

(g) Maintaining a record of volunteer schedules and work hours.

(h) Completion and dissemination as appropriate of all necessary paperwork and information.

(i) Planning periodic recognition events.

(j) Administering discipline when warranted.

(k) Maintaining liaison with other community programs that use volunteers and assisting in community efforts to recognize and promote volunteering.

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312.2.2 RECRUITMENT

Volunteers should be recruited on a continuous and ongoing basis in accordance with office policy on equal opportunity non-discriminatory employment. A primary qualification for participation should be an interest in, and an ability to assist the Office in serving the public.

Requests for volunteers should be submitted in writing by interested staff to the program coordinator through the requester's immediate supervisor. A complete position description, including when the volunteer would be needed, should be included in the request. All parties should understand that the recruitment of volunteers is enhanced by creative and interesting assignments. The program coordinator may withhold assignment of any volunteer until such time as the requesting unit is prepared to make effective use of volunteer resources.

312.2.3 SCREENING

All prospective volunteers should complete the volunteer application form. The program coordinator or the authorized designee should conduct a face-to-face interview with an applicant under consideration.

A documented background investigation shall be completed on each volunteer applicant and shall include, but not necessarily be limited to, the following:

(a) Traffic and criminal background check; fingerprints shall be obtained from applicants and processed through the Criminal Information Index (CII).

(b) Employment

(c) References

(d) Credit check

A polygraph exam may be required of each applicant depending on the type of assignment.

312.2.4 SELECTION AND PLACEMENT

Service as a volunteer with the Office shall begin with an official notice of acceptance or appointment to a volunteer position. Notice may only be given by an authorized representative of the Office, normally the program coordinator. No volunteer should begin any assignment until they have been officially accepted for the position. Each volunteer should complete all required enrollment paperwork and will receive a copy of their position description and agreement of service with the Office.

Volunteers should be placed only in assignments or programs that are consistent with their knowledge, skills, abilities, and the needs of the facility.

312.2.5 TRAINING

The program coordinator or the authorized designee shall be responsible for developing and maintaining training curriculum and any related forms specific to volunteer assignments.

The program coordinator or the authorized designee shall be responsible for ensuring that volunteers are provided with an orientation program to acquaint them with the Office, personnel,

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and policies and procedures that have a direct impact on their work assignment. The training/ orientation will include, but not be limited to, the following topics:

(a) Office policies and procedures

(b) Rules related to contraband in the facility

(c) Prohibition on carrying weapons in the facility

(d) Volunteer/offender relationship and general rules of conduct

(e) Safety and emergency information

(f) An overview and history of the Office

The program coordinator shall be responsible for creating and maintaining records of all training provided to each volunteer.

Volunteers should receive position training by their immediate supervisor to ensure they have adequate knowledge and skills to complete tasks required by the position. They should receive periodic ongoing training as deemed appropriate by their supervisor or the coordinator.

Training should reinforce to volunteers that they may not intentionally represent themselves as, or by omission infer, that they are sworn correctional officers or other full-time members or employees of the Office. They shall always represent themselves as volunteers.

All volunteers shall comply with the rules of conduct and with all orders and directives, either oral or written, issued by the Office.

312.2.6 FITNESS FOR DUTY

No volunteer shall report to work or be on-duty when his/her mental or physical condition has been impaired by alcohol, medication or other substances, or when the volunteer is experiencing illness or injury.

Volunteers shall report to their supervisor any changes in status that may affect their ability to fulfill their duties. This includes, but is not limited to, the following:

(a) Driver's license status, if driving is part of the duties of the assignment

(b) Any medical condition that might impair the volunteer’s ability to perform the duties of the position

(c) Arrests

(d) Criminal investigations

All volunteers shall adhere to the guidelines set forth by this office regarding drug and alcohol use.

312.2.7 DRESS CODE

As representatives of the Office, volunteers should present a professional image to the community. Volunteers shall dress appropriately for the conditions and performance of their duties.

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Volunteers shall conform to office-approved dress in accordance with their duty assignment. Uniforms authorized for volunteers should be readily distinguishable from those worn by correctional officers. The uniform or identifiable parts of the uniform shall not be worn while off-duty. However, volunteers may choose to wear the uniform while in transit to or from official office assignments or functions, provided an outer garment is worn over the uniform shirt to avoid bringing attention to the volunteer while they are off-duty.

Volunteers shall be required to return any issued uniform or office property at the termination of service.

312.3 SUPERVISION OF VOLUNTEERS

Each volunteer who is accepted to a position with the Office and assigned to the jail must have a clearly identified supervisor who is responsible for direct management of that volunteer. This supervisor will be responsible for day-to-day management and guidance of the work of the volunteer and should be available to the volunteer for consultation and assistance.

A volunteer may be assigned and act as a supervisor of other volunteers, provided that the supervising volunteer is under the direct supervision of a paid staff member.

Functional supervision of volunteers is the responsibility of the supervisor in charge of the unit where the volunteer is assigned. The following are some considerations to keep in mind while supervising volunteers:

(a) Take the time to introduce volunteers to employees on all levels.

(b) Ensure volunteers have work space and necessary office supplies.

(c) Make sure the work is challenging. Do not hesitate to give them an assignment or task that will tap these valuable resources.

312.4 HEALTH CARE VOLUNTEERS

The program coordinator will coordinate volunteer activities with the qualified health care professionals. Health care volunteers will be subject to all of the volunteer, recruitment, selection, and training requirements of the Office. The qualified health care professionals may have additional requirements and training for health care volunteers.

The program coordinator shall ensure that any volunteer performing health care duties possesses the appropriate credentials and training, in coordination with the qualified health care professionals, and shall ensure that signed agreement forms pertaining to the security and confidentiality of information are on file with the Office.

The program coordinator shall also ensure that volunteers performing health care duties have received specific training in topics that include fire, safety, security, contraband, and incarcerated person culture.

312.5 CONFIDENTIALITY

With appropriate security clearance, volunteers may have access to confidential information, such as criminal histories or investigative files. Unless otherwise directed by a supervisor or office policy,

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all information shall be considered confidential. Only that information specifically identified and approved by authorized personnel shall be released. Confidential information shall be given only to persons who have a need and a right to know, as determined by office policy and supervisory personnel.

Each volunteer will be required to sign a nondisclosure agreement before being given an assignment with the Office. Subsequent unauthorized disclosure of any confidential information, verbally, in writing or by any other means, by the volunteer is grounds for immediate dismissal and possible criminal prosecution.

Volunteers shall not address public gatherings, appear on radio or television, prepare any article for publication, act as correspondents to a newspaper or other periodical, release or divulge any information concerning the activities of the Office, or maintain that they represent the Office in such matters without permission from the proper office personnel.

312.6 PROPERTY AND EQUIPMENT

Volunteers will be issued an identification card that must be worn at all times while on-duty.

Any fixed and portable equipment issued by the Office shall be for official and authorized use only. Any property or equipment issued to a volunteer shall remain the property of the Office and shall be returned at the termination of service.

312.6.1 VEHICLE USE

Volunteers assigned to duties that require the use of a vehicle must first complete:

(a) A safety briefing and office-approved driver-safety course.

(b) Verification that the volunteer possesses a valid driver’s license.

(c) Verification that the volunteer carries current vehicle insurance.

The program coordinator should ensure that all volunteers receive safety briefing updates, and should verify their license and insurance at least once a year.

When operating any office vehicle, volunteers shall obey all rules of the road, including seat belt requirements. Smoking is prohibited in all office vehicles.

312.6.2 TELECOMMUNICATION SYSTEMS USAGE

Volunteers with access to law enforcement telecommunication systems shall successfully complete all mandated access training and radio procedures training prior to using any such equipment. Volunteers shall comply with all policies and procedures related to the use of such equipment. The program coordinator should ensure that appropriate training is provided for volunteers whenever necessary.

312.7 DISCIPLINARY PROCEDURES/TERMINATION

A volunteer may be removed from the volunteer program at the discretion of the Sheriff, Captain or the program coordinator. Volunteers shall have no property interests in their continued appointment.

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Volunteers may resign from volunteer service with the Office at any time. It is requested that volunteers who intend to resign provide advance notice of their departure and a reason for their decision.

312.7.1 EXIT INTERVIEWS

Exit interviews, when practicable, should be conducted with volunteers who are leaving their positions. The interview should attempt to ascertain the reason for leaving the position and solicit the volunteer's suggestions on improving the position. When appropriate, the interview should also include a discussion on the possibility of involvement in some other capacity with the Office.

312.8 EVALUATION

An evaluation of the overall volunteer program will be conducted on an annual basis by the program coordinator. Regular evaluations should be conducted with volunteers to ensure the best use of human resources, to ensure personnel problems can be identified and dealt with promptly and fairly, and to ensure optimum satisfaction on the part of volunteers.

312.9 VOLUNTEER REGISTRATION

All volunteers shall be registered with the Office for insurance purposes, and each volunteer shall be issued an identification card. The facility shall maintain an identification record for each volunteer that includes a photograph, home address, current telephone numbers, background certification, training/orientation certifications, and list of special skills, languages spoken or volunteer specialty.

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Briefing Training

313.1 PURPOSE AND SCOPE

Briefing training is generally conducted at the beginning of the correctional officer’s assigned shift. Briefing training provides an opportunity for an important exchange of information between employees and supervisors.

313.2 BRIEFING

Briefing training covers a wide range of topics selected by the management/supervisory and training staff.

The supervisor conducting briefing training is responsible for the preparation of the materials necessary for constructive training. Supervisors may delegate this responsibility to a subordinate correctional officer in their absence or for training purposes. The briefing training will be based upon a structured program to provide topics related to but not limited to the following:

- Custody facility policies and procedures
- Office Departmental Directives not yet established into policy
- Reviewing recent incidents for training purposes
- In preparation or response to an unusual occurrence
- Statutory requirements or court orders
- Operation of new equipment, including computer software
- Notifying the staff of changes in schedules and assignments
- Any other topic as determined by the Sheriff or the Captain

313.3 COMPUTER-BASED TRAINING OPTIONS

The Lexipol Daily Training Bulletins (DTBs) is a web-based system that provides training on the Tehama County Sheriff's Office Custody Manual and other important topics. Generally, 20 training bulletins are available each month. However, the number of DTBs may be adjusted by the Training Manager.

Personnel assigned to participate in DTBs should only use the passwords and login names assigned to them by the Training Manager. Personnel should not share their passwords with others and should frequently change their passwords to protect the security of the system. After each session, employees should log off the system to prevent unauthorized access. The content of the DTBs is copyrighted material and shall not be shared with others outside of the Office.

Employees who are assigned to participate in the DTB program should complete each DTB at the beginning of their shifts or as otherwise directed by their supervisors. Employees should not allow uncompleted DTBs to build up over time. Personnel may be required to complete DTBs missed during extended absences (e.g., vacation, medical leave) upon returning to duty. Although the DTB system can be accessed from any internet-active computer, employees shall only take

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DTBs as part of their on-duty assignments as there will be no authorization for taking or viewing DTBs while off-duty.

Supervisors will be responsible for monitoring the progress of personnel under their command to ensure compliance with this policy.

313.4 TRAINING RECORDS

The Training Manager will assist the Shift Supervisors with identifying relevant topics for delivery during briefing training and will be responsible for maintaining all briefing training records.

313.5 POLICY

Briefing is intended to facilitate the accurate flow of information to enhance coordination of activities, improve performance and safety, and outline the expected actions of members.

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Training Plan

314.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a training plan that will provide for the professional growth and continued development of facility personnel and to forecast annual funding needs for future training. By doing so, the Office will ensure its personnel possess the knowledge and skills necessary to professionally manage the incarcerated person population.

314.2 POLICY

The Training Manager shall conduct an annual training needs assessment to determine the training needs of all employees based upon state laws, regulations, certification requirements and continued professional training requirements.

A training plan shall be based on the assessment. It is the responsibility of the Training Manager to develop, maintain, review and update the training plan on an annual basis.

The annual training plan should be presented to the management staff for review. The approved training plan should include the annual funding requirements forecast by the Training Manager. The Training Manager shall coordinate with the budgeting office to develop a funding source for all mandatory training.

The Sheriff or the authorized designee shall have final approval of the training plan and the budget to ensure that the training to be delivered is fiscally responsible and meets the mission of the Office.

The Training Manager will execute the training plan on behalf of the Sheriff.

314.3 TRAINING MANAGER

A qualified individual shall be appointed by the Sheriff or the authorized designee to serve as the Training Manager, who shall report to the Sheriff or the authorized designee.

Full-time employees who are assigned to be trainers shall receive specialized instruction, which at a minimum shall include a 40-hour train-the-trainers course.

The Training Manager is responsible for developing an annual training plan. The plan should ensure that employees meet all state law and certification requirements, any specialty training required for specialty assignments, and all continued professional training requirements. The plan should include a process to review course content and quality, typically by way of attendee feedback and/or a course audit by the training staff.

314.4 TRAINING RECORDS

An individual training file shall be maintained by the Training Manager or the authorized designee for each member. Training files shall contain records of all training and education (original or photocopies of available certificates, transcripts, diplomas, and other documentation) for all members.

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The maintenance of the training records shall be in sufficient detail as to comply with any outside audit requirements (28 CFR 115.34).

It shall be the responsibility of the member to provide their immediate supervisor or the Training Manager evidence of completed training or education in a timely manner.

The Training Manager or supervisor shall ensure that copies of such training records are placed in the member's training file.

Training records shall contain the following information:

- Name of the member
- Date of hire
- Education and training background (education and training received prior to hire)
- Type of training received
- Date the training was received and successfully completed
- Title of the training and name of the provider
- Test scores or training benchmarks

The Training Manager shall also be responsible for documenting the waivers of the training requirements based upon equivalent training received before employment or demonstrated competency through proficiency testing.

314.5 COURSE CERTIFICATION/QUALITY ASSURANCE

Training courses should be subject to a quality assurance process that, at minimum, provides:

- A complete description of the course, including the number of certified training hours achieved.
- A curriculum including job-related topics, and content and performance objectives.

Training should not only comprise the minimum number of hours required annually but also instruction specific to tasks performed by members in the facility. Courses should include a testing component that shows a measurable transfer of knowledge and a mastery of topics.

314.5.1 COURSE RECORDS

It shall be the responsibility of the Training Manager to ensure that the following is maintained on file for all training provided by the Office:

(a) The course outline or lesson plan

(b) A roster signed and dated by those in attendance

(c) The name of the person coordinating the training

(d) The credentials of the instructors/trainers

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314.6 TRAINING COMMITTEE

The Training Manager shall establish a training committee, which will serve to assist with identifying training needs for the Office. The training committee shall comprise at least three members, with the senior ranking member of the committee acting as the chairperson. Members should be selected based on their abilities at post-incident evaluation and at assessing related training needs.

The Training Manager may remove or replace members of the committee at their discretion. The training committee should review certain incidents, as detailed below, to determine whether training would likely improve future outcomes or would reduce or prevent the recurrence of an incident. Specific incidents the training committee should review include but are not limited to:

(a) Any incident involving the death or serious injury of a member.

(b) Incidents involving a high-risk of death, serious injury, or civil liability.

(c) Incidents identified by a supervisor as appropriate to review to identify possible training needs.

The training committee should convene on a regular basis, as determined by the Training Manager, to review the identified incidents. The committee shall determine by consensus whether a training need exists and then submit a written recommendation to the Training Manager. The recommendation should not identify specific facts of any incident, such as identities of members involved or the date, time, and location of the incident, but should focus on the type of training being recommended.

The Training Manager will consider the recommendation of the committee and determine what training should be addressed, taking into consideration the mission of the Office and available resources.

314.7 TRAINING PROCEDURES

All members assigned to attend training shall attend as scheduled, unless previously excused by their immediate supervisor or the Training Manager.

(a) Excused absences from mandatory training should be limited to the following:

1. Court appearances
2. Authorized vacation
3. Sick leave
4. Physical limitations preventing the member's participation
5. Emergency situations

(b) When a member is unable to attend mandatory training, that member shall:

1. Notify their supervisor as soon as possible but no later than one hour prior to the start of training.
2. Document their absence in a memorandum to the supervisor.

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3. Make arrangements through the supervisor and the Training Manager to attend the required training on an alternate date.

(c) All training programs, whether in-house or outside the facility, are considered on-duty work assignments and the following should apply:

1. Uniform or business casual attire is required unless otherwise indicated.
2. Members should participate during training.
3. Members shall display a professional demeanor.
4. Members shall adhere to the Drug- and Alcohol-Free Workplace Policy.

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Support Personnel Training

315.1 PURPOSE AND SCOPE

The Office has developed a training program for professional support and contractor personnel, whether full- or part-time, to increase competency in their assigned tasks and to help ensure that all support personnel understand the issues that are unique to their position as it relates to this facility. This policy establishes minimum training guidelines for those employees and contractors.

315.2 TRAINING MANAGER RESPONSIBILITIES

The Training Manager is responsible for coordinating training and will ensure that the training and orientation given to each general service or contract employee is properly documented and placed in the worker's training file. At a minimum the record should contain the name of the individual, the assignment, the date the orientation was presented, the orientation outline indicating the subject material and the name of the instructor. To the extent applicable, copies of tests and passing scores should also be included as a part of the record.

315.3 PART-TIME PERSONNEL

General service personnel working part-time shall receive formal orientation and training commensurate with the scope of their work assignments, as determined by the Captain, before assignment to duties within the facility. At a minimum the orientation should cover institutional rules, security and operational issues. General service and contract personnel who fail to successfully complete all required training shall not be permitted to work in the secure portions of the facility.

315.4 PERSONNEL WITH MINIMAL INCARCERATED PERSON CONTACT

New professional support and contractor personnel who have minimal incarcerated person contact will receive a minimum of 16 hours of training during the first year of employment.

Minimal incarcerated person contact is defined as tasks that do not involve the supervision of incarcerated persons, incarcerated person discipline, or specific tasks that involve custody and control of incarcerated persons. Training topics shall include but not be limited to:

- Custody policies and procedures
- Emergency response procedures
- Job-specific training

315.5 PERSONNEL WITH REGULAR INCARCERATED PERSON CONTACT

All new professional and support employees, including contractors, who have regular or daily incarcerated person contact, shall receive a minimum of 40 hours of training during the first year of employment prior to being independently assigned to a particular job function.

Incarcerated person contact is defined as tasks that involve the direct provision of services to incarcerated persons (e.g., custody assistants, vocational supervisors, teachers, food service,

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commissary, chaplain) but that do not involve the custodial supervision of incarcerated persons involving custody, discipline, and control. Training topics shall include but not be limited to:

- Security procedures and regulations
- Planning
- Development and implementation of treatment and out of cell time programs
- Supervision of incarcerated persons
- Signs of suicide risk
- Suicide precautions
- Use of force regulations and tactics
- Report writing
- Incarcerated person rules and regulations
- Key control
- Rights and responsibilities of incarcerated persons
- Safety procedures
- All emergency plans and procedures
- Interpersonal relations
- Social/cultural lifestyles of the incarcerated person population
- Cultural diversity for understanding staff and incarcerated persons
- Communication skills
- Cardiopulmonary resuscitation (CPR/first aid)
- Universal precautions for the prevention of disease
- Counseling techniques
- Interaction of the elements of the criminal justice system
- Sexual harassment/sexual misconduct awareness

315.6 TESTING

All training delivered to support personnel should include testing to document that the employee understands the subject material presented.

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Chapter 4 - Emergency Planning

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Facility Emergencies

400.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a plan to appropriately respond to emergencies within the facility and to ensure all affected personnel receive timely training regarding emergency response. This policy is intended to protect the community, employees, visitors, incarcerated persons, and all others who enter the jail, while allowing the facility to fulfill its primary purpose.

Facility emergencies related to fire will be addressed in the Fire Safety Policy.

400.2 POLICY

It is the policy of this office to have emergency response plans in place to quickly and effectively respond to and minimize the severity of any emergency within the facility.

400.3 PROCEDURE

The Captain should develop, publish, and review emergency response plans that address the following (15 CCR 1029(a)):

(a) Fires

(b) Escapes

(c) Disturbances/riots

(d) Taking of hostages

(e) Mass arrests

(f) Natural disasters

(g) Periodic testing of emergency equipment

(h) Storage, issue, and use of weapons, ammunition, chemical agents, and related security devices

(i) Other emergencies as needs are identified

The facility emergency response plans are intended to provide the staff with current methods, guidelines, and training for minimizing the number and severity of emergency events that may threaten the security of the facility or compromise the safety of staff, incarcerated persons, or the community.

The emergency response plans are intended to provide information on specific assignments and tasks for personnel. Where appropriate, the emergency response plans will include persons and emergency departments to be notified.

The emergency response plans should include procedures for continuing to house incarcerated persons in the facility; the identification of alternative facilities outside the boundaries of the disaster or threat and the potential capacity of those facilities; incarcerated person transportation options; and contact information for allied agencies.

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The emergency response plans shall be made available to the staff, volunteers, and contractors working in the facility as needed.

400.4 LOCKDOWN

Upon detecting any significant incident that threatens the security of the facility, such as a riot or hostage situation, staff shall immediately notify Booking and the Shift Supervisor. The Shift Supervisor, or in their absence Booking, may determine whether to order a partial or full lockdown of the facility and shall notify the Captain as soon as practicable.

If a lockdown is ordered, all incarcerated persons will be directed back to their housing units/cells. All incarcerated persons in transit within the facility will either be escorted back to their housing units/cells or to another secure location (holding cell). The Shift Supervisor should instruct any staff not directly involved in the lockdown to escort any visitors and nonessential contractors out of the facility.

A headcount shall be immediately conducted for all incarcerated persons, visitors, contractors, and staff. The Shift Supervisor shall be immediately notified of the status of the headcount. If any person is unaccounted for, the Shift Supervisor shall direct an immediate search of the facility and notify the Captain of the situation as soon as practicable.

Lockdown is not to be used as a form of punishment. It may only be used to ensure order.

400.5 HUNGER STRIKE

Upon being made aware that one or more incarcerated persons is engaging in a hunger strike, the staff will notify the Shift Supervisor, who will notify the Captain. The Captain should evaluate the basis for the strike and seek an appropriate resolution.

Should the Captain be unable to resolve the grievance leading to the strike, the Captain will notify the Sheriff and provide updates on the status of the hunger strike.

400.5.1 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Captain or the authorized designee should notify the Responsible Physician to review, coordinate, and document any medical actions taken, based upon protocols and/or at the direction of qualified health care professionals, in response to a hunger strike.

Qualified health care professionals should monitor the health of incarcerated persons involved in the hunger strike and make recommendations to the Captain or the supervisory staff responsible for oversight of the incident.

If an incarcerated person is engaging in a hunger strike due to a mental condition, the appropriate medical protocols for mental illness will be followed.

400.5.2 RESPONSE TO HUNGER STRIKES

Beginning at the line staff level, a resolution to grievances should be sought at the lowest level. The Grievances Policy shall guide staff on resolving incarcerated person grievances.

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If the hunger strike remains unresolved, the Captain may direct the appropriate staff to examine the incarcerated person's commissary purchases made in advance of the hunger strike, and to monitor commissary purchases made during the hunger strike. Additional staff should be directed to observe the cell area, including trash containers, of the incarcerated persons involved for evidence of food items purchased from the commissary and of food hoarding.

400.5.3 LEGAL GUIDANCE

If all attempts to resolve the grievance are unsuccessful or not reasonably possible, the Sheriff should consider consulting with legal resources or the health authority, as appropriate, to develop other steps to resolve the issues.

400.6 RESPONSE TO DISTURBANCES

The staff should attempt to minimize the disruption to normal facility operations caused by a disturbance by attempting to isolate the disturbance to the extent possible. The staff should immediately notify the Shift Supervisor or the Jail Commander of the incident. The Shift Supervisor or Jail Commander may direct additional staff as needed to resolve the disturbance (15 CCR 1029(a)(7)(B)).

400.6.1 NOTIFICATIONS

The Shift Supervisor should notify the Captain of the disturbance as soon as practicable. Based on the seriousness of the event, the Captain should notify the Sheriff.

400.6.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Jail Commander or the authorized designee should notify the appropriate qualified health care professionals in order to review, coordinate and document medical actions based upon protocols and/or at the direction of the Responsible Physician.

400.6.3 REPORTING

The Shift Supervisor or the Captain should direct that an incident report be completed containing the details of the disturbance no later than the end of the shift. If appropriate, a crime report shall be initiated and prosecution sought.

400.7 RIOTS

Riots occur when incarcerated persons forcibly and/or violently take control or attempt to take control of any area within the confines of the jail.

Staff should make reasonable attempts to prevent incarcerated person-on-incarcerated person violence but should take measures to avoid being engulfed in the problem, thereby exacerbating the situation.

400.7.1 RESPONSE TO RIOTS

Once the area of the disturbance is secured and isolated from other areas of the facility, time is generally on the side of staff. If possible, the process of quelling the disturbance should slow down in order for staff to develop response plans, to ensure there are adequate facility personnel

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to effectively take the required actions, and to ensure that responding staff are appropriately equipped with protective gear.

Staff should evaluate their response given the totality of circumstances in any situation, but generally should not enter the space where a riot is occurring until sufficient staff members are present to safely suppress the riot. Nothing in this policy shall prohibit any staff member from assisting staff members who are being assaulted.

All incarcerated persons who have participated in a riot shall be separated and secured as soon as practicable. If necessary, injured incarcerated persons shall receive a medical evaluation and treatment. If the injured incarcerated person is medically cleared to remain in the jail, the incarcerated person will be reclassified and moved to appropriate housing.

Other housing units must be secured, with sufficient staff remaining at their posts to continue to supervise the unaffected units. When the riot has been suppressed, all involved staff must immediately return to their assigned posts.

400.7.2 QUALIFIED HEALTH CARE PROFESSIONALS RESPONSE

A supervisor or the authorized designee should notify the appropriate qualified health care professionals and identify a staging area for medical emergency responders and for medical triage should it appear to be necessary.

The Responsible Physician or the authorized designee should be included in developing the response plan as it relates to the potential for a medical response, medical triage and treatment activities, and the safety and security of medical personnel during the incident.

400.7.3 NOTIFICATIONS

As soon as practicable, the Shift Supervisor or a responsible staff member shall notify the Captain, who in turn, shall notify the Sheriff.

400.7.4 REPORTING

The Captain or the Shift Supervisor shall direct that a report be written detailing the incident by the end of the shift. If appropriate, a crime report will also be prepared by the responsible law enforcement agency.

400.7.5 DEBRIEFING

All responding staff, including medical responders, shall be debriefed on the incident as soon as practicable after the conclusion of the emergency incident. The staff shall examine the incident from the perspective of what worked, what actions were less than optimal and how the response to a future incident might be improved.

If appropriate, the details of the incident will be used to develop a training course for responding to facility disturbances. The goal of any debriefing process is continuous improvement. The debriefing should be focused on the incident and an improved response. A moderator should be used to ensure that no individual or group involved in the response is publicly ridiculed.

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400.8 HOSTAGES

The Office does not recognize the taking of hostages as a reason to relinquish control of the jail environment. All staff, incarcerated persons, visitors, volunteers, and contractors shall be informed of the "no hostage" policy prior to entering the facility for the first time and shall sign an acknowledgment, which the facility shall retain.

It is the policy of the Tehama County Sheriff's Office to use all available resources necessary to bring about a successful end to a hostage situation (15 CCR 1029(a)(7)(B)).

400.8.1 RESPONSE TO HOSTAGE INCIDENT

Booking should immediately be notified at the earliest sign of a hostage incident. Booking shall notify the Shift Supervisor and the Captain. The Captain will notify the Sheriff as soon as practicable.

The Shift Supervisor or the Captain shall make every effort to ensure that the hostage incident remains confined to the smallest area possible. All door controls accessible to the incarcerated person shall be disabled. Emergency exits that lead outside the secure perimeter shall be guarded.

400.8.2 NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

At the direction of the Shift Supervisor or the authorized designee, the qualified health care professionals should be notified in order to identify a location and form a logistical plan for medical triage. The location also shall serve as a medical staging area for other medical emergency responders.

400.8.3 HOSTAGE RESCUE

Communications with the hostage-taker should be established as soon as practicable. Hostage-taker demands for the staff to open doors will not be met. A hostage rescue team should be immediately summoned and the established protocols for resolving the situation shall be implemented. The Captain and Sheriff should be consulted regarding decisions faced by the hostage rescue team.

400.8.4 REPORTING AND DEBRIEFING

Following the conclusion of a hostage incident, the Captain should direct that an incident report be completed by the end of the shift. All aspects of the incident should be reviewed, focusing on the incident and the outcome, with the intent of using the incident as an opportunity for continuous improvement and to identify additional training or systemic changes that may be required.

400.9 ESCAPES

Upon being made aware that an escape may have occurred, or did in fact occur, the staff member should immediately notify Booking. Booking should notify the Shift Supervisor or the Captain. As soon as practicable, the Captain should notify the Sheriff.

Once the escape is verified and immediate actions taken inside the facility (lockdown, etc.), the Shift Supervisor should notify all local law enforcement agencies.

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400.9.1 INCARCERATED PERSON COUNTS

As soon as the facility is fully locked down, a full incarcerated person/wristband count should be taken.

All incarcerated persons who are outside of the secure perimeter of the facility (e.g., court, work details) should be located and identified. Any missing incarcerated person should have their identity disclosed and their facility record should be accessed by the Captain (15 CCR 1029(a)(6)).

400.9.2 SEARCH

Concurrent with the lockdown, the area surrounding the facility should be searched for the escapee. Areas where an incarcerated person may be hiding or may have discarded jail clothing should be searched first. Any witnesses should be interviewed.

Classification officers will develop a flyer with the incarcerated person's name, description, latest picture, classification status, and charges, and supply it to the custody staff and local law enforcement. Local law enforcement should also be given the incarcerated person's last known address and a list of their associates.

400.9.3 REPORTING

The Shift Supervisor or a designated staff member should submit an incident report to the Jail Commander. A crime report should also be written regarding the escape. The incident report should focus on events and physical plant weaknesses that contributed to the escape. The Jail Commander should review the reports, interview involved parties and develop action plans to minimize the risk of future occurrences.

400.10 CIVIL DISTURBANCES OUTSIDE OF THE JAIL

Upon being notified that jail space will be needed in response to a civil disturbance involving mass arrests, the Shift Supervisor should notify the Captain. The Captain should make the determination regarding the magnitude of the event and whether it warrants notification of the Sheriff.

The size of the event may also require a lockdown, suspension of any programs that are not critical to jail operations, and/or implementation of alternate staffing plans. To accommodate the influx of incarcerated persons, the Shift Supervisor shall develop a housing plan that will not adversely affect the safety and security of the facility. Program spaces, such as exercise yards, classrooms, and dayrooms, may be used to temporarily house a limited number of additional incarcerated persons.

In the event that the jail can no longer accept additional incarcerated persons without compromising the safety and security of the facility, mutual aid may be requested from allied counties. Title 15 CCR standards may be temporarily suspended. The Captain shall notify the California Board of State and Community Corrections (BSCC) in writing in the event that such a suspension lasts longer than three days. Suspensions lasting for more than 15 days require approval of the chairperson of the BSCC (15 CCR 1012).

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400.11 REVIEW OF EMERGENCY PROCEDURES

The Jail Commander shall ensure that there is a review of emergency response plans at least annually. This review should be documented with reports submitted to the Jail Commander or the authorized designee within 10 days of the review for approval. This review should also include the signatures or initials of the facility staff responsible for the review. At a minimum, the review shall include:

(a) Assignments of persons to specific tasks in emergency situations.

(b) Instructions in the use of the alarm systems and signals.

(c) Systems for the notification of appropriate persons outside of the facility.

(d) Information on the location and use of emergency equipment in the facility.

(e) Specification of evacuation routes and procedures.

400.12 TRAINING

The staff shall be trained annually on this policy. This facility will provide emergency preparedness training as part of orientation training for all personnel assigned to the facility and for those who may be required to respond to the facility in an emergency. The staff shall also receive refresher training at least annually in the emergency response plans. The Training Manager is responsible for developing and delivering appropriate initial training and annual refresher training.

Emergency planning training should occur in the form of classroom instruction (or roll call training), mock practical exercises, and drills. Each type of emergency covered in the emergency response plan must be included in the training.

A lesson plan, staff training sign-up sheet with the dates and the times training should be provided, and proof of competency (testing) for each participant should be maintained by the Training Manager.

The Training Manager shall forward an annual report to the Sheriff and the Captain on the status of emergency response plan training. Any training deficiencies identified in this report should be rectified within 90 days of the report.

The facility emergency plans and all training shall be documented by the Training Manager and retained in accordance with established records retention schedules.

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Emergency Staffing

401.1 PURPOSE AND SCOPE

The facility must operate at all times as a safe and secure environment, regardless of staffing levels. Consequently, contingency plans must be made in advance for any staffing emergency or planned job action, regardless of the length of the staffing deficit.

The purpose of this policy is to establish roles and responsibilities for creating and implementing emergency staffing plans, providing appropriate emergency staffing training to supervisory and management personnel, and identifying an update schedule and distribution list for the plan, as identified by the Sheriff or the authorized designee.

401.2 POLICY

It is the policy of this office to be prepared to operate a safe and secure facility in the event of a work staffing emergency. Staffing emergencies that could negatively affect the good order of the facility may include but are not limited to an outbreak of infectious disease, a work stoppage or strike by the staff, a natural disaster, or other disruption. The Sheriff, the Captain, or the authorized designee shall be responsible for ensuring that an appropriate emergency staffing plan exists.

401.2.1 EMERGENCY STAFFING

In the event the Captain becomes aware that a staffing emergency exists or may occur, staff members who are present may be ordered to remain at their posts. The Captain will notify the Sheriff. Plans should include measures to achieve minimum staffing for the facility within four hours of a staffing emergency and may include the following operational adjustments:

- The facility may go to a lockdown. Minimum activities, including visiting, exercise, and other programs will be suspended only if necessary. Meals, cleaning, medical services, court transportation, and attorney visits will continue. Other activities will be assessed by the Captain on a case-by-case basis.
- Supervisory and management personnel may have time-off cancelled or rescheduled for the duration of the staffing emergency.
- Staff from other areas of the office who have custody experience may be used to fill vacancies in the facility.
- Assistance from allied agencies may be requested to help management and supervisors in safely staffing the facility.
- Contracting with surrounding facilities may be necessary if adequate staffing cannot be obtained to safely operate the facility.
- In the event of a health-related staffing emergency, the office Exposure Control Officer and medical staff shall be notified in accordance with the Communicable Diseases Policy.

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401.2.2 LEGAL ASSISTANCE

In cases where the Captain becomes aware that a work stoppage is planned or has occurred, legal counsel should be consulted for assistance in preparing the necessary legal action to either prevent the work stoppage or to cause it to cease. Immediate contact with the employees' representatives may also be necessary to prevent or conclude the job action.

401.2.3 TRAINING

The Captain or the authorized designee should be responsible for:

(a) Establishing a distribution list for the contingency plan.

(b) Establishing a periodic review and update of the plan.

(c) Ensuring that all supervisors and managers are periodically trained on the plan.

(d) Ensuring that all supervisors and managers are provided a copy of the plan and/or a means to access it in the event of an emergency.

(e) Documenting all training.

(f) Maintaining training records for each supervisor and manager and ensuring that those personnel periodically receive appropriate update training on the plan.

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Fire Safety

402.1 PURPOSE AND SCOPE

The threat of fire and toxic smoke in the facility represents a significant risk to the safety and security of the community, the staff, incarcerated persons, volunteers, contractors, and visitors. The purpose of this policy is to clearly identify and conform to applicable federal, state, and/or local fire safety codes, and to establish a process of creating, disseminating, and training all individuals in the facility on the emergency plans for fire safety and evacuation.

402.2 POLICY

It is the policy of this office that fire prevention strategies are a high priority.

The Jail Commander shall ensure that a fire alarm and automatic detection system are installed, maintained and periodically tested. Any variance, exception or equivalency issues must be approved by the fire jurisdiction authorities, and must not constitute a serious life-safety threat to the occupants of the facility (15 CCR 1029(a)(7)(A); 15 CCR 1032 et seq.).

402.2.1 FIRE CODES

The Office shall conform to all federal, state, and local fire safety codes.

402.2.2 FIRE PREVENTION RESPONSIBILITY

All staff, volunteers, and contractors who work in the facility are responsible for the prevention of fires. They should be trained and given the tools to carry out the tasks necessary to reduce the risk of fire.

402.3 FIRE SUPPRESSION PRE-PLANNING

Pursuant to Penal Code § 6031.1, the Captain shall, in cooperation with the local fire department or other qualified entity, develop a plan for responding to a fire. The plan shall include but is not limited to (15 CCR 1032):

(a) A fire suppression pre-plan by the local fire department, to be included as part of this policy.

(b) Fire prevention, safety inspection plans, and record retention schedules developed by designated staff or as required by applicable law.

(c) Fire prevention inspections as required by Health and Safety Code § 13146.1(a) and (b), which requires inspections at least once every two years.

(d) Documentation of all fire prevention inspections, all orders to correct, and all proofs of correction should be maintained for a minimum of two years or as otherwise required by law.

(e) An evacuation plan (see the Evacuation Policy).

(f) A plan for the emergency housing of incarcerated persons in case of fire.

(g) A plan for the cross-training of responders and facility staff via drills, which should occur at least quarterly, if practicable.

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402.4 FIRE PREVENTION EQUIPMENT

All required fire alarms, sprinklers, and detection devices shall be in good working order at all times.

Should such a device become inoperative, the Captain or the authorized designee shall be responsible for ensuring that emergency repairs are undertaken as soon as possible and that staff is provided with an alternative emergency fire safety and evacuation plan.

Any time any fire prevention system is inoperative and poses a serious life-safety risk, that portion of the facility shall not be inhabited by incarcerated persons or staff.

402.5 FIREFIGHTING EQUIPMENT

The Jail Commander shall ensure that the facility is equipped with the necessary firefighting equipment (e.g., fire hoses, extinguishers) in an amount and in a location as recommended by the local fire authority or other qualified entity. The locations of firefighting equipment will be shown on the facility fire plan (schematic).

While the staff is not trained as fully qualified firefighters, the Jail Commander or the authorized designee will ensure that the staff is trained to initially respond to a fire with the purpose of facilitating the safety of the occupants, including evacuation, if necessary.

402.5.1

402.6 FIRE TRAINING

The Each Shift Supervisor is responsible for ensuring that staff should also be trained in the use of the facility's firefighting equipment sufficient to demonstrate proficiency. The staff should receive refresher training at least annually on the use of firefighting equipment.

Each shift will have at least one designated staff member who is trained to maintain the facility's firefighting equipment.

402.7 INSPECTIONS

The Office shall be inspected by an appointed staff member who is qualified to perform fire and safety inspections on a monthly basis to ensure that fire safety standards are maintained (15 CCR 1032). These inspections will be focused on, but not limited to, fire prevention, staff training and proficiency, firefighting equipment availability and functionality, alarms, fire detectors, fire safety equipment, and staff familiarity with prevention and suppression techniques, suppression pre-planning, SCBA use, emergency response, fire safety equipment use, and the evacuation plan.

The Captain or the authorized designee shall ensure that staff conduct weekly fire and safety inspections of the facility and that all fire safety equipment is tested at least quarterly (15 CCR 1029(a)(7)(E)).

A staff member shall be assigned to coordinate with local or state fire officials for the inspections as required once every two years, pursuant to Health and Safety Code § 13146.1(a); and Health and Safety Code § 13146.1(b). The result of all fire inspections and fire equipment testing shall

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be provided to the Captain and the Sheriff, and the records maintained for at least two years (15 CCR 1032(b)).

402.7.1 FURNISHINGS
All furnishings allowed in the facility shall meet fire authority standards for fire performance characteristics. Prior to the introduction of any furnishing into the facility, the staff shall receive clearance from the local fire authority as to its appropriateness.

402.7.2 FLAMMABLE, TOXIC, AND CAUSTIC MATERIALS
The Captain, in collaboration with the local environmental health expert, will review the type of materials introduced into the facility to ensure that flammable, toxic, and caustic materials are controlled and used safely. All such materials will be safely stored and only used by incarcerated persons under the direction of the staff.

402.8 EMERGENCY HOUSING OF INCARCERATED PERSONS
The Captain or the authorized designee shall develop a plan for the emergency housing of incarcerated persons in the event of a fire (15 CCR 1032(e)). The plan should include procedures for continuing to house incarcerated persons in the facility, identification of alternate facilities and the potential capacity of those facilities, incarcerated person transportation options, and contact information for allied agencies. This plan shall be reviewed annually and revised if necessary.

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Emergency Power and Communications

403.1 PURPOSE AND SCOPE

The Tehama County Sheriff's Office facility must continue to operate as a safe and secure environment regardless of emergencies, including electrical outages. The purpose of this policy is to establish guidelines regarding back-up power and communication systems, and the inspection, preventive maintenance, and testing of the systems to ensure a seamless transition in the event of a loss of power.

403.2 POLICY

It is the policy of this office to ensure that power to critical systems and communications continues to operate within the facility in the event of a loss of power.

403.2.1 PREVENTIVE MAINTENANCE

It is the responsibility of the Sheriff and the Captain to ensure that there is sufficient emergency power to operate all essential lighting, security equipment, safety equipment, and communications systems. The emergency power system should have sufficient fuel to allow the facility to operate continuously for a three-day period, if necessary, without external resources.

The emergency power system should be inspected, tested, and maintained as necessary. In the event that the system fails, the Captain or the Shift Supervisor should contact the designated maintenance authority or repair company to obtain necessary repairs as soon as practicable. If the emergency power system cannot be repaired within eight hours, portable emergency generators should be secured as a temporary emergency power source until the repair or replacement of the primary system occurs.

403.2.2 SAFETY AND SECURITY

All safety and security equipment will be repaired or replaced in an expedited manner by qualified personnel. In the event that safety and/or security equipment become inoperable or damaged and it is not safe to operate a secure portion of the facility, that portion of the facility should be vacated and the incarcerated persons housed elsewhere. Or, staffing should be increased sufficiently for the area to remain safe and secure until the repair can be completed.

403.2.3 INSPECTION AND TESTING

The Captain or the authorized designee is responsible for scheduled testing of emergency power systems (15 CCR 1029). The power system manufacturer should be contacted for the required testing intervals and load information. The emergency power system should be load-tested in accordance with the manufacturer’s recommendations or at least quarterly.

All emergency equipment and systems should be inspected and tested by a qualified individual at least quarterly.

Power generators should be inspected and tested by a qualified individual at least weekly.

All testing and inspections shall be documented and the results included in a report to the Captain.

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Evacuation

404.1 PURPOSE AND SCOPE

The purpose of this policy is to promote planning and to establish procedures, responsibilities, and training requirements for the staff of the Tehama County Sheriff's Office jail in case of fire and other emergency evacuations.

404.2 POLICY

The community, staff, volunteers, contractors, and incarcerated persons should have a well-researched and validated evacuation plan that can be implemented in the event any portion of this facility requires evacuating due to an emergency (e.g., fire, smoke, flood, storm) (15 CCR 1032(d)). All custody staff should be knowledgeable about the evacuation plan, policy, and procedures.

404.3 EVACUATION PLAN

The Tehama County Sheriff's Office maintains an evacuation plan to be implemented in the event of a fire, natural disaster, or other emergency (15 CCR 1032(d)). At a minimum the evacuation plan shall address the following:

- Location of facility building and floor plans
- Procedures on how incarcerated persons are to be released from locked areas
- Relocation areas to be used for housing incarcerated persons in the event of a full or partial evacuation
- Notifications
- Training and drill requirements for staff
- Reporting requirements

The Captain shall ensure that the evacuation plan is maintained and updated as needed and is reviewed for accuracy at least annually by a qualified independent inspector and in coordination with the local fire authority.

A current copy of the evacuation plan shall be maintained in the Administration office and in the command area of each annex facility.

404.3.1 EXITS

All facility exits should be marked with signs that clearly indicate the direction of traffic.

Except for temporary reasons, such as maintenance or repairs, all exits to the facility shall remain free from obstacles at all times regardless of the frequency of use. It is the duty of all staff to remove any obstructions that block, either partially or completely, staff’s ability to observe or use any exit.

All housing areas and places of assembly that are designed for occupancy of 50 individuals or more shall have two available exits.

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404.3.2 EVACUATION PLANS AND ROUTES
Plans for evacuation routes will be posted in all public areas of the facility. All custody staff will be familiar with evacuation routes for incarcerated persons.

404.3.3 EMERGENCY HOUSING OF INCARCERATED PERSONS
The Captain or the authorized designee shall develop a plan on the emergency housing of incarcerated persons in the event of a full or partial evacuation of the facility. The plan will address when incarcerated persons should be housed in place, identification of alternate facilities, and the potential capacity of those facilities, incarcerated person transportation options, and contact information for allied agencies. This plan shall be reviewed at least annually and revised if necessary.

404.4 TRAINING DRILLS
The Captain should ensure that drills of the evacuation plan are conducted at least annually, or more often if required by code, for each shift and at all facility locations. Drills will include staff and volunteers. The local fire agency may be invited to participate in one or more drills annually. Nonviolent and compliant incarcerated persons may participate. Violent and/or dangerous incarcerated persons or those known to be a flight risk will not be involved in the drills.

Drills should be designed to ensure that all staff members are proficient in their duties during each type of evacuation. Each drill should be documented as to its scope and participants. Upon completion of the drill, each staff member will be required to complete a written test to document knowledge and to show proficiency.

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Chapter 5 - Inmate Management

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Population Management

500.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system of incarcerated person population accounting that promotes the safety and security of the facility on a daily operational basis. It assembles data that enables the Office to forecast staffing and facility growth needs into the future, and to plan for the associated expenditures.

500.2 REPORTS

The Captain or the authorized designee is responsible for ensuring that detailed daily reports of the facility's incarcerated person population are completed and maintained by the staff. The reports shall reflect the average daily population of sentenced and non-sentenced incarcerated persons by categories of gender and juvenile status. The Captain should collect and submit the data to the Sheriff in a monthly report within 10 working days of the end of each month. The Sheriff or the authorized designee should maintain the data in an accessible format for historical purposes and trend analysis and to respond to funding opportunities (see the Crowding Policy) (15 CCR 1040).

500.3 POLICY

It is the policy of this facility that an incarcerated person population management system should be established and maintained to account for the admission, processing, transfer, and release of incarcerated persons.

500.4 DATA COLLECTION

For each reporting period, the report should include but is not limited to:

(a) Current number of beds in:
    1. Compliance with local or state standards
    2. General housing
    3. Medical/mental health

(b) Average daily population (ADP) for:
    1. Minimum security
    2. Maximum security
    3. High security
    4. Administrative separation

(c) Highest one-day incarcerated person population

(d) Number and percentage of:
    1. Bookings
    2. Incarcerated persons by gender
    3. Non-sentenced incarcerated persons

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4. Felony incarcerated persons
5. Pretrial incarcerated persons released
6. Sentenced incarcerated persons released early due to lack of space
7. Incarcerated persons receiving psychotropic medication

(e) Number of incarcerated persons:

1. Enrolled in work release program
2. Enrolled in work furlough program
3. Assigned to home electronic monitoring program

(f) Number of:

1. Incarcerated person-on-incarcerated person assaults
2. Incarcerated person-on-staff assaults
3. Escapes/attempted escapes
4. Active misdemeanor warrants
5. Active felony warrants
6. Incarcerated person grievances and dispositions
7. Incarcerated person disciplinary reports and dispositions

(g) Any other demographic information (e.g., gang activity)

The Captain or the authorized designee is responsible for ensuring that all required information is supplied to the Board of State and Community Corrections as required (15 CCR 1040).

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Counts

501.1 PURPOSE AND SCOPE

Incarcerated person counts are vital to the security of the facility, the safety of the staff, and the welfare of the incarcerated persons. This policy establishes guidelines for the frequency of incarcerated person counts, which ensures that all incarcerated persons and their status can be accounted for at any time.

501.2 POLICY

It is the policy of this office to account for all incarcerated persons within and under the control of this facility through scheduled and other counts as needed (15 CCR 1029(a)(6)).

501.3 PROCEDURE

The Captain or the authorized designee shall be responsible for creating and maintaining a written procedure establishing the process and frequency of counts. Incarcerated person counts shall be conducted at least once every eight hours. Emergency counts may be conducted at the direction of the Shift Supervisor as needed. Electronic counts shall not be substituted for direct staff observation.

All counts shall be documented on the daily activity log and verified by the Shift Supervisor. Counts shall include all persons in custody, including those on work assignments, furlough and education release, and those who are off-site, such as at the hospital or court.

Any discrepancy in the count should immediately be reported to the Captain and resolved prior to the release of the shift personnel responsible for the count. A formal count in which all incarcerated persons are personally identified by a correctional officer should be conducted once a day at a time established by the Captain. The result of the formal count will be used to calculate the average daily population statistics for the facility.

In the event that an escape is discovered during the incarcerated person count, the Shift Supervisor will initiate action to investigate the escape by promptly notifying law enforcement agencies and the Captain, initiating a search, and complying with other procedures as needed in accordance with the Facility Emergencies Policy.

A complete report of the incident will be prepared and provided to the Captain and Sheriff as soon as practicable.

All count sheets shall be signed by the Shift Supervisor and forwarded to the Records Division. Count sheets shall be maintained for a period of time prescribed by statute, ordinance, or policy.

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Reception

502.1 PURPOSE AND SCOPE

This policy establishes guidelines for admission, including implementing security measures, processing initial classification, processing immigration detainers, identifying medical and mental health issues, seizing and storing personal property, and providing intake telephone calls.

502.2 POLICY

This office shall use the following standardized guidelines when receiving individuals to be booked into this jail to maintain security and to respect individuals' civil rights.

502.3 PRE-BOOKING SCREENING

All individuals shall be screened prior to booking to ensure each individual is physically acceptable for admission and that all arrest or commitment paperwork is present (see the Medical Screening Policy). Required paperwork includes, as applicable:

(a) Arrest reports

(b) Probable cause declarations

(c) Warrants or court orders

(d) Victim notification information

(e) Documentation of needs related to religious practices, such as diet, clothing, and appearance (see the Religious Programs Policy)

(f) Accommodation requests related to disabilities (see the Incarcerated Persons with Disabilities Policy)

(g) Information regarding suicidal statements or actions, or assessments of suicide risk

(h) Medical and mental health records

Any discrepancies in required paperwork should be resolved or missing documentation located before accepting the individual for booking from the arresting or transporting correctional officer.

Prior to accepting custody of an individual who claims to have been arrested due to a mistake of identity or an individual who claims that identity theft led to the issuance of a warrant in the individual's name, members shall make reasonable efforts to investigate the claim of identity fraud or mistake. Members shall notify a supervisor when an individual makes a claim of mistaken identity or identity fraud.

Individuals who can post bail or qualify for a release on their Own Recognizance (O.R.), citation, or Penal Code § 849(b) will be processed and released (15 CCR 1029(a)(5)).

502.3.1 IMMIGRATION DETAINERS

No individual should be held based solely on a federal immigration detainer under 8 CFR 287.7 (Government Code § 7284.6).

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Notification to a federal authority may be made prior to release of an individual who is the subject of a notification request only if the individual meets at least one of the following (Government Code § 7282.5; Government Code § 7284.6):

(a) Has been arrested and had a judicial probable cause determination for a serious or violent felony identified in Penal Code § 667.5(c) or Penal Code § 1192.7(c)

(b) Has been arrested and had a judicial probable cause determination for a felony punishable by time in a state penitentiary

(c) Has been convicted of an offense as identified in Government Code § 7282.5(a)

(d) Is a current registrant on the California Sex and Arson Registry

(e) Is identified by the U.S. Department of Homeland Security's (DHS) Immigration and Customs Enforcement (ICE) as the subject of an outstanding federal felony arrest warrant

502.3.2 NOTICE TO INDIVIDUALS
Individuals in custody shall be given a copy of documentation received from ICE regarding a hold, notification, or transfer request along with information as to whether the Office intends to comply with the request (Government Code § 7283.1).

If the Office provides ICE with notification that an individual is being, or will be, released on a certain date, the same notification shall be provided in writing to the individual and to their attorney or to one additional person whom the individual may designate (Government Code § 7283.1).

502.3.3 ICE INTERVIEWS
Before any interview between ICE personnel and an individual in custody for civil immigration violations, the office shall provide the individual with a written consent form that explains the purpose of the interview, that the interview is voluntary, and that they may decline to be interviewed or may choose to be interviewed only with the individual's attorney present. The consent form must be available in the languages specified in Government Code § 7283.1.

502.3.4 IMMIGRATION INQUIRIES PROHIBITED
Correctional officers shall not inquire into an individual’s immigration status for immigration enforcement purposes (Government Code § 7284.6).

502.4 SEARCHES BEFORE ADMISSION

The Captain shall be responsible for designating which items will be considered contraband, approved personal property, and excess personal property, and for creating procedures regarding the disposition of each category of property.

All individuals and their property shall be searched for contraband before being accepted for booking. All contraband items will be handled according to jail procedures. Items of possible evidentiary value may be turned over to the arresting or transporting correctional officer for processing or be processed according to the jail's rules for handling evidence (see the Disposition of Evidence Policy). Approved personal property should be accepted. Items not approved should

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be returned to the arresting or transporting correctional officer prior to the individual being accepted for booking, or disposed of according to jail procedures. A description of the items returned to the arresting or transporting correctional officer shall be documented in the individual's booking record.

Searches shall be conducted in accordance with the Searches Policy.

502.4.1 SEARCHES REGARDING RELIGIOUS CLOTHING AND HEADWEAR
Unless exigent circumstances exist, when an individual is wearing religious clothing or headwear, a correctional officer shall offer to conduct searches of the individual using a correctional officer of the same gender and offer the search to be out of view of members of a different gender (Penal Code § 2607).

Following the search, any religious clothing or headwear purchased, accessed (as defined by Penal Code § 2607), or retained shall be returned unless there is a reason to confiscate the item due to a security risk. If the item is not returned, the reason shall be documented (Penal Code § 2607).

502.5 ADMISSION PROCESS

A unique booking number shall be assigned to each individual specific to the current admission. Photographs and fingerprints shall be taken.

Members facilitating the admission process should attempt to gather a comprehensive record of each individual, including the following:

- Identifying information, including name and any known aliases or monikers
- Current or last known address and telephone number
- Date and time of arrest
- Date and time of admission
- Name, rank, agency, and signature of the arresting correctional officer and transporting correctional officer, if different
- Health insurance information
- Legal authority for confinement
- Gender
- Gender identity
- Age
- Date and place of birth
- Race
- Height and weight
- Occupation and current or most recent employer

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- Emergency contact, including name, address, telephone number, and relationship to the individual
- Driver's license number and state where issued, state identification number, or passport number
- Social Security number
- Information regarding religious practices and disabilities
- Local, state, and federal criminal history records
- Notation of any unique marks or physical characteristics, such as scars, birthmarks, or tattoos
- Medical clearance, if applicable
- Suicide risk
- Inventory of all personal property, including clothing, jewelry, and money
- A record of personal telephone calls made at the time of booking or the opportunity to place calls if the calls were not made
- Records related to past periods of detention at the jail

The individual shall be asked if they served in the U.S. military. The response shall be documented and made available to the individual, the individual's counsel, and the District Attorney (Penal Code § 4001.2).

502.5.1 LEGAL BASIS FOR DETENTION
Individuals admitted to the jail shall be notified of the charge or other legal basis of confinement in a language they understand.

502.5.2 ADMISSION OF SEX OFFENDER REGISTRANTS
The Records Division shall inform the California Department of Justice when incarcerated persons required to register address changes under Penal Code § 290.013 have been admitted into the jail within 15 days of the admission (Penal Code § 290.013).

502.6 TRANSITION FROM RECEPTION TO HOUSING UNITS

The Shift Supervisor or the authorized designee is responsible for ensuring only individuals who qualify are placed into appropriate housing. Those who will not be housed include individuals who are:

(a) Eligible for release following citation.

(b) Intoxicated or under the influence of any intoxicating substance.

(c) Arranging bail. Such individuals should be permitted a reasonable amount of time, at the discretion of the Shift Supervisor or designee, to make telephone calls before being housed.

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502.6.1 MONITORING FOR SIGNS OF INTOXICATION AND WITHDRAWAL

Members should respond promptly to an individual's complaint of symptoms and remain alert to signs of drug and alcohol overdose and withdrawal, which include but are not limited to sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing, and generalized aches and pains. Any member who suspects that an individual may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the Shift Supervisor and the appropriate medical staff.

502.6.2 SEPARATION

Individuals should be kept separate from admitted individuals during the admission process. When justified, individuals may be moved to administrative separation during the booking process (see the Special Management Incarcerated Persons Policy).

Newly admitted individuals should be separated according to the jail's classification plan (see the Classification Policy).

502.7 PROPERTY CONTROL

All approved personal property received from individuals at the time of booking shall be inventoried. A receipt referencing the individual's booking number should be signed by the individual and the booking member. The original copy of the property receipt should be retained and placed in the individual's file and/or with the property. A second copy should be presented to the individual at the time of booking. Excess personal property shall be handled according to jail procedures.

502.7.1 VERIFICATION OF MONEY

All monies belonging to the individual shall be verified in front of the individual. The individual should initial the dollar amount on the booking sheet. All money should be placed in a separate envelope and sealed.

Negotiable checks or other instruments and foreign currency shall also be sealed in an envelope with the amount indicated but not added to the cash total. Jewelry and other small property shall also be sealed in an envelope. All envelopes shall clearly indicate the contents on the front. The member sealing an envelope shall initial across the sealed flap. Should any money be withdrawn or added to the cash envelope, the member making the change shall enter the new amount below the original entry on the booking sheet, initial it, and write the new total on the outside of the envelope.

502.7.2 PROPERTY STORAGE

All approved property should be stored in a secure storage area. Only authorized personnel may access the storage area and only for the purpose of depositing or retrieving property, or to conduct authorized work, including maintenance and other duties as directed by the Captain.

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502.8 TELEPHONE CALLS

Every individual detained in this facility shall be entitled to at least three completed telephone calls immediately upon being admitted and no later than three hours after arrest. Either the arresting or booking correctional officer must ask the individual if they are a custodial parent with responsibility for a minor child as soon as practicable, but no later than three hours after the arrest, except when physically impossible. If the person is a custodial parent with responsibility for a minor child, the person shall be entitled to make two additional telephone calls to arrange care for the minor child (Penal Code § 851.5).

(a) Telephone calls may be limited to local calls, except that long-distance calls may be made by the individual at their own expense, using calling cards, or by calling collect.

    1. The Office should pay the cost of any long-distance calls related to arranging for the care of a child or dependent adult.

(b) The individual should be given sufficient time to make any necessary arrangements, including child or dependent adult care, or transportation upon release.

    1. These telephone calls are not intended to be lengthy conversations. The member assigned to monitor or process the individual may use their judgment in determining the appropriate duration of the calls.

(c) Calls to an attorney shall be deemed confidential and shall not be monitored, eavesdropped upon, or recorded.

(d) A sign containing the information as required in Penal Code § 851.5 in bold block type shall be posted in a conspicuous place where the individuals make their booking telephone calls and within the custody jail.

    1. The public defender's telephone number shall be posted with the sign.

    2. The signs shall be in English, Spanish, and any other language spoken by a substantial number of the public, as specified in Government Code § 7296.2, who are served by this office (Penal Code § 851.5).

There is no obligation for members to make a telephone call on an individual's behalf; however, members shall facilitate reasonable accommodations to individuals with disabilities to make phone calls (see the Incarcerated Persons with Disabilities Policy). A member is not required to wake a sleeping individual so that the individual may complete a call. The individual should be provided the opportunity to make telephone calls once awake.

502.9 SHOWERING AND CLOTHING EXCHANGE

Individuals may be required to shower before being dressed in clean jail clothing. Showering should occur before transfer from the temporary holding area to a housing unit (see the Incarcerated Person Hygiene Policy).

502.10 JUVENILE DETAINEES

Juveniles are not eligible for admission to this jail. A juvenile may be held only for the length of time needed for release to a parent or guardian or transfer to an appropriate facility and, in any

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case, for a maximum of six hours (Welfare and Institutions Code § 207.1). Detention is subject to the following conditions:

(a) The juvenile shall be held in an unlocked area that is not used for housing and is outside the secure perimeter of the jail, such as an interview room, lobby, or office.

(b) The juvenile shall not be physically secured to a cuffing rail or other stationary object.

(c) The juvenile shall be under continuous visual supervision by a law enforcement officer, a facility employee, or a designated youth attendant. Continuous visual monitoring may be by an audio/video system. The juvenile shall have constant auditory access to the staff.

(d) Separation by sight and sound shall be maintained between all juveniles and adults in custody (34 USC § 11133). There should also be sight and sound separation between non-offender juveniles, such as those who may be in protective custody, and juveniles and status offenders.

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Handbook and Orientation

503.1 PURPOSE AND SCOPE

This policy provides for the orientation of incarcerated persons booked into the Tehama County Sheriff's Office facility. The purpose of the orientation is to inform incarcerated persons of the jail routine, rules, incarcerated persons' rights, and services.

503.2 POLICY

The Captain shall provide an effective method of orienting all incoming incarcerated persons that includes an incarcerated person handbook. The orientation should take place within 24 hours of an incarcerated person's admission and in any event prior to the incarcerated person being moved to general population housing and should be an ongoing process in the housing area so that the information is available to the incarcerated persons throughout their entire time in custody.

503.2.1 INITIAL ORIENTATION

To assist with the inmate’s transition into a custody environment, the orientation will include the following topics, supplemented by a more detailed inmate handbook that will be provided to each inmate (15 CCR 1069):

(a) Facility rules and disciplinary sanctions

(b) Correspondence, visiting and telephone rules

(c) Inmate grievance procedure

(d) Co-pays, fees and charges

(e) Medical, dental and mental health services

(f) Possibilities for pretrial release

(g) Programs and activities, including application procedures

(h) Classification/housing assignments and appeal procedures

(i) Court appearance, where scheduled, if known

(j) Availability of personal care items and opportunities for personal hygiene

(k) Emergency procedures (e.g., fires, evacuations)

(l) Sexual abuse and sexual harassment information including the following (28 CFR 115.33):

1. Facility’s zero-tolerance policy
2. Prevention and intervention
3. Instruction on how inmates can avoid being victims of sexual abuse and sexual harassment through self-protection techniques
4. Treatment and counseling for victims of sexual abuse or sexual harassment

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5. Reporting sexual abuse or sexual harassment incidents, including how to report such incidents anonymously
6. Mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies (28 CFR 115.53)
7. Information regarding confidentiality, monitoring and mandatory reporting

(m) Contacting foreign consuls

(n) Requests for religious accommodations

(o) Emergency procedures (e.g., fires, evacuations)

(p) Voting, including registering to vote

(q) Direction for pregnant inmates, including the information required in Penal Code § 3407(e)

(r) The right to be taken before a magistrate in this county if held on an out-of-county warrant (Penal Code § 821; Penal Code § 822)

In addition to English, orientation information will be provided in the most commonly used languages for the inmate population.

The Jail Commander should consider enlisting the assistance of volunteers who are qualified and proficient in both English and the language in which they are providing translation assistance to translate the orientation information. Use of outside translation sources may also be considered.

Interpretive services will be provided to inmates who do not speak English or any of the other languages in which the orientation information is available.

Inmates are required to acknowledge reading the orientation handbook and this acknowledgement shall be recorded within the inmate KIOSK. (28 CFR 115.33).

503.2.2 ORIENTATION FOR NON-READERS, VISUALLY IMPAIRED AND DEAF OR HARD-OF-HEARING INMATES

Inmates who cannot read, are visually impaired, or have intellectual, psychiatric or speech disabilities or limited reading skills, shall have the materials read to them by a staff member or presented to them using audible recorded media (28 CFR 115.16).

Inmates who are deaf or hard of hearing shall be provided with interpretation services. Reasonable efforts should be made by the staff to assist the inmate in understanding the information.

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Safety Checks

504.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a requirement for conducting visual safety checks for all incarcerated persons, and for creating and maintaining a log to document all safety checks.

504.2 POLICY

It is the policy of the Tehama County Sheriff's Office that all correctional staff shall conduct safety checks on all incarcerated persons, at a frequency determined by custody status, housing classification, and applicable state law.

504.3 SAFETY CHECKS

The staff shall adhere to the following procedures when conducting safety checks (15 CCR 1027; 15 CCR 1027.5):

(a) Safety checks shall be conducted at least once every 60 minutes and more frequently if necessary.

(b) Safety checks shall be conducted on an irregular schedule (staggered) so that incarcerated persons cannot predict when the checks will occur.

(c) Safety checks shall be done by personal observation of the correctional officer and shall be sufficient to determine whether the incarcerated person is experiencing any stress or trauma.

(d) Cameras and monitors may supplement the required visual observation safety checks, but they shall not replace the need for direct visual observation.

(e) Safety checks will be clearly documented on permanent logs in accordance with the office Daily Activity Logs and Shift Reports Policy.

(f) Actual times of the checks and notations should be recorded on the daily activity logs.

(g) Log entries shall never be made in advance of the actual check. Log entries made in this manner do not represent factual information and are prohibited.

(h) Special management incarcerated persons shall be checked more frequently as detailed in the Special Management Incarcerated Persons Policy.

504.3.1 SAFETY CHECK DOCUMENTATION

All safety checks shall be documented. Documentation shall include (15 CCR 1027.5):

(a) The actual time when each safety check occurred.

(b) The location where each safety check occurred, such as a cell, module, or dormitory number.

(c) Initials or member identification number of staff who completed the safety check.

Safety check documentation shall be reviewed at regular, defined intervals by the Captain or supervisor. The review shall include any noted inconsistent documentation or any untimely completion of safety checks (15 CCR 1027.5).

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Special Management Incarcerated Persons

505.1 PURPOSE AND SCOPE

Incarcerated persons who pose a heightened risk to themselves or others require special management, including frequent interaction and increased supervision by staff. Interaction with special management incarcerated persons is essential to maintaining a safe, secure, and humane environment. This policy establishes guidelines and procedures for interacting with special management incarcerated persons in the custody of the Tehama County Sheriff's Office.

505.1.1 DEFINITIONS

Definitions related to this policy include:

Administrative separation - The physical separation of an incarcerated person who has (15 CCR 1053):

(a) A documented history of activity or behavior, or promoting such activity or behavior, that is criminal in nature, disruptive to facility operations, or affects the safety of the facility, other incarcerated persons, and facility staff.

(b) Influenced or participated in activity that is criminal in nature or disruptive to facility operations or affects the safety and security of the facility, other incarcerated persons, and facility staff.

(c) A history of escape or recently attempted escape.

(d) Committed assault, attempted assault, or participated in a conspiracy to assault or harm other incarcerated persons or facility staff.

(e) A demonstrated need for protection from other incarcerated persons and facility staff.

This is a non-punitive classification process and must not adversely affect an incarcerated person's health (15 CCR 1053).

Protective custody separation - A level of custody either requested or required for an incarcerated person's protection from others.

Special management incarcerated person - An incarcerated person who is either classified as administrative separation or protective custody separation. Classification as a special management incarcerated person is a non-punitive classification.

505.2 POLICY

This office shall provide for the secure and restrictive housing of any special management incarcerated person but shall not impose more deprivation of privileges than is necessary to obtain the objective of protecting the incarcerated person, staff, or the public (15 CCR 1053).

505.3 SPECIAL MANAGEMENT INCARCERATED PERSONS HOUSING CRITERIA

The safety and security of this facility is dependent on a classification system that identifies incarcerated persons who pose a risk to themselves or to others. Incarcerated persons who pose such a risk must be promptly and appropriately separated from the general incarcerated persons

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population until such time that they no longer pose a risk. Staff must have the ability to promptly separate these incarcerated persons pending further review.

Individuals who may be classified as special management incarcerated persons include but are not limited to incarcerated persons who are:

- In protective custody or court-imposed separation.
- Exhibiting mental health concerns.
- An escape threat.
- A serious violence threat.
- Known to have gang affiliation.
- A known management problem.
- A suicide risk.
- Exhibiting medical issues.
- Physically impaired.

505.4 CIRCUMSTANCES REQUIRING IMMEDIATE SEPARATION

Incarcerated persons will generally be assigned to separation through the classification process. The Captain or the Shift Supervisor has the authority to immediately place any incarcerated person into separation when it reasonably appears necessary to protect the incarcerated person or others (15 CCR 1081(d)).

Reasons that an incarcerated person may be placed into separation include the following:

(a) The incarcerated person requests protection or is under court-ordered protection, or the staff has determined that the incarcerated person requires protection.

(b) There is reason to believe the incarcerated person poses a danger to themself or others.

(c) The incarcerated person poses an escape risk.

(d) The incarcerated person requires immediate mental health evaluation and medical housing is not reasonably available.

(e) The incarcerated person is charged with a disciplinary infraction and is awaiting a disciplinary hearing and in the judgment of the staff, the incarcerated person may become disruptive or dangerous if left in general population.

(f) The incarcerated person is in the process of being transferred to a higher security classification.

(g) Other circumstances where, in the judgment of the staff, the incarcerated person may pose a threat to themself, others, or the security of the facility.

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505.4.1 REVIEW PROCESS

The Captain shall be notified when any incarcerated person is placed into immediate separation and shall be informed of the circumstances leading to the order to separate. Within 72 hours of the incarcerated person being placed into restrictive housing, the Captain or the authorized designee must review the circumstances surrounding the separation to determine which of the following actions shall be taken:

(a) The incarcerated person is designated for administrative separation.

(b) The incarcerated person is designated for protective custody.

(c) The incarcerated person remains separated pending a disciplinary hearing.

(d) The incarcerated person is returned to general incarcerated person population.

505.5 PROTECTIVE CUSTODY

The correctional officer responsible for assigning classifications to incoming incarcerated persons shall clearly document the reason an incarcerated person should be placed into protective custody. Incarcerated persons in need of protective custody may be placed in a separation unit when there is documentation that the protective custody is warranted and separation is the least restrictive alternative reasonably available.

Incarcerated persons who are in protective custody shall receive all services and programs that are available to incarcerated persons in general population and that are deemed a privilege. Any deviation from allowing usually authorized items or activities shall be documented on the incarcerated person's file.

505.6 MAINTENANCE OF PROGRAMS AND SERVICES

Administrative separation and protective custody shall consist of separate and secure housing but shall not involve any deprivation of privileges other than what is necessary to protect the incarcerated person or staff (15 CCR 1053).

Incarcerated persons who are classified for housing in administrative separation or protective custody shall, at a minimum, be allowed access to programs and services, including but not limited to:

- Incarcerated person telephones.
- Visitation.
- Educational programming appropriate to the incarcerated person's classification.
- Commissary services.
- Library and law library services.
- Social services.
- Faith-based guidance, counseling, and religious services.
- Out of cell time activities and exercise.

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- Social and professional visits.

Nothing in this policy prohibits changing the delivery of programs or services to separated incarcerated persons in order to provide for the safety and security of other incarcerated persons and staff.

505.7 REVIEW OF STATUS

The Shift Supervisor or the classification officer shall review the status of all incarcerated persons who are housed in restrictive housing units and designated for administrative separation or protective custody. This review shall occur every seven days for the first two months of separation and at least once every 30 days thereafter. The review should include information about these incarcerated persons to determine whether their status in administrative separation and protective custody is still warranted.

If other reasonable housing options exist that will provide for the safety of the incarcerated person and the facility, the incarcerated person should be moved out of separation. In reviewing an alternative housing decision for an incarcerated person in protective custody, the safety of the incarcerated person should receive the utmost consideration.

505.8 HEALTH EVALUATION REQUIREMENTS

After notification from staff that an incarcerated person is being placed in separation, the Shift Supervisor shall ensure that the following occurs:

(a) A qualified health care professional shall assess the incarcerated person's health needs and coordinate the appropriate housing assignment.

(b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Shift Supervisor and coordinate the appropriate plan for the incarcerated person based on the safety needs of the facility and the medical needs of the incarcerated person.

505.8.1 HEALTH CONSIDERATIONS

Due to the possibility of self-inflicted injury and depression during periods of separation, health evaluations should include notations of any bruises and other trauma markings and the qualified health care professional's comments regarding the incarcerated person's attitude and outlook.

(a) Unless medical attention is needed more frequently, each incarcerated person in separation should receive a daily visit by medical staff. A medical assessment should be documented in the incarcerated person's medical file.

(b) A qualified health care professional shall also conduct weekly mental health evaluations.

When an incarcerated person is classified as a special management incarcerated person due to the presence of a serious mental illness and is placed in a separation setting, the staff shall document this in the incarcerated person's file and notify the qualified health care professional. When an incarcerated person is expected to remain in separation for more than 30 days, the qualified health care professional shall be notified.

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Where reasonably practicable, a qualified health care professional should provide screening for suicide risk during the three days following admission to the restrictive housing unit.

505.9 SAFETY CHECKS

A staff member shall conduct a face-to-face safety check of all special management incarcerated persons, including those housed in administrative separation or protective custody, at least every 30 minutes on an irregular schedule. Incarcerated persons who are violent, have mental health problems, or demonstrate behavior that is easily identified as out of the ordinary or bizarre in nature should be personally observed by the staff every 15 minutes on an irregular schedule.

Incarcerated persons who are at risk of suicide shall be under continuous observation until seen by a qualified health care professional. Subsequent supervision routines should be in accordance with orders provided by the qualified health care professional.

Special management incarcerated persons shall receive increased monitoring to include, at a minimum:

(a) A daily visit by the Captain or the authorized designee.

(b) Visits by members of the program staff, upon request.

All management, program staff, and qualified health care professional visits shall be documented in the appropriate records and logs and retained in accordance with established records retention schedules.

505.10 LOG PROCEDURES

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed, they should be done by way of a supplemental entry. Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Incarcerated person's name
- Incarcerated person's booking number
- Classification status
- Housing assignment
- Date and time initially housed
- Date and time of entry and exit from the cell
- Reason for the special housing
- Anticipated time of removal
- Medical, psychological, or behavioral considerations
- Counseling for behavior

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- Removal date and time from special housing

Log entries should be legible, entered promptly, and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At a minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or the Captain at midnight each day.

505.10.1 LOG INSPECTION AND ARCHIVE OF LOGS

The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Captain for review.

The logs will be retained by the Office in accordance with established records retention schedules, but in no case for less than one year.

505.11 STAFF SELECTION CRITERIA

To qualify for an assignment solely responsible for the supervision of special management incarcerated persons, the employee must demonstrate that the employee has:

(a) Successfully completed the employee's probationary period.

(b) Attained a minimum of six months experience supervising incarcerated persons.

(c) A history of maturity and tolerance.

(d) Expressed an interest in working with special management incarcerated persons.

(e) The ability to manage difficult incarcerated persons through conflict management skills.

(f) Received satisfactory ratings in the three most recent performance evaluations.

505.11.1 STAFF ASSIGNMENT

Staff assignments to a special management incarcerated persons unit will be made by the Captain or the authorized designee and are subject to continuous review. The special management incarcerated persons unit manager may rotate staff whenever the manager determines that it is in the best interest of the employee or the facility.

Staff assigned to units with special management incarcerated persons should be closely supervised. Staff assigned to these units may rotate to other duties upon request.

Nothing in this section prohibits a probationary employee from working in a special management incarcerated persons unit under direct supervision of a training officer as a part of the training program.

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Civil Detainees

506.1 PURPOSE AND SCOPE

This policy provides safeguards to ensure that persons held under a civil detainee are afforded appropriate standards of custody.

Nothing in this policy prevents application of discipline under the Discipline Policy.

506.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person in custody held for a reason other than for criminal matters.

Enhanced security concern - A status applicable to a civil detainee that indicates the person poses an enhanced threat to staff or others due to the person's past criminal behavior, criminal sophistication, or other actions.

506.2 POLICY

It is the policy of the Tehama County Sheriff's Office that any confinement conditions placed on civil detainees are for legitimate, non-punitive purposes.

506.3 LESS RESTRICTIVE CONDITIONS

Civil detainees should not be restricted in their activities to any extent greater than that reasonably necessary to maintain order and security, and to ensure their appearance at any arraignments or trials. Generally, the accommodations of these detainees should be above the level of non-sentenced, general population incarcerated persons. The Captain or the authorized designee should institute alternative and less harsh confinement methods for these detainees, while still maintaining security and effective management of the facility.

506.4 SCREENING

Civil detainees should undergo the same screening process as incarcerated persons, including attention to whether the person poses an enhanced security concern.

The Captain or the authorized designee should review the screening documents to ensure any security concerns are appropriately addressed and are part of the detainee's record.

506.5 ORIENTATION

Civil detainees should receive orientation materials explaining the benefits and rules that are applicable to them.

Staff should specifically review the grievance process with the detainees and encourage them to use the grievance process when appropriate.

506.6 CONDITIONS OF CONFINEMENT IN HOUSING

All civil detainees should be housed separately from other incarcerated persons.

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506.6.1 CLOTHING

Civil detainees should be provided a minimum of 50 percent additional clothing exchanges than incarcerated persons in general population and be provided with an extra set of undergarments and socks that they may retain in their housing area.

Civil detainees should be provided an additional storage container for their personal belongings and extra issued clothing.

506.6.2 USE OF RESTRAINTS AND TRANSPORTATION

Civil detainees should not be placed in leg or waist restraints absent an identified security concern.

Civil detainees may be handcuffed in the event that there is a need to control the detainee based on identified security concerns.

Civil detainees should be transported separately from incarcerated persons.

506.6.3 OUT OF CELL TIME

Civil detainees should receive a minimum of 50 percent additional out of cell time (indoor and outdoor) than incarcerated persons in the general population. Out of cell time may be increased by the Captain as resources allow.

506.6.4 ACCESS TO MAIL AND TELEPHONE

Civil detainees shall have the same access to books, periodicals, and magazines as any other general population incarcerated person, except incoming books and magazines must only be censored with a substantial government interest, and only when it is necessary or essential to address the particular government interest. Incoming books, periodicals, or magazines may be justifiably confiscated from a detainee when there is a government interest to:

(a) Maintain facility security and safety, such as a book covering improvised weapons or promoting aggression.

(b) Prevent dangerous conduct.

(c) Comply with a court order or court-ordered treatment plan.

Outgoing and incoming mail may be inspected but not read, unless there is specific and articulable information to believe a particular security or safety issue.

Civil detainees should be provided with a minimum of 50 percent additional telephone access than incarcerated persons in the general population. Civil detainees should be provided with telephone privacy. A reasonable amount of telephone messages should be taken for a civil detainee.

506.6.5 ACCESS TO INTERNET

Civil detainees should receive a minimum of 50 percent more time to access the internet than incarcerated persons in the general population.

506.6.6 VISITING

Civil detainees should be allowed to receive a minimum of 50 percent additional visitation time than incarcerated persons in the general population.

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506.6.7 MENTAL HEALTH CARE

Civil detainees who are detained due to issues related to their mental health should be provided with:

(a) An interview with the civil detainee's established mental health care provider and/or a review of the civil detainee's records by an office mental health professional.

(b) A review of the reasonable options available to address the civil detainee's continued mental health care. The office's mental health professional and the Captain or the authorized designee should identify benefits or restrictions that may advance the purpose of the civil detainee's confinement. Examples include:

1. Restricting or providing special access to books, periodicals, or internet sites as part of the civil detainee's treatment.
2. Providing special access to mental health care professionals or other visitors.

(c) A conference with the detainee's mental health care provider prior to the decision to discipline the detainee.

506.7 SEARCHES

Strip searches of civil detainees must be justified by probable cause, unless the Captain specifies otherwise based upon an identified security concern. The specified concern shall be documented in the detainee's record. Modified strip searches may be conducted when a detainee has entered an environment where contraband or weapons may be accessed (see the Searches Policy).

Absent an identified security concern or reasonable suspicion that contraband may be found, there should be no unscheduled cell searches of a detainee's personal effects or a cell search when the detainee is not present. Non-invasive cell inspections for security purposes may still be conducted.

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Management of Weapons and Control Devices

507.1 PURPOSE AND SCOPE

This policy will address the availability and control of weapons.

507.2 POLICY

It is the policy of the Tehama County Sheriff's Office that the presence and the use of weapons in the jail will be tightly controlled and supervised to reduce the potential for injury. Staff will only carry and use those weapons for which they have been trained in and are qualified to use.

507.3 FIREARMS

With the exception described below, armed personnel shall secure all firearms in gun lockers located at the entry points prior to entering the secure perimeter. Firearms shall not be stored inside the secure perimeter at any time. If it is necessary to load or unload a firearm, personnel shall use the clearing barrels located outside of the facility's secure perimeter to facilitate the safe loading and unloading of firearms.

Firearms shall only be allowed in the secure perimeter of the facility when it is necessary to protect the safety and security of staff, incarcerated persons, contractors, volunteers, or the public.

Firearms shall only be allowed inside the secure perimeter with the approval of the Captain or authorized designee and under the direct supervision of a supervisor.

507.4 OTHER WEAPONS, TOOLS, AND CHEMICAL AGENTS

Office-approved weapons, tools, and chemical agents, including but not limited to pepper projectiles, batons, conducted energy devices (CEDs), impact weapons, weapon-fired projectiles, noise/flash distraction devices, sting grenades, and similar devices, may be possessed and used only by custody staff members who have received office-authorized training and are qualified to use them.

Office-approved weapons, tools and chemical agents shall only be allowed inside the secure perimeter with the approval of the Captain or the authorized designee.

507.5 STORAGE OF WEAPONS, CHEMICAL AGENTS, AND CONTROL DEVICES

The armory shall be located in a secure and readily accessible repository outside of incarcerated person housing and activity areas. It shall be secured at all times. Access to the armory shall be limited to the Captain and the Shift Supervisor or the authorized designee. Only personnel who have received office-approved training in the maintenance of the stored equipment and who have been designated by the Captain are authorized to be inside the armory.

The following equipment shall be stored and secured in the armory:

(a) All office-approved weapons.

(b) All office-approved control devices and associated supplies, with the exception of the CED.

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(c) All security equipment, such as helmets, face shields, stab or protective vests, and handheld shields.

(d) All office-approved chemical agents.

Explosive materials will be stored in a safe approved by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) and in compliance with 27 CFR 555.201 et seq.

507.5.1 WEAPONS LOCKER

There should be a secure weapons locker located outside of the secure perimeter of the jail.

507.5.2 INVENTORY

The Captain should designate one or more properly trained staff to be responsible for maintaining all weapons, chemical agents, and control devices in a safe and secure manner, and to inventory and report the condition and availability of the facility's weapons and control devices on a monthly basis.

To facilitate the inventory, all weapons, chemical agents, and control devices shall be stored in assigned locations inside the armory. A log sheet shall be maintained within the armory at all times, detailing the exact location of each item. The removal of any weapon, chemical agent, or control device shall be documented on the log sheet, showing who removed the item, the date and time of removal, and the reason for removal. An additional log entry shall be made indicating the date and time of the item's return.

The Shift Supervisor and the Captain shall be immediately notified in the event that any weapon, chemical agent, or control device is determined to be missing. An immediate and thorough search of the facility shall take place in order to locate the item.

507.5.3 REVIEW, INSPECTION, AND APPROVAL

Every control device and chemical agent will be periodically inspected for serviceability and expiration dates by the Rangemaster or the instructor designated to train on the use of a particular control device or chemical agent. The Rangemaster or the designated instructor is responsible for ensuring replacement of outdated or unserviceable items.

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Classification

508.1 PURPOSE AND SCOPE

This policy describes the Tehama County Sheriff's Office's classification process, which is designed to identify security and health issues so that incarcerated persons may be held and housed in such a way as to foster a safe and secure facility (15 CCR 1050).

508.1.1 DEFINITIONS

Definitions related to this policy include:

Civil detainee - Any person held in custody for a reason other than for criminal matters.

508.2 POLICY

It is the policy of this office to process all individuals entering this jail to determine whether they will be housed in the jail, cited and released, released on their own recognizance (O.R.) or bail, or released back to the community through an appropriate release mechanism, including alternatives to incarceration programs, such as electronic supervision.

Anyone housed in the jail shall be properly classified according to security and health risks so that appropriate supervision, temporary holding, and housing assignments may be made.

508.3 RELEASE AT OR FOLLOWING CLASSIFICATION

Individuals arrested for intoxication only, with no further proceedings anticipated, should be released as soon as custodial staff reasonably determine they are no longer impaired to the extent that they cannot care for their own safety.

Misdemeanor incarcerated persons who meet criterion established by local courts may be cited and released on O.R. by the Sheriff or the authorized designee. Incarcerated persons who meet the established criteria will be interviewed by classification personnel and a determination will be made whether there is good cause to release the incarcerated person on O.R. (15 CCR 1029(a)(5)).

508.4 CLASSIFICATION PLAN

The Captain or the authorized designee should create and maintain a classification plan to guide members in the processing of individuals brought into the jail.

The plan should include an initial screening process, as well as a process for determining appropriate housing assignments (28 CFR 115.42). The plan should include use of an objective screening instrument, procedures for making decisions about classification and housing assignments, intake and housing forms, and a process to ensure that all classification and housing records are maintained for each incarcerated person. The plan should include an evaluation of the following criteria (15 CCR 1050):

- Age
- Gender identity

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- Current charges
- Behavior during arrest and intake process
- Criminal and incarceration history
- Emotional and mental condition
- Potential risk of safety to others or self
- Special management status
- Special needs assessment for vulnerable incarcerated persons
- Behavioral or physical limitations or disabilities and physical/mental health needs
- Medical condition
- Level of sobriety at booking
- Suicidal ideation
- Escape history and degree of escape risk
- Prior assaultive or violent behavior
- The need to be separated from other classifications of incarcerated persons (e.g., gang affiliation, confidential informant, former law enforcement, sexual orientation)
- Prior convictions for sex offenses against an adult or child
- Whether the incarcerated person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender-nonconforming (see the Prison Rape Elimination Act Policy for transgender and intersex definitions)
- Previous sexual victimization
- The incarcerated person's own perceptions of vulnerability
- Whether the incarcerated person is a foreign national and, if so, from what country (see the Foreign Nationals and Diplomats Policy)
- Prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the Office (28 CFR 115.41)
- Any other criteria as deemed appropriate by the Sheriff or the authorized designee
- Any other requirements for a classification plan under 15 CCR 1050

The plan should include a methodology for evaluating the classification process and a periodic review for the purpose of continuous quality improvement.

Information obtained in response to screening questions shall be considered confidential and shall only be made available to those who have a legitimate need to know (28 CFR 115.41).

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508.4.1 INCARCERATED PERSON RESPONSE TO SCREENING
Incarcerated persons may not be compelled by threat of discipline to provide information or answers regarding (28 CFR 115.41):

(a) Whether the incarcerated person has a mental, physical, or developmental disability.

(b) Whether the incarcerated person is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.

(c) Whether the incarcerated person has previously experienced sexual victimization.

(d) The incarcerated person's own perception of vulnerability.

508.5 INITIAL CLASSIFICATION

The initial classification process is intended to identify predatory, violent, and at-risk incarcerated persons. It should occur early in the intake process to allow for appropriate supervision while an incarcerated person is being temporarily held in this facility and until a decision is made to place the individual into a more permanent housing assignment.

Incarcerated persons should be interviewed by an intake correctional officer as soon as possible in the booking process. The intake correctional officer shall complete the initial classification form. The initial classification form should include a place for the intake correctional officer to make a housing recommendation. This recommendation should be based on the initial classification form, an assessment of the incarcerated person's condition, and the incarcerated person's interview.

The initial classification form shall be placed in the incarcerated person's file and provided to the classification correctional officer, who will, within the limits of available resources, determine the appropriate temporary housing location.

508.6 CLASSIFICATION UPON HOUSING

Once it has been determined that the person arrested will not be released from custody on bail or O.R., a more in-depth classification of the incarcerated person will be conducted as soon as possible but no later than 24 hours after theperson's arrival at the facility, after which the person will be moved to more permanent housing.

508.6.1 INTERVIEW
The comprehensive classification process begins with a review of any initial classification information obtained during the reception and booking process, as well as an interview by the classification correctional officer. The review of initial classification documents and the questions, answers, and observations from the incarcerated person's interview will be documented and numerically scored, representing the security level and housing assignment appropriate for each incarcerated person.

Individualized determinations shall be made about how to ensure the health and safety of each incarcerated person (28 CFR 115.42; 15 CCR 1050).

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508.6.2 OVERRIDE

The classification correctional officer has the authority to override the scores when it appears necessary to more appropriately assign housing. The override capability exists to use the classification correctional officer's training and expertise in those instances when the numerical scores are not reflective of the incarcerated person's potential security or health risk. All overrides will be reviewed by a supervisor and are intended to be an exception, rather than the rule.

508.7 REVIEWS AND APPEALS

Once an incarcerated person is classified and housed, the person may appeal the decision of the classification correctional officer. The appeal process shall begin at the first-line supervisor level. The decision by the supervisor may be appealed to the Captain or the authorized designee. The decision by the Captain or the authorized designee is final.

508.7.1 PERIODIC CLASSIFICATION REVIEWS

The classification correctional officer shall review the status of all incarcerated persons who have been incarcerated in the facility for more than 30 days. Additional reviews should occur each 30 days thereafter. The review should examine changes in the incarcerated person's behavior or circumstances and should either raise, lower, or maintain the classification status (28 CFR 115.41).

Housing and program assignments for each transgender or intersex incarcerated person shall be reassessed at least twice each year to review any threats experienced by the person (28 CFR 115.42).

Incarcerated person risk levels shall be reassessed when required due to a referral, request, incident of sexual abuse, or receipt of additional information that increases the incarcerated person's risk of sexual victimization or abusiveness (28 CFR 115.41).

508.7.2 MEMBER REQUESTED REVIEW

At any point during an incarcerated person's incarceration, a member may request a review of the incarcerated person's classification. The reason for the review, the review itself, and the outcome of the review shall be documented in the incarcerated person's file. Nothing in this section shall prohibit members from immediately moving an incarcerated person to another location in the jail based on exigent circumstances. Under such circumstances, the member moving the incarcerated person must immediately document the action and notify the classification correctional officer.

508.8 HOUSING ASSIGNMENTS

Incarcerated persons should be housed based upon the following criteria:

- Classification level
- Age
- Incarcerated persons will be housed in separate units based on gender
- Legal status (e.g., pretrial or sentenced)

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- Need for protection or separation
- Criminal sophistication
- Any other criteria identified by the Captain

508.8.1 SEPARATION
Incarcerated persons shall be housed to ensure visual and physical separation based on gender.

Civil detainees shall be housed separately from pretrial and sentenced incarcerated persons.

508.9 CLASSIFICATION SPACE ALLOCATION

The classification plan depends on the ability of the facility to physically separate different classes of incarcerated persons. To ensure that allocated space meets the current population needs, the Captain or the authorized designee should periodically meet with representatives of the classification correctional officers to discuss the fixed resources (e.g., cells, dorms, dayrooms).

The Captain should report at least quarterly to the custody management team any space issues.

508.10 SINGLE-OCCUPANCY CELLS

Single-occupancy cells may be used to house the following categories of incarcerated persons:

- Maximum security
- Administrative separation
- Medical condition or disabilities (upon consultation with medical staff and the availability of medical beds)
- Mental condition (upon consultation with mental health staff and the availability of mental health beds)
- Sexual predators
- Any incarcerated person with an elevated risk of being taken advantage of, being mistreated, or becoming a victim of sexual abuse or harassment
- Any other condition or status for single-occupancy housing

The classification supervisor shall notify the Captain or the authorized designee when single-occupancy cells are not available for housing the above described incarcerated persons. In such cases, a risk assessment shall be used to identify incarcerated persons in the above categories who may be safely housed together.

508.11 PRISON RAPE ELIMINATION ACT (PREA) CONSIDERATIONS

Housing, bed, work, and program assignments should be made to separate incarcerated persons at high risk of being sexually victimized from those at high risk of being sexually abusive (28 CFR 115.42). Incarcerated persons identified as being at high risk for sexually aggressive behavior will be monitored and housed in an area that will minimize the risk to other incarcerated persons and staff. All incarcerated persons identified as being at risk of victimization shall be monitored and housed in an area to minimize the risk to their safety. However, incarcerated persons at high risk

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for sexual victimization shall not be placed in involuntary protective custody unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely abusers (28 CFR 115.43; 28 CFR 115.68).

Housing and program assignments of a transgender or an intersex incarcerated person shall include individualized consideration for the incarcerated person's health and safety and any related supervisory, management, or facility security concerns (15 CCR 1050). A transgender or an intersex incarcerated person's views with respect to their own safety shall be given serious consideration.

Lesbian, gay, bisexual, transgender, or intersex incarcerated persons shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is pursuant to a consent decree, legal settlement, or legal judgment (28 CFR 115.42).

508.12 EDUCATION, WORK, AND OTHER RELEASE

Unless a person is incarcerated for an offense for which release is prohibited by law or otherwise prohibited by court order, an incarcerated person in the jail may be released for a period reasonable and necessary for the following reasons:

- To seek or maintain employment
- To attend education classes
- To obtain medical treatment
- Any other reasonable purpose as determined by the Captain or the authorized designee

Education and work-release incarcerated persons who leave the secure perimeter of the jail to complete programs should be housed separately from incarcerated persons in general population.

There should be no contact between the incarcerated persons in general population and those authorized for education, work, or other release. This is to minimize the risk of introducing contraband into the jail and to maintain facility security.

508.13 STAFF TRAINING IN CLASSIFICATION

Classification correctional officers should receive training specific to incarcerated person classification before being assigned primary classification duties. Individuals not specifically trained in classification may work in classification provided that they are under the immediate supervision of a trained and qualified staff member.

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Conducted Energy Device

509.1 PURPOSE AND SCOPE

This policy provides guidelines for the issuance and use of the conducted energy device (CED).

509.2 ISSUANCE AND CARRYING CEDS

Only authorized members who have successfully completed office-approved training may be issued and may carry the CED.

The Rangemaster should keep a log of issued CEDs and the serial numbers of cartridges/ magazines issued to members.

CEDs are issued for use during a member's current assignment. Those leaving a particular assignment may be required to return the device to the office inventory.

Members shall only use the CED and cartridges/magazines that have been issued by the Office. Cartridges/magazines should not be used after the manufacturer's expiration date.

Uniformed members who have been issued the CED shall wear the device in an approved holster.

Correctional officers who carry the CED while in uniform shall carry it in a holster on the side opposite the duty weapon (Penal Code § 13660).

(a) The CED shall be maintained in a secure storage location (see the Management of Weapons and Control Devices Policy).

(b) Each CED shall be clearly and uniquely numbered.

(c) Members shall sign out their CED at the beginning of their shift and sign in their CED upon finishing the shift unless a member is authorized by the Sheriff or the authorized designee to maintain possession of the CED.

(d) At the beginning of each shift, the oncoming Shift Supervisor shall inventory all CEDs.

(e) For single-shot devices, whenever practicable, members should carry an additional cartridge on their person when carrying the CED.

(f) Correctional officers should not hold both a firearm and the CED at the same time.

(g) All CEDs shall be clearly distinguishable to differentiate them from the duty weapons and any other device.

Non-uniformed members may secure the CED in a concealed, secure location in the driver's compartment of their vehicles.

509.2.1 USER RESPONSIBILITIES

Members shall be responsible for ensuring that the issued CED is properly maintained and in good working order. This includes a function test and battery life monitoring, as required by the manufacturer, and should be completed prior to the beginning of the member's shift.

CEDs that are damaged or inoperative, or cartridges/magazines that are expired or damaged, shall be returned to the Rangemaster for disposition. Members shall submit documentation stating

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the reason for the return and how the CED or cartridge/magazine was damaged or became inoperative, if known.

509.3 VERBAL AND VISUAL WARNINGS

A verbal warning of the intended use of the CED should precede its application, unless it would endanger the safety of members or when it is not practicable due to the circumstances. The purpose of the warning is to:

(a) Provide the individual with a reasonable opportunity to voluntarily comply.

(b) Provide other members and individuals with a warning that the CED may be deployed.

If, after a verbal warning, an individual fails to voluntarily comply with a member's lawful orders and it appears both reasonable and feasible under the circumstances, the member may, but is not required to, activate any warning on the device, which may include display of the electrical arc, an audible warning, or the laser, in a further attempt to gain compliance before application of the CED. The laser should not be intentionally directed into anyone's eyes.

The fact that a verbal or other warning was given or the reasons it was not given shall be documented by the member deploying the CED in the related report.

509.4 USE OF THE CED

The CED has limitations and restrictions requiring consideration before its use. The CED should only be used when its operator can safely deploy the device within its operational range. Although the CED may be effective in controlling most individuals, members should be aware that the device may not achieve the intended results and be prepared with other options.

If sufficient personnel are available and can be safely assigned, a member designated as cover for any member deploying a CED may be considered for member safety, as applicable.

509.4.1 APPLICATION OF THE CED

The CED may be used when circumstances reasonably perceived by the member at the time indicate that such application reasonably appears necessary to control a person who:

(a) Is violent or is physically resisting.

(b) Has demonstrated by words or action an intention to be violent or to physically resist and reasonably appears to present the potential to harm members, themselves, or others.

Mere flight from a pursuing member, without additional circumstances or factors, is not good cause for the use of the CED to apprehend an individual.

The CED shall not be used to psychologically torment, elicit statements, or punish any individual.

509.4.2 SPECIAL DEPLOYMENT CONSIDERATIONS

The use of the CED on certain individuals should generally be avoided unless the totality of the circumstances indicates that other available options reasonably appear ineffective or would present a greater danger to the member, the subject, or others, and the member reasonably

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believes that the need to control the individual outweighs the potential risk of using the device. This includes:

(a) Elderly individuals or obvious juveniles.

(b) Individuals with obviously low body mass.

(c) Individuals who are handcuffed or otherwise restrained.

(d) Individuals known to have been recently sprayed with a flammable chemical agent or who are otherwise known to be in proximity to any known combustible vapor or flammable material, including alcohol-based oleoresin capsicum (OC) spray.

(e) Individuals whose position or activity is likely to result in collateral injury (e.g., falls from height, located in water).

Any CED capable of being applied in the drive-stun mode (i.e., direct contact without probes as a primary form of pain compliance) should be limited to supplementing the probe mode to complete the circuit, or as a distraction technique to gain separation between members and the subject, thereby giving members time and distance to consider other force options or actions.

509.4.3 TARGETING CONSIDERATIONS

Recognizing that the dynamics of a situation and movement of the subject may affect target placement of probes, when practicable, members should attempt to target the back, lower center mass, and upper legs of the subject, and avoid intentionally targeting the head, neck, area of the heart, or genitals. If circumstances result in one or more probes inadvertently striking an area outside of the preferred target zones, the individual should be closely monitored until examined by paramedics or a qualified health care professional.

509.4.4 MULTIPLE APPLICATIONS OF THE CED

Once a member has successfully deployed two probes on the subject, the member should continually assess the subject to determine if additional probe deployments or cycles reasonably appear necessary. Additional factors members may consider include but are not limited to:

(a) Whether it is reasonable to believe that the need to control the individual outweighs the potentially increased risk posed by multiple applications.

(b) Whether the probes are making proper contact.

(c) Whether the individual has the ability and has been given a reasonable opportunity to comply.

(d) Whether verbal commands or other options or tactics may be more effective.

Given that on certain devices (e.g., TASER 10™) each trigger pull deploys a single probe, the member must pull the trigger twice to deploy two probes to create the possibility of neuro-muscular incapacitation.

509.4.5 PREGNANT INCARCERATED PERSONS

Application of the TASER device shall not be used on a pregnant incarcerated person (Penal Code § 4023.8).

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509.4.6 ACTIONS FOLLOWING DEPLOYMENTS
Members should take appropriate actions to control and restrain the individual as soon as reasonably practicable to minimize the need for longer or multiple exposures to the CED. As soon as practicable, members shall notify a supervisor any time the CED has been discharged in compliance with the Use of Force Policy. If needed for evidentiary purposes, the expended cartridge, along with any probes and wire, should be submitted into evidence (including confetti tags, when equipped on the device). The evidence packaging should be marked "Biohazard" if the probes penetrated the subject's skin.

509.4.7 DANGEROUS ANIMALS
The CED may be deployed against an animal if the animal reasonably appears to pose an imminent threat to human safety.

509.4.8 OFF-DUTY CONSIDERATIONS
Members are not authorized to carry office CEDs while off-duty.

Members shall ensure that CEDs are secured while in their homes, vehicles, or any other area under their control, in a manner that will keep the device inaccessible to others.

509.5 MEDICAL TREATMENT

Consistent with local medical personnel protocols and absent extenuating circumstances, only qualified health care professionals or members trained in probe removal and handling should remove CED probes from a person's body. Used CED probes shall be treated as a sharps biohazard, similar to a used hypodermic needle, and handled appropriately. Universal precautions should be taken.

All persons who have been struck by CED probes, who have been subjected to the electric discharge of the device, or who sustained direct exposure of the laser to the eyes shall be medically assessed prior to continued processing or returning to housing. Additionally, any such individual who falls under any of the following categories should, as soon as practicable, be examined by paramedics or a qualified health care professional:

(a) The person is suspected of being under the influence of controlled substances and/or alcohol.

(b) The person may be pregnant.

(c) The person reasonably appears to be in need of medical attention.

(d) The CED probes are lodged in a sensitive area (e.g., groin, area of the heart, head, face, neck).

(e) The person requests medical treatment.

Any individual exhibiting signs of distress or who is exposed to multiple or prolonged applications shall be transported to a medical facility for examination or promptly examined by paramedics or a qualified health care professional. If any individual refuses medical attention, such a refusal should be witnessed by another member and/or medical personnel and shall be fully documented

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in related reports. If an audio/video recording is made of the contact or an interview with the individual, any refusal should be included, if possible.

The transporting member shall inform any person providing medical care or receiving custody that the individual has been subjected to the application of the CED (see the Access to Health Care and the Non-Emergency Health Care policies).

509.6 TRAINING

Personnel who are authorized to carry the CED shall be permitted to do so only after successfully completing the initial office-approved training. Any personnel who have not carried the CED as a part of their assignment for a period of six months or more shall be recertified by a qualified CED instructor prior to again carrying or using the device.

Proficiency training for personnel who have been issued CEDs should occur every year. A reassessment of member's knowledge and/or practical skills may be required at any time if deemed appropriate by the Training Manager. All training and proficiency for CEDs will be documented in the member's training files.

Command staff, supervisors, and investigators should receive CED training as appropriate for the investigations they conduct and review.

Members who do not carry CEDs should receive training that is sufficient to familiarize them with the device and with working with members who use the device.

The Training Manager is responsible for ensuring that all members who carry CEDs have received initial and annual proficiency training. Periodic audits should be used for verification.

Application of CEDs during training could result in injuries and should not be mandatory for certification.

The Training Manager should include the following training:

(a) A review of this policy.

(b) A review of the Use of Force Policy.

(c) Performing weak-hand draws or cross-draws until proficient to reduce the possibility of unintentionally drawing and firing a firearm.

(d) Target area considerations, to include techniques or options to reduce the unintentional application of probes to the head, neck, area of the heart, and groin.

(e) Scenario-based training, including virtual reality training when available.

(f) Handcuffing a subject during the application of the CED and transitioning to other force options.

(g) De-escalation techniques.

(h) Restraint techniques that do not impair respiration following the application of the CED.

(i) Proper use of cover and concealment during deployment of the CED for purposes of member safety.

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(j) Proper tactics and techniques related to multiple applications of CEDs.

509.7 POLICY

The CED is used in an attempt to control a violent or potentially violent individual. The appropriate use of such a device may result in fewer serious injuries to members and suspects.

509.8 DOCUMENTATION

Members shall document all CED discharges in the related incident reports in compliance with the office Use of Force Policy and in the CED report forms. Photographs should be taken of any obvious probe impact or drive-stun application sites and attached to the CED report form. Unintentional discharges, pointing the device at a person, audible warning, laser activation, and arcing the device, other than for testing purposes, will also be documented on the report form. Data downloads from the CED after use on a subject should be done as soon as practicable using an office-approved process to preserve the data.

509.8.1 CED REPORT FORM

As applicable based on the device type, items that shall be included in the CED report form are:

(a) The brand, model, and serial number of the CED and any cartridge/magazine.

(b) Date, time, and location of the incident.

(c) Whether any warning, display, laser, or arc deterred a subject and gained compliance.

(d) The number of probes deployed, CED activations, the duration of each cycle, the duration between activations, and (as best as can be determined) the duration that the subject received applications.

(e) The range at which the CED was used.

(f) The type of mode used (e.g., probe deployment, drive-stun).

(g) Location of any probe impact.

(h) Location of contact in drive-stun mode.

(i) Description of where missed probes went.

(j) Whether medical care was provided to the subject.

(k) Whether the subject sustained any injuries.

(l) Whether any members sustained any injuries.

The Training Manager should periodically analyze the report forms to identify trends, including deterrence and effectiveness. The Training Manager should also conduct audits of CED data downloaded to an approved location and reconcile CED report forms with recorded activations. CED information and statistics, with identifying information removed, should periodically be made available to the public.

509.8.2 REPORTS

The member should include the following in the incident report:

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(a) Identification of all personnel firing CEDs

(b) Identification of all witnesses

(c) Medical care provided to the subject

(d) Observations of the subject's physical and physiological actions

(e) Any known or suspected drug use, intoxication, or other medical problems

509.9 SUPERVISOR RESPONSIBILITIES

When possible, supervisors should respond to calls when they reasonably believe there is a likelihood the CED may be used. A supervisor should respond to all incidents where the CED was activated.

A supervisor should review each incident where a person has been exposed to a CED. The device's internal logs should be downloaded by a supervisor or Rangemaster and saved with the related incident report. The supervisor should arrange for photographs of probe sites to be taken and witnesses to be interviewed.

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Control of Incarcerated Person Movement

510.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for the safe and secure movement of incarcerated persons between areas within the facility and transportation from the facility to court, medical appointments, or other jurisdictions (15 CCR 1029(a)(6)).

510.2 POLICY

The staff should be vigilant in the control and movement of incarcerated persons between areas within the facility and when transporting persons outside the secure confines of the facility. Control may be by direct or indirect visual observation. All staff should consider all incarcerated person movement as high-risk activity. The staff should be aware of their surroundings at all times and take necessary steps to prevent the possession and exchange of contraband.

510.3 CONTROL OF MOVEMENT

Staff shall not allow incarcerated persons to leave their assigned housing area unless they have approved activities that may include but are not limited to the following:

(a) Court

(b) Transportation to another facility

(c) Receiving a visit

(d) Law enforcement interview or to participate in a lineup

(e) Reporting for work

(f) Receiving dental or medical care

(g) Attending educational classes or religious services

(h) Release

(i) Facility Emergency

(j) Any other reason deemed appropriate by staff

510.4 MOVEMENT OF INCARCERATED PERSONS

Movement of one or more incarcerated persons in the facility should be done in an orderly manner with incarcerated persons walking in a single-file line. Staff members should have situational awareness during the movement of incarcerated persons and should consider the design of the facility, areas of poor visibility, and the presence of other persons being moved. The staff should avoid areas where incarcerated persons may have access to contraband items.

510.5 MOVEMENT OF SPECIAL MANAGEMENT INCARCERATED PERSONS

Incarcerated persons should be restrained during movement based upon individual security classification, with higher risk persons in handcuffs, waist chains, and leg irons. An exception to this procedure is when an incarcerated person has a physical disability where restraint devices

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may cause serious injury. Pregnant incarcerated persons shall be moved in accordance with the Use of Restraints Policy.

Whenever a high-security incarcerated person is not able to be restrained, the staff should compensate by utilizing wheelchairs and should secure the incarcerated person to the chair. It may also be necessary to increase the number of staff present to ensure the safe movement of high-security incarcerated persons.

The staff should be watchful in and around passageways and ensure that sallyport doors are secured to prevent escape.

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Use of Force

511.1 PURPOSE AND SCOPE

This policy provides guidelines on the reasonable use of force. While there is no way to specify the exact amount or type of reasonable force to be applied in any situation, every member of this office is expected to use these guidelines to make such decisions in a professional, impartial, and reasonable manner (Government Code § 7286; 15 CCR 1029(a)(3)).

In addition to those methods, techniques, and tools set forth below, the guidelines for the reasonable application of force contained in this policy shall apply to all policies addressing the potential use of force, including but not limited to the Conducted Energy Device, Use of Restraints, and Electronic Restraints policies.

Retaliation prohibitions for reporting suspected violations are addressed in the Anti-Retaliation Policy.

511.1.1 DEFINITIONS

Definitions related to this policy include:

Deadly force - Any use of force that creates a substantial risk of causing death or serious bodily injury, including but not limited to the discharge of a firearm (Penal Code § 835a).

Feasible - Reasonably capable of being done or carried out under the circumstances to successfully achieve the arrest or lawful objective without increasing risk to the correctional officer or another person (Government Code § 7286(a)).

Force - The application of physical techniques or tactics, chemical agents, or weapons to another person. It is not a use of force when individuals allow themselves to be searched, escorted, handcuffed, or restrained.

Force team technique - The force team technique ordinarily involves trained members clothed in protective gear who enter the incarcerated person's area in tandem, each with a specific task, to achieve immediate control of the incarcerated person.

Serious bodily injury - A serious impairment of physical condition, including but not limited to the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring extensive suturing; and serious disfigurement (Penal Code § 243(f)(4)).

Totality of the circumstances - All facts known to the correctional officer at the time, including the conduct of the correctional officer and the individual leading up to the use of force (Penal Code § 835a).

511.2 POLICY

The use of force is a matter of critical concern, both to the public and to the public safety community. Members are involved on a daily basis in numerous and varied interactions and, when warranted, may use reasonable force in carrying out their duties.

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Members must have an understanding of, and true appreciation for, their authority and limitations. This is especially true with respect to overcoming resistance while engaged in the performance of public safety duties.

The Tehama County Sheriff's Office recognizes and respects the value of all human life and dignity without prejudice to anyone. Vesting members with the authority to use reasonable force and to protect the public welfare requires monitoring, evaluation, and a careful balancing of all interests.

511.3 USE OF FORCE

Authorized members shall use only that amount of force that reasonably appears necessary given the facts and totality of the circumstances known to or perceived by the member at the time of the event to accomplish a legitimate government purpose such as to gain control of the individual; protect and ensure the safety of incarcerated persons, members, and others; prevent serious property damage; prevent escape; obtain compliance with facility rules and member orders; or to ensure the institution's security and good order (Penal Code § 835a).

The reasonableness of force will be judged from the perspective of a reasonable member on the scene at the time of the incident. Any evaluation of reasonableness must allow for the fact that members are often forced to make split-second decisions about the amount of force that reasonably appears necessary in a particular situation, with limited information and in circumstances that are tense, uncertain, and rapidly evolving.

Given that no policy can realistically predict every possible situation a member might encounter, members are entrusted to use well-reasoned discretion in determining the appropriate use of force in each incident. Members may only use a level of force that they reasonably believe is proportional to the seriousness of the suspected offense or the reasonably perceived level of actual or threatened resistance (Government Code § 7286(b)).

It is also recognized that circumstances may arise in which members reasonably believe that it would be impractical or ineffective to use any of the approved or authorized tools, weapons, or methods provided by this office. Members may find it more effective or reasonable to improvise their response to rapidly unfolding conditions that they are confronting. In such circumstances, the use of any improvised device or method must nonetheless be objectively reasonable and utilized only to the degree that reasonably appears necessary to accomplish a legitimate government purpose.

While the ultimate objective of every encounter is to avoid or minimize injury, nothing in this policy requires a member to retreat or be exposed to possible physical injury before applying reasonable force.

Force shall never be used as punishment.

511.3.1 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a member has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit (Government Code § 7286(b)). These factors include but are not limited to:

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(a) The apparent immediacy and severity of the threat to members or others (Penal Code § 835a).

(b) The conduct of the individual being confronted, as reasonably perceived by the member at the time (Penal Code § 835a).

(c) Member/individual factors (e.g., age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of members available vs. individuals).

(d) The conduct of the involved member leading up to the use of force (Penal Code § 835a).

(e) The effects of suspected drug or alcohol use.

(f) The individual's apparent mental state or capacity (Penal Code § 835a).

(g) The individual's apparent ability to understand and comply with correctional officer commands (Penal Code § 835a).

(h) The proximity of weapons or dangerous improvised devices.

(i) The degree to which the individual has been effectively restrained and the individual's ability to resist despite being restrained.

(j) The availability of other reasonable and feasible options and their possible effectiveness (Penal Code § 835a).

(k) The seriousness of the suspected offense or reason for contact with the individual prior to and at the time force is used.

(l) The training and experience of the member.

(m) The potential for injury to members, incarcerated persons, bystanders, and others.

(n) Whether the individual appears to be resisting, attempting to evade arrest by flight, or is attacking the member.

(o) The risk and reasonably foreseeable consequences of escape.

(p) The apparent need for immediate control of the individual or a prompt resolution of the situation to maintain or restore order.

(q) Whether the conduct of the individual being confronted no longer reasonably appears to pose an imminent threat to the member or others.

(r) Prior contacts with the individual or awareness of any propensity for violence.

(s) Any other exigent circumstances.

511.3.2 DUTY TO INTERCEDE

Any correctional officer present and observing another law enforcement officer or member using force that is clearly beyond that which is necessary, as determined by an objectively reasonable correctional officer under the circumstances, shall, when in a position to do so, intercede (as defined by Government Code § 7286) to prevent the use of unreasonable force.

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When observing or reporting force used by a law enforcement officer, each correctional officer should take into account the totality of the circumstances and the possibility that other law enforcement officers may have additional information regarding the threat posed by the subject (Government Code § 7286(b)).

511.3.3 ALTERNATIVE TACTICS - DE-ESCALATION

As time and circumstances reasonably permit, and when community and correctional officer safety would not be compromised, correctional officers should consider actions that may increase correctional officer safety and may decrease the need for using force:

(a) Summoning additional resources that are able to respond in a reasonably timely manner.

(b) Formulating a plan with responding correctional officers before entering an unstable situation that does not reasonably appear to require immediate intervention.

(c) Employing other tactics that do not unreasonably increase correctional officer jeopardy.

In addition, when reasonable, correctional officers should evaluate the totality of circumstances presented at the time in each situation and, when feasible, consider and utilize reasonably available alternative tactics and techniques that may persuade an individual to voluntarily comply or may mitigate the need to use a higher level of force to resolve the situation before applying force (Government Code § 7286(b)). Such alternatives may include but are not limited to:

(a) Attempts to de-escalate a situation.

(b) If reasonably available, the use of crisis intervention techniques by properly trained personnel.

511.3.4 DUTY TO REPORT EXCESSIVE FORCE

Any correctional officer who observes a law enforcement officer or a member use force that potentially exceeds what the correctional officer reasonably believes to be necessary shall immediately report these observations to a supervisor (Government Code § 7286(b)).

As used in this section, “immediately” means as soon as it is safe and feasible to do so.

511.3.5 PAIN COMPLIANCE TECHNIQUES

Pain compliance techniques may be effective in controlling a physically or actively resisting individual. Members may only apply those pain compliance techniques for which they have successfully completed office-approved training. Members utilizing any pain compliance technique should consider:

(a) The degree to which the application of the technique may be controlled given the level of resistance.

(b) Whether the individual can comply with the direction or orders of the member.

(c) Whether the individual has been given sufficient opportunity to comply.

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The application of any pain compliance technique shall be discontinued once the member determines that compliance has been achieved.

511.3.6 RESTRICTIONS ON THE USE OF A CAROTID CONTROL HOLD

Correctional officers of this office are not authorized to use a carotid restraint hold. A carotid restraint means a vascular neck restraint or any similar restraint, hold, or other defensive tactic in which pressure is applied to the sides of a person's neck that involves a substantial risk of restricting blood flow and may render the person unconscious in order to subdue or control the person (Government Code § 7286.5; 15 CCR 1029).

511.3.7 RESTRICTIONS ON THE USE OF A CHOKE HOLD

Correctional officers of this office are not authorized to use a choke hold. A choke hold means any defensive tactic or force option in which direct pressure is applied to a person's trachea or windpipe (Government Code § 7286.5; 15 CCR 1029).

511.3.8 USE OF FORCE TO SEIZE EVIDENCE

In general, members may use reasonable force to lawfully seize evidence and to prevent the destruction of evidence. However, members are discouraged from using force solely to prevent a person from swallowing evidence or contraband. In the instance when force is used, members should not intentionally use any technique that restricts blood flow to the head, restricts respiration, or creates a reasonable likelihood that blood flow to the head or respiration would be restricted. Members are encouraged to use techniques and methods taught by the Tehama County Sheriff's Office for this specific purpose.

511.3.9 MEDICAL CONSIDERATION

Once it is reasonably safe to do so, properly trained members should promptly provide or procure medical assistance for any individual injured or claiming to have been injured in a use of force incident (Government Code § 7286(b)).

511.3.10 FAILURE TO INTERCEDE

A correctional officer who has received the required training on the duty to intercede and then fails to act to intercede when required by law may be disciplined in the same manner as the correctional officer who used force beyond that which is necessary (Government Code § 7286(b)).

511.3.11 NOTIFICATION TO SUPERVISORS REGARDING USE OF FORCE

Any use of force by a correctional officer shall be reported immediately to a supervisor (Penal Code § 832.13).

As used in this section, “immediately” means as soon as it is safe and feasible to do so.

511.3.12 ADDITIONAL RESTRICTIONS

Terms such as "positional asphyxia," "restraint asphyxia," and "excited delirium" continue to remain the subject of debate among experts and medical professionals, are not universally recognized medical conditions, and frequently involve other collateral or controlling factors such

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as narcotics or alcohol influence, or preexisting medical conditions. While it is impractical to restrict a correctional officer's use of reasonable control methods when attempting to restrain a combative individual, correctional officers are not authorized to use any restraint or transportation method which might unreasonably impair an individual's breathing or respiratory capacity for a period beyond the point when the individual has been adequately and safely controlled. Once the individual is safely secured, correctional officers should promptly check and continuously monitor the individual's condition for signs of medical distress (Government Code § 7286.5).

511.4 USE OF OTHER WEAPONS, TOOLS, AND CHEMICAL AGENTS ON INCARCERATED PERSONS

511.4.1 NOISE/FLASH DISTRACTION DEVICES

Noise/flash distraction devices, sting grenades, chemical grenades, and similar devices shall be used only at the direction of a supervisor and only by members who have been trained in and are qualified for the use of the devices.

511.4.2 ELECTRONIC CONTROL DEVICES

The use of the conducted energy device (CED) shall be in accordance with the office's Conducted Energy Device Policy.

The use of other electronic devices, such as stun cuffs, stun vests, and stun belts, shall be in accordance with the office's Electronic Restraints Policy.

511.4.3 CHEMICAL AGENTS

Chemical agents shall only be used in the facility as authorized by the Captain or the authorized designee and in accordance with the office's Chemical Agents Training Policy. Oleoresin capsicum (OC) spray should not be used in the medical unit or other designated areas where incarcerated persons are assigned to respiratory isolation or on any incarcerated person who is under control with or without restraints.

Incarcerated persons who have been affected by the use of chemical agents shall be promptly provided with the proper solution to decontaminate the affected areas.

If the incarcerated person refuses to decontaminate, such a refusal shall be documented. If an incarcerated person has been exposed in a cell and not removed from the cell where the exposure occurred, in-cell decontamination shall be afforded to the incarcerated person, including:

(a) Health-trained custody member advising the incarcerated person how to decontaminate in the cell.

(b) Clean clothing if the incarcerated person's clothing was contaminated.

(c) Monitoring of the in-cell incarcerated person at least every 15 minutes on an irregular schedule, for a period of not less than 45 minutes, by a health-trained custody member.

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511.4.4 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. The potential exists for the projectiles to inflict injury if they strike the head, neck, spine, or groin. Therefore, members deploying the pepper projectile system should not intentionally target those areas except when the member reasonably believes the incarcerated person may cause serious bodily injury or death to the member or others. The use of the pepper projectile system is subject to the following requirements:

(a) Office-approved projectile chemical agents may only be used by members who have received office-authorized training in their use.

(b) Members encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by this policy.

Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the incarcerated person, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

511.4.5 IMPACT WEAPONS

The need to immediately incapacitate the incarcerated person must be weighed against the risk of causing serious injury or death. The head and neck should not be intentionally targeted with an impact weapon, except when the member reasonably believes the incarcerated person may cause serious bodily injury or death to the member or others.

511.4.6 KINETIC ENERGY PROJECTILES

Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury and can be used by a trained and qualified member in an attempt to de-escalate a potentially deadly situation.

511.4.7 CHEMICAL AGENTS AND PREGNANT INCARCERATED PERSONS

Pregnant incarcerated persons shall not be pepper sprayed or exposed to other chemical weapons (Penal Code § 4023.8).

511.5 IMMEDIATE AND CALCULATED USE OF FORCE

An immediate use of force occurs when force is used to respond without delay to a situation or circumstance that constitutes an imminent threat to security or safety. For example, the immediate or unplanned use of force by a member may be necessary to stop an incarcerated person from inflicting self-injury or to stop an assault on any other person, including other incarcerated persons. The destruction of government property may require the immediate use of force by a member in some circumstances. A verbal warning should be given before an immediate use of force unless the circumstances preclude it.

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If there is no need for immediate action, members should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an incarcerated person's presence or conduct poses a threat to safety or security and the incarcerated person is located in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing, and organization.

The assistance of available non-custodial members (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation.

A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the Captain or the authorized designee for approval and consultation prior to any calculated use of force action.

511.5.1 CONFRONTATION AVOIDANCE PROCEDURES

Prior to any calculated use of force, the supervisor shall confer with the appropriate persons to gather pertinent information about the incarcerated person and the immediate situation. Based on the supervisor's assessment of the available information, the supervisor should direct the members to attempt to obtain the incarcerated person's voluntary cooperation and consider other available options before determining whether force is necessary.

The supervisor should consider including the following persons and resources in the process:

(a) Mental health specialist

(b) Qualified health care professional

(c) Chaplain

(d) Office Records Division

(e) Any other relevant resources

Regardless of whether discussions with any of the above resources are accomplished by telephone or in person, the purpose is to gather information to assist in developing a plan of action, such as the incarcerated person's medical/mental history (e.g., asthma or other breathing-related illness, hypoglycemia, diabetes), any recent incident reports or situations that may be contributing to the incarcerated person's present condition (e.g., pending criminal prosecution or sentencing, recent death of a loved one, divorce). The assessment should include discussions with members who are familiar with the incarcerated person's background or present status. This may provide insight into the cause of the person's immediate agitation. It also may identify other members who have a rapport with the incarcerated person and could possibly resolve the incident peacefully, without the use of force.

If force is determined to be necessary and other means of gaining control of an incarcerated person are deemed inappropriate or ineffective, then the force team technique should be used to control the person and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in calculated use of force situations, and to ensuring that medical services personnel are available.

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511.6 REPORTING THE USE OF FORCE

Every member use of force is an incident that shall be reported on the appropriate report form.

The documentation will reflect the actions and responses of each member participating in the incident, as witnessed by the reporting member.

The report should include:

(a) A clear, detailed description of the incident, including any application of weapons or restraints.

(b) The identity of all individuals involved in the incident (e.g., incarcerated persons, members, others).

(c) The member should articulate the factors perceived and why the member believed the use of force was reasonable under the circumstances.

(d) Efforts made to temper the severity of a forceful response, and if there were none, the reasons why.

(e) Description of any injuries to anyone involved in the incident, including the result of any medical checks that show the presence or absence of injury.

Any member directly observing the incident shall make a verbal report to a supervisor as soon as practicable and include as much of the aforementioned information as is known by the member.

Members shall submit the appropriate documentation prior to going off-duty, unless directed otherwise by a supervisor.

A video recording is required for all calculated use of force incidents and should include the introduction of all members participating in the process. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the Captain within three working days.

The supervisor responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of the immediate psychological and/or physical condition of the involved member.

The Shift Supervisor shall promptly notify the Captain of any incident involving a member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a member.

511.6.1 REPORTING TO CALIFORNIA DEPARTMENT OF JUSTICE

Statistical data regarding all officer-involved shootings and incidents involving use of force resulting in serious bodily injury is to be reported to the California Department of Justice as required by Government Code § 12525.2.

511.6.2 REPORT RESTRICTIONS

Correctional officers shall not use the term "excited delirium" to describe an individual in an incident report. Correctional officers may describe the characteristics of an individual's conduct, but shall

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not generally describe the individual's demeanor, conduct, or physical and mental condition at issue as excited delirium (Health and Safety Code § 24402).

511.7 SUPERVISOR RESPONSIBILITIES

A supervisor should respond to a reported application of force resulting in visible injury, if reasonably available. When a supervisor is able to respond to an incident in which there has been a reported use of force, the supervisor is expected to (Government Code § 7286(b)):

(a) Ensure a crime scene is established to preserve and protect evidence, if appropriate.

(b) Ensure that the chain of command is notified and that all necessary health and safety and security measures are initiated.

(c) Obtain the basic facts from the involved members. Absent an allegation of misconduct or excessive force, this will be considered a routine contact in the normal course of duties.

(d) Ensure that the appropriate investigation authority is notified, if appropriate.

(e) Ensure that any parties involved in a use of force situation are examined by medical staff, regardless of whether any injuries are reported or detectable, and afforded medical treatment as appropriate.

(f) When possible, separately obtain a recorded interview with all individuals upon whom force was used. If this interview is conducted without the person having voluntarily waived the individual's *Miranda* rights, the following should apply:

    1. The content of the interview should not be summarized or included in any related criminal charges.

    2. The fact that a recorded interview was conducted should be documented in a property or other report.

    3. The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.

(g) Once any initial medical assessment has been completed or first aid has been rendered, ensure that photographs have been taken of any areas involving visible injury or complaint of pain, as well as overall photographs of uninjured areas.

    1. These photographs should be retained until all potential for civil litigation has expired.

(h) Identify any witnesses not already included in related reports.

(i) Review and approve all related reports.

(j) Determine if there is any indication that the individual may pursue civil litigation.

    1. If there is an indication of potential civil litigation, the supervisor should complete and route a notification of a potential claim through the appropriate channels.

(k) Evaluate the circumstances surrounding the incident and initiate an administrative investigation if there is a question of policy noncompliance or if for any reason further investigation may be appropriate.

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In the event that a supervisor is unable to respond to the scene of an incident involving a reported application of force, the supervisor is still expected to complete as many of the above items as circumstances permit.

511.8 USE OF DEADLY FORCE

Where feasible, correctional officers shall, prior to the use of deadly force, make reasonable efforts to identify themselves as a peace officer and to warn that deadly force may be used, unless a correctional officer has objectively reasonable grounds to believe the person is aware of those facts (Penal Code 835a).

If an objectively reasonable correctional officer would consider it safe and feasible to do so under the totality of the circumstances, correctional officers shall evaluate and use other reasonably available resources and techniques when determining whether to use deadly force. To the extent that it is reasonably practical, correctional officers should consider their surroundings and any potential risks to bystanders prior to discharging a firearm (Government Code § 7286(b)).

The use of deadly force is only justified when the correctional officer reasonably believes it is necessary in the following circumstances (Penal Code § 835a):

(a) A correctional officer may use deadly force for self-protection or to protect others from what the correctional officer reasonably believes is an imminent threat of death or serious bodily injury to the correctional officer or another person.

(b) A correctional officer may use deadly force to stop an escaping incarcerated person, or stop a fleeing individual, when the correctional officer has probable cause to believe that the individual has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, and the correctional officer reasonably believes that there is an imminent or future potential risk of serious bodily injury or death to any other person if the individual is not immediately apprehended.

Correctional officers shall not use deadly force against an incarcerated person based on the danger that person poses to themself, if an objectively reasonable correctional officer would believe the incarcerated person does not pose an imminent threat of death or serious bodily injury to the correctional officer or to another person (Penal Code § 835a).

An "imminent" threat of death or serious bodily injury exists when, based on the totality of the circumstances, a reasonable correctional officer in the same situation would believe that an incarcerated person has the present ability, opportunity, and apparent intent to immediately cause death or serious bodily injury to the correctional officer or another person. A correctional officer's subjective fear of future harm alone is insufficient as an imminent threat. An imminent threat is one that from appearances is reasonably believed to require instant attention (Penal Code § 835a).

511.9 USE OF FORCE REVIEW

The Shift Supervisor shall review all related reports of use of force incidents occurring on the Shift Supervisor's command. The review is to determine whether the use of force was in compliance with policy, procedure, and applicable law, and to determine if follow-up action or investigation is

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necessary. The Shift Supervisor should also ensure that a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Use of Force Review Committee.

511.9.1 USE OF FORCE REVIEW COMMITTEE

The review committee shall meet and review all use of force cases within 30 days of the incident. It is the responsibility of the Shift Supervisor to ensure these meetings occur. The committee will comprise the following members:

(a) The Captain

(b) One supervisor assigned on a rotational basis

(c) The Training Unit

(d) One qualified health care professional

(e) A correctional officer with advanced use of force training

(f) Other members as selected by the Sheriff

The committee should render a single finding as to whether the use of force was within policy. Any recommendations for areas identified as needing training, changes in policy, or further investigation into incidents that may lead to member discipline shall be addressed in a separate memorandum to the Training Manager and/or the Internal Affairs Unit, as appropriate.

511.10 TRAINING

The Captain shall work with the Training Manager to ensure legal and facility training mandates are met. This training shall include the following:

(a) Use of force

(b) Weapons training

(c) Self-defense

(d) Confrontation avoidance procedures:

1. Communication techniques
2. De-escalation techniques
3. Dealing with persons with a behavioral crisis identification
4. Application of restraints

(e) Forced cell extraction techniques

(f) Force team techniques

(g) General restraint training (soft and hard restraints)

(h) Reporting procedures

(i) Guidelines regarding vulnerable populations, including but not limited to incarcerated persons who are elderly or pregnant, and incarcerated persons with physical, mental, and developmental disabilities (Government Code § 7286(b))

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(j) Training courses required by and consistent with POST guidelines set forth in Penal Code § 13519.10

The Training Manager is responsible for establishing a process to identify correctional officers who are restricted from training other correctional officers for the time period specified by law because of a sustained use of force complaint (Government Code § 7286(b)).

511.10.1 TRAINING FOR CONTROL DEVICES

The Training Manager shall ensure that all personnel who are authorized to carry a control device have been properly trained and certified to carry the specific control device and are retrained or recertified, as necessary.

(a) Proficiency training shall be monitored and documented by a certified control-device weapons or tactics instructor.

(b) All training and proficiency for control devices will be documented in the member's training file.

(c) Members who fail to demonstrate proficiency with the control device or knowledge of this policy will be restricted from carrying the control device until demonstrating proficiency. If a member cannot demonstrate proficiency with a control device or knowledge of this policy after remedial training, the member may be subject to discipline.

511.10.2 PERIODIC TRAINING

Members will receive periodic training on this policy and demonstrate their knowledge and understanding (Government Code § 7286(b)).

Supervisors should conduct and document regular periodic briefings concerning this policy and the storage and use of weapons and control devices. Any test sheets or documentation of performance should be forwarded to the Training Manager to be included in the member's training file.

511.11 USE OF FORCE COMPLAINTS

The receipt, processing, and investigation of public complaints involving use of force incidents should be handled in accordance with the Personnel Complaints Policy (Government Code § 7286(b)).

511.12 POLICY REVIEW

The Sheriff or the authorized designee should regularly review and update this policy to reflect developing practices and procedures (Government Code § 7286(b)).

511.13 POLICY AVAILABILITY

The Sheriff or the authorized designee should ensure this policy is accessible to the public (Government Code § 7286(c)).

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511.14 PUBLIC RECORDS REQUESTS

Requests for public records involving a correctional officer’s personnel records shall be processed in accordance with Penal Code § 832.7 and the Personnel Records and Records and Data policies (Government Code § 7286(b)).

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Use of Restraints

512.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight, and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as four/five-point restraints, restraint chairs, ambulatory restraints, and similar restraint systems, as well as all other restraints, including handcuffs, waist chains, and leg irons when such restraints are used to restrain any incarcerated person for prolonged periods.

This policy does not apply to the use of electrical restraints (see the Electronic Restraints Policy).

512.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical restraints - Restraints applied when an incarcerated person's disruptive, assaultive, and/or self-injurious behavior is related to a medical or mental illness. Clinical restraints can include leather, rubber, or canvas hand and leg restraints with contact points on a specialized bed (four/five-point restraints) or a portable restraint chair.

Therapeutic seclusion - Separated confinement of an agitated, vulnerable, and/or severely anxious incarcerated person with a serious mental illness as part of treatment when clinically indicated for preventive therapeutic purposes.

512.2 POLICY

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others, or property damage. Restraints may also be applied according to an incarcerated person's classification, such as maximum security, to control the behavior of a high-risk incarcerated person while the person is being moved outside the cell or housing unit.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be utilized any longer than is reasonably necessary to control the incarcerated person. Restraints are to be applied only when less restrictive methods, including verbal de-escalation techniques, have been attempted and are deemed ineffective in controlling the dangerous behavior of an incarcerated person (15 CCR 1029(a)(4); 15 CCR 1058). Each incident where restraints are used shall be documented by the handling staff member and placed in the appropriate file prior to the end of the staff member's shift.

This policy does not apply to the temporary use of restraints, such as handcuffing or the use of leg irons to control an incarcerated person during movement and transportation inside or outside the facility.

512.2.1 AUTHORIZED RESTRAINT

The WRAP Restraint manufactured by Safe Restraints, Park City, Utah and Department issued leg shackles, hobbles, handcuffs or plastic cuffs, waist/belly chains, Department issued leg irons,

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transportation chains are the only restraints authorized by this department. Deputies shall only use the above restraint devices supplied or approved by the Department. These devises will also be known or referred to as Auxiliary Restraints, which may be used during long term restraint transportation. For long term restraint transports, approval must be authorized prior to the transport by Management personnel with a rank at or above lieutenant. They provide additional security and safety without impeding breathing, while permitting adequate movement, comfort and mobility.

Any person in auxiliary restraints should be monitored as reasonably necessary.

512.3 USE OF RESTRAINTS - CONTROL

Supervisors shall proactively oversee the use of restraints on any incarcerated person. Whenever feasible, the use of restraints, other than routine use during transfer, shall require the approval of the Shift Supervisor prior to application. In instances where prior approval is not feasible, the Shift Supervisor shall be apprised of the use of restraints as soon as practicable.

Restraint devices, such as restraint chairs, shall only be used on an incarcerated person when it reasonably appears necessary to overcome resistance, prevent escape, or bring an incident under control, thereby preventing injury to the incarcerated person or others, or eliminating the possibility of property damage. Restraints shall not be utilized any longer than is reasonably necessary to achieve the above goals.

Excluding short-term use to gain immediate control, placing an incarcerated person in a restraint chair or other restraints for extended periods requires approval from the Captain or the authorized designee prior to taking action. The medical staff shall be called to observe the application of the restraints, when feasible, prior to the application or as soon as practicable after the application, and to check the incarcerated person for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an incarcerated person shall be documented on appropriate logs and shall be video recorded unless exigent circumstances prevent staff from doing so. The documentation shall include, at a minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed, the name of the person authorizing placement, names of staff involved in the placement, any injuries sustained, when the restraints were removed and the duration of placement (15 CCR 1058).

The following provisions shall be followed when utilizing restraints to control an incarcerated person (15 CCR 1058):

(a) Restraints shall not be used as punishment, placed around a person's neck, or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).

(b) Restrained incarcerated persons shall not be placed facedown or in a position that inhibits breathing.

(c) Restraints shall not be used to secure a person to a fixed object except as a temporary emergency measure. A person who is being transported shall not be locked in any

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manner to any part of the transporting vehicle except for items installed for passenger safety, such as seat belts.

(d) Incarcerated persons in restraints shall be housed either alone or in an area designated for restrained persons.

(e) Restraints shall be applied for no longer than is reasonably necessary to protect the incarcerated person or others from harm.

(f) Staff members shall conduct continuous direct face-to-face observation at least twice every 30 minutes on an irregular schedule to check the incarcerated person's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the incarcerated person's behavior. Any actions taken should also be noted in the log.

(g) The specific reasons for the continued need for restraints shall be reviewed, documented, and approved by the Captain or the Shift Supervisor at least every hour.

(h) Continuous direct visual observation shall be maintained until a medical opinion can be obtained.

(i) Within one hour of placement in restraints, a qualified health care professional shall document an opinion regarding the placement and retention of the restraints.

(j) As soon as practicable, but within four hours of placement in restraints, the incarcerated person shall be medically assessed to determine whether the person has a serious medical condition that is being masked by the aggressive behavior. The medical assessment shall be a face-to-face evaluation by a qualified health care professional.

(k) As soon as practicable, but within eight hours of placement in restraints, the incarcerated person must be evaluated by a mental health professional to assess whether the incarcerated person needs immediate and/or long-term mental health treatment. If the Captain, or the authorized designee, in consultation with responsible health care staff determines that the incarcerated person cannot be safely removed from restraints after eight hours, the person shall be taken to a medical facility for further evaluation.

(l) Where applicable, the Captain shall use the restraint device manufacturer's recommended maximum time limits for placement.

512.3.1 COURT APPROVAL

Prior judicial approval should be obtained for the use of restraints when the incarcerated person is in court if the restraints will be visible to a jury.

512.4 USE OF RESTRAINTS - CLINICAL

An Incarcerated person may be considered for clinically ordered restraints or seclusion when exhibiting dangerous behavior that is believed to be a product of a medical or mental illness and that puts the person or others at risk of physical harm, or when medical care is urgently required and the person is not considered competent to give or withhold consent.

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Clinical restraints and/or therapeutic seclusion shall only be used when an incarcerated person's safety or the safety of others cannot be protected by less restrictive means, and only upon the direct order of a qualified health care professional and notification of the Captain or the authorized designee prior to taking action. Restraints shall be used no longer than is reasonably necessary to provide for the legitimate safety concerns of the incarcerated person, staff, or others.

The following provisions shall be used any time clinical restraints or therapeutic seclusion is authorized:

(a) Excluding short-term use to gain immediate control of an incarcerated person exhibiting dangerous or destructive behavior, an incarcerated person may be placed in clinical restraints or therapeutic seclusion only on the orders of a qualified health care professional and only after making a determination that less restrictive interventions are ineffective to prevent the person from causing property damage or serious self-injury or injury to others.

(b) Clinical restraints or therapeutic seclusion shall never be ordered or otherwise applied as a means of coercion, discipline, punishment, convenience, or retaliation.

(c) The qualified health care professional's order may only be in effect for up to 12 hours for adult incarcerated persons.

(d) Within one hour of the application of restraints or therapeutic seclusion, a face-to-face observation of the incarcerated person to evaluate the need for continued restraint or therapeutic seclusion shall be conducted by a qualified health care professional.

(e) If deemed clinically necessary, the qualified health care professional who gave the initial order for restraints or therapeutic seclusion may renew the original order for an additional four hours for an adult.

(f) Incarcerated persons placed in clinical restraints shall be placed in designated cells within the medical unit. The restraints shall be applied in the least restrictive manner possible, based on the qualified health care professional's evaluation and order.

(g) Incarcerated persons placed in restraints shall only be placed in a face-up position.

(h) Following the first face-to-face observation, a qualified health care professional shall conduct face-to-face checks every 15 minutes on an irregular schedule to assess the incarcerated person's condition and behavior. The restraints shall be checked for proper application and to ensure that circulation is not compromised. Checks shall be documented in the incarcerated person's medical file.

(i) Except in the event of a medical emergency for the incarcerated person, only a qualified health care professional shall determine when an incarcerated person shall be released from clinical restraints or therapeutic seclusion.

512.5 RANGE OF MOTION

Incarcerated persons placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

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512.6 FOOD, HYDRATION, AND SANITATION

Incarcerated persons who are confined in restraints shall be given food and fluids. Provisions shall be made to accommodate any toileting needs at least once every two hours. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the incarcerated person.

Offering food and hydration to incarcerated persons will be documented to include the time, the name of the person offering the food or water/juices, and the incarcerated person's response (receptive, rejected). Incarcerated persons shall be provided the opportunity to clean themselves or their clothing while they are in restraints.

512.7 AVAILABILITY OF CPR EQUIPMENT

CPR equipment, such as barrier masks, shall be provided by the facility and located in proximity to the location where incarcerated persons in restraints are held.

512.8 RESTRAINED INCARCERATED PERSON HOLDING

Restrained incarcerated persons should be protected from abuse by other incarcerated persons. Under no circumstances will restrained incarcerated persons be housed with incarcerated persons who are not in restraints. In most instances, restrained incarcerated persons are housed alone or in an area designated for restrained persons (15 CCR 1058).

512.9 PREGNANT INCARCERATED PERSONS

Restraints will not be used on incarcerated persons who are known to be pregnant unless based on an individualized determination that restraints are reasonably necessary for the legitimate safety and security needs of the incarcerated person, the staff, or the public. Should restraints be necessary, the restraints shall be the least restrictive available and the most reasonable under the circumstances.

Incarcerated persons who are known to be pregnant will not be handcuffed behind their backs or placed in waist restraints or leg irons.

Once pregnancy has been confirmed, a pregnant incarcerated person should be advised of the policies and procedures regarding the restraint of pregnant persons (Penal Code § 3407; 15 CCR 1058.5).

512.9.1 INCARCERATED PERSONS IN LABOR

No incarcerated person who is in labor, delivery, or recovery from a birth shall be restrained by the use of leg restraints/irons, waist restraints/chains, or handcuffs behind the body (Penal Code § 3407; 15 CCR 1058.5).

No incarcerated person who is in labor, delivering, or recovering from a birth shall be otherwise restrained except when all of the following exist (Penal Code § 3407; 15 CCR 1058.5):

(a) There is a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of the

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incarcerated person, the staff of this or the medical facility, other incarcerated persons, or the public.

(b) A supervisor has made an individualized determination that such restraints are necessary to prevent escape or injury.

(c) There is no objection from the treating medical care provider.

(d) The restraints used are the least restrictive type and are used in the least restrictive manner.

Restraints shall be removed when medical staff responsible for the medical care of the pregnant incarcerated person determines that the removal of restraints is medically necessary (Penal Code § 3407).

The supervisor should, within 10 days, make written findings specifically describing the type of restraints used, the justification, and the underlying extraordinary circumstances.

512.9.2 INCARCERATED PERSONS IN RECOVERY AFTER TERMINATED PREGNANCY

Incarcerated persons recovering from a termination of pregnancy shall not be restrained using leg restraints/irons, waist restraints/chains, or handcuffs behind the body unless an exception identified in the Incarcerated Persons in Labor subsection of this policy applies (15 CCR 1058.5).

Restraints shall be removed when medical staff responsible for the medical care of the incarcerated person determines that the removal of restraints is medically necessary (15 CCR 1058.5).

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Electronic Restraints

513.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight, and restrictions on the use of electronic restraints on persons incarcerated in this facility, during transportation of incarcerated persons, and during court appearances.

513.2 POLICY

The Tehama County Sheriff's Office allows the use of office-issued electronic restraints as provided in this policy.

513.3 MEMBER RESPONSIBILITIES

Members shall successfully complete office-approved training prior to using any electronic restraint device. Only office-issued electronic restraint devices shall be used.

Members should perform a function test on the device prior to placing it on an incarcerated person. The Shift Supervisor shall ensure that all electronic restraint devices are properly maintained and in good working order.

A member should obtain prior judicial approval for the use of an electronic restraint device in a courtroom. The member should briefly explain the operation of the device to the judge.

513.4 VERBAL WARNING

A verbal warning of the intended use of the electronic restraint device should precede its application, unless it would otherwise endanger the safety of members or when it is not practicable due to the circumstances. The warning is intended to provide the incarcerated person with an opportunity to comply. The fact that a verbal or other warning was given or the reasons it was not given shall be documented by the member deploying the device.

513.5 APPLICATION

Prior to applying the electronic restraint device to an incarcerated person, the member should describe its operation and caution the person about behaviors that may result in its activation.

Although the electronic restraint device is generally effective in controlling most incarcerated persons, members should be aware that it may not achieve the intended result, and that they should be prepared with other options.

The electronic restraint device shall not be used to psychologically torment, elicit statements from, retaliate against, or punish any incarcerated person.

The electronic restraint device may be used in the following circumstances, when the circumstances perceived by the member at the time indicate that such application is reasonably necessary to:

(a) Prevent self-injury, suicide, escape, injury to others, property damage, or an attempt to remove or destroy the device.

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(b) Control the behavior of a high-risk incarcerated person who poses a serious threat to safety or security when being moved outside a cell or housing unit or transported outside the facility.

513.5.1 MULTIPLE APPLICATIONS

Members should activate the electronic restraint device for only one standard cycle and then evaluate the situation before applying any subsequent cycles. Multiple applications of an electronic restraint device or for more time than is necessary to control the incarcerated person are generally not recommended and should be avoided unless the member reasonably believes that the need to control the incarcerated person outweighs the potentially increased risk posed by multiple applications.

If the first application of the electronic restraint device appears to be ineffective in gaining control of an incarcerated person, the member should consider certain factors before additional applications, including whether the person has the ability to comply and has been given a reasonable opportunity to comply.

513.5.2 SPECIAL CONSIDERATIONS

Electronic restraint devices should not be used on:

(a) Incarcerated persons who are known to be pregnant.

(b) Elderly or infirm incarcerated persons.

(c) Incarcerated persons with obviously low body mass.

(d) Incarcerated persons who have been recently sprayed with a flammable chemical agent or who are otherwise in proximity to any known combustible vapor or flammable material, including alcohol-based oleoresin capsicum (OC) spray.

(e) Incarcerated persons whose position or activity may result in collateral injury (e.g., falls from height, running).

Because the application of the electronic restraint device relies primarily on pain compliance, its use generally should be limited to a distraction technique to gain separation between the member and the incarcerated person, or to disrupt a person's violent or unruly behavior, thereby giving members time and distance to consider other force options or actions.

513.6 DOCUMENTATION

Members shall document each incident where electronic restraints are placed on an incarcerated person or are activated. Notification shall also be made to a supervisor in compliance with the Use of Force Policy. Unintentional activations will also be documented.

513.7 MEDICAL TREATMENT

All incarcerated persons who have been subjected to the electric discharge of an electronic restraint device should have the contact site medically assessed before further incarceration.

Additionally, any incarcerated person who falls under any of the following categories should, as soon as practicable, be examined by a qualified health care professional:

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(a) The person is suspected of being under the influence of controlled substances and/or alcohol.

(b) The person may be pregnant.

(c) The person reasonably appears to be in need of medical attention.

(d) The person requests medical treatment.

If any incarcerated person refuses medical attention, such a refusal should be witnessed by another member and/or medical personnel and shall be fully documented. If an audio recording is made of the contact or an interview with the incarcerated person, any refusal should be included, if possible.

Members shall inform any person providing medical care or receiving custody that the incarcerated person has been subjected to the activation of an electronic restraint device.

513.8 SUPERVISOR RESPONSIBILITIES

Supervisor approval is necessary before an electronic restraint device is placed on an incarcerated person. A supervisor should respond to all incidents where an electronic restraint device was activated.

A supervisor should review each incident where an incarcerated person has been exposed to an activation of an electronic restraint device. Any onboard memory should be downloaded by a supervisor and retained with the person's file.

Photographs of contact sites should be taken and witnesses interviewed.

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Searches

514.1 PURPOSE AND SCOPE

The purpose of this policy is to provide clear direction on maintaining the safety and security of the jail by conducting searches in balance with protecting the constitutional rights of incarcerated persons (15 CCR 1029(A)(6)).

The introduction of contraband into the jail poses a serious risk to the safety and security of members, incarcerated persons, and the public. Any item that is not available to all incarcerated persons may be used as currency by those who possess the item and will allow those in possession of the item to have control over other persons. Any item that may be used to disengage a lock or other electronic security device or that could compromise the physical plant jeopardizes the safety and security of this jail. Carefully restricting the flow of contraband into the jail can only be achieved by thoroughly searching incarcerated persons and their environment.

Nothing in this policy is intended to prohibit the otherwise lawful collection of trace evidence from an individual.

514.1.1 DEFINITIONS

Definitions related to this policy include:

Contraband - Anything unauthorized for incarcerated persons to possess, including drugs and weapons of any kind.

Excess property - Anything authorized for incarcerated persons to possess but in an unauthorized manner or quantity.

Modified strip search - A search that requires the removal or rearranging of some of a person's clothing and does not include a visual inspection of the exposed breasts, buttocks, or genitalia of the person. This search may include a thorough tactile search of an incarcerated person's partially unclothed body. This also includes searching the person's clothing after it has been removed.

Pat-down search - A search used to check an individual for contraband. It involves thoroughly patting down an incarcerated person's clothed body to locate any items that could pose a danger to the correctional officer, the incarcerated person, or others.

Physical body cavity search - A search that includes a visual inspection of and may include physical intrusion into a body cavity. Body cavity means the stomach, colon, rectum, or vagina.

Strip search - A search that requires the removal or rearranging of some or all of a person's clothing to permit a visual inspection of the underclothing, breasts, buttocks, anus, or outer genitalia of the person.

514.2 POLICY

It is the policy of this office to promote the safety of members, incarcerated persons, and visitors by conducting effective and appropriate searches of incarcerated persons and areas within the jail in accordance with applicable laws. Members shall always be alert to the possible presence of

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contraband and shall take immediate action to seize and appropriately handle contraband when found.

Searches shall not be used for intimidation, harassment, punishment, or retaliation.

514.3 PAT-DOWN SEARCHES

Pat-down searches will be performed on all incarcerated persons/arrestees upon entering the secure booking area of the jail. Additionally, pat-down searches shall occur frequently within the jail. At a minimum, members shall conduct pat-down searches in circumstances that include:

(a) When incarcerated persons leave their housing units to participate in activities elsewhere in the jail (e.g., exercise yard, medical unit, visiting) and when they return.

(b) During searches of housing units.

(c) When incarcerated persons come into contact with other individuals housed outside of their housing units, such as on work details.

(d) Any time a member believes incarcerated persons may have contraband on their persons.

Except in emergencies, all pat-down searches will be conducted by a member of the same gender as the incarcerated person. Absent the availability of a member of the same gender, it is recommended that a witnessing member be present during a pat-down search of an individual of another gender. All cross-gender pat-down searches shall be documented (28 CFR 115.15).

514.4 MODIFIED STRIP SEARCHES, STRIP SEARCHES, AND PHYSICAL BODY CAVITY SEARCHES

Correctional officers shall consider and be able to articulate the reason for the search and the scope, manner, and location of the search, and will utilize the least invasive search method to meet the goals of the search.

514.4.1 STRIP SEARCHES PRIOR TO PLACEMENT IN A HOUSING UNIT

Strip searches prior to placement in a housing unit shall be conducted as follows:

(a) No person held prior to placement in a housing unit shall be subjected to a modified strip search or strip search unless there is reasonable suspicion based upon specific and articulable facts to believe the person is concealing contraband. Factors to be considered in determining reasonable suspicion include but are not limited to:

1. The detection of an object during a pat-down search that may be contraband and cannot be safely retrieved without a modified strip search or strip search.
2. Circumstances of a current arrest that specifically indicate the person may be concealing contraband.
    (a) A felony or controlled substance arrest charge or being under the influence of a controlled substance should not suffice as reasonable suspicion absent other facts.
3. Custody history (e.g., past possession of contraband while in custody, assaults on members, escape attempts).

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4. The person's actions or demeanor, such as a refusal to submit to a pat-down search.
5. Criminal history (e.g., level of experience in a custody setting; convictions for escape, possession of drugs or weapons, crimes of violence; being a fugitive).
6. An alert by a metal detector or drug detection device.
7. Other reliable information that the person possesses contraband.

(b) Except in the case of a medical emergency, no modified strip search or strip search of an incarcerated person shall be conducted before admittance to a housing unit without prior written authorization from the Shift Supervisor.

514.4.2 MODIFIED STRIP SEARCHES OR STRIP SEARCHES ON ADMITTED INCARCERATED PERSONS

Modified strip searches or strip searches shall be conducted on all incarcerated persons upon admission into a housing unit.

A modified strip search or a strip search of an incarcerated person in a housing unit should be conducted when the person has entered an environment where contraband may be accessed. This includes but is not limited to the following:

(a) Upon return from contact visits

(b) Upon leaving areas such as the kitchen, shop, or farm

(c) Upon return to the housing unit from outside the confines of the jail (e.g., court, work-release, work detail, medical visits)

Incarcerated persons returning from court with release orders shall not be subjected to modified strip searches or strip searches unless reasonable suspicion exists based on specific and articulable facts that the person is concealing contraband. The incarcerated person should not be returned to the housing unit, except to retrieve personal property under the direct visual supervision of a member.

Members may conduct modified strip searches and strip searches of incarcerated persons outside the above-listed circumstances only with prior written supervisor approval. In such cases, supervisors shall consider and articulate the scope, manner, justification, and location of the particular search. Less invasive searches should be used if they will accomplish the goals of the search. For example, a pat-down may be sufficient as an initial effort to locate a larger item, such as a cell phone.

514.4.3 MODIFIED STRIP SEARCH AND STRIP SEARCH PROCEDURES

All modified strip searches and strip searches shall be conducted in a professional manner under sanitary conditions and in an area where the search cannot be observed by persons not participating in the search. The search shall not be video or audio recorded.

Unless conducted by a qualified health care professional or in case of an emergency, a modified strip search or strip search shall be conducted by members of the same gender as the person

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being searched (Penal Code § 4030). Any cross-gender modified strip searches and cross-gender strip searches shall be documented (28 CFR 115.15).

Whenever possible, a second member of the same gender should be present during the search for security purposes and to witness the discovery of evidence. Except in exceptional circumstances, the number of members present during a search shall not exceed three.

The member conducting a strip search shall not touch the breasts, buttocks, or genitalia of the person being searched except and only to the extent necessary to safely remove contraband from the exterior of the person being searched (Penal Code § 4030). These areas may be touched through the clothing during a modified strip search.

Generally, items protruding from body cavities should not be removed. If a body cavity search appears necessary, see the Physical Body Cavity Searches section of this policy.

(a) The searching member will instruct the incarcerated person to:

1. Remove or rearrange their clothing.
2. Raise their arms above the head and turn 360 degrees.
3. Bend forward and run their hands through their hair.
4. Turn their head, to the left and to the right, so the searching correctional officer can inspect the person's ear orifices.
5. Open their mouth and run a finger over the upper and lower gum areas, then raise the tongue so the correctional officer can inspect the interior of the person's mouth. Remove dentures if applicable.
6. Turn around and raise one foot first, then the other so the correctional officer can check the bottom of each foot.
7. Turn around, bend forward, and spread the buttocks if necessary to view the anus.

(b) At the completion of the search, the incarcerated person should be instructed to dress in either street clothes or jail-supplied clothing, as appropriate.

514.4.4 PHYSICAL BODY CAVITY SEARCHES

Physical body cavity searches shall be completed as follows:

(a) No person shall be subjected to a physical body cavity search without the approval of the Captain or the authorized designee and only with the issuance of a search warrant.

(b) Only a physician may conduct a physical body cavity search. Except in exigent circumstances, only a physician who is not responsible for providing ongoing care to the incarcerated person may conduct the search (15 CCR 1206(o)).

(c) Except for the physician conducting the search, persons present must be of the same gender as the person being searched. Only correctional officers needed to maintain the safety and security of the medical personnel shall be present during the search (Penal Code § 4030).

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(d) Privacy requirements, including restricted touching of body parts, and sanitary condition requirements are the same as required for a strip search.

(e) All such searches shall be documented, including:

1. The facts that led to the decision to perform a physical body cavity search of the incarcerated person.
2. The reasons less intrusive methods of searching were not used or were insufficient.
3. The Captain's approval.
4. A copy of the search warrant.
5. The time, date, and location of the search.
6. The medical personnel present.
7. The names, genders, and roles of any correctional officers present.
8. Any contraband discovered by the search.

(f) Completed documentation should be placed in the incarcerated person's file. A copy of any search warrant and the results of the physical body cavity search shall be included with the related reports and made available, upon request, to the incarcerated person or other authorized representative (except for those portions of the warrant ordered sealed by a court).

(g) All contraband should be processed in accordance with the office's current evidence procedures.

(h) If appropriate, a crime report and/or disciplinary report shall be completed.

514.4.5 BODY SCANNER SEARCH

When a scanner is reasonably available, a body scanner should be performed on all incarcerated persons/arrestees upon entering the secure booking area of the facility.

If a body scanner is used, members (Penal Code § 4030):

(a) Within sight of the visual display of a body scanner depicting the body during a scan shall be of the same gender as the person being scanned, except for physicians or licensed medical personnel.

(b) Should ask incarcerated persons if they are pregnant prior to a body scan and should not knowingly use a body scanner on a person who is pregnant.

The body scanner should generally be used whenever reasonably practicable in place of a modified strip search, strip search, or body cavity search of an incarcerated person in housing unless one of those searches is reasonably necessary after the scan.

514.5 PROHIBITED SEARCHES OF TRANSGENDER AND INTERSEX INCARCERATED PERSONS

Members shall not search or physically examine a transgender or intersex incarcerated person for the sole purpose of determining genital status (see the Prison Rape Elimination Act Policy for

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transgender and intersex definitions). If genital status is unknown, it may be determined during conversations with the person, by reviewing medical records, or if necessary, by obtaining that information as part of a broader medical examination conducted in private by a qualified health care professional (28 CFR 115.15).

514.6 HOUSING UNIT SEARCHES

Housing unit searches shall occur as directed by a supervisor. These searches should include all of the living spaces occupied by incarcerated persons. Housing unit searches should be scheduled in a manner that does not create a pattern where the persons can predict such searches. During a housing unit search:

(a) All incarcerated persons shall vacate their living areas and be patted down by members.

(b) Incarcerated persons should be escorted to a separate holding area, such as the recreation yard.

(c) Members shall search the living areas of the incarcerated persons, including bedding, personal storage areas, bunks, and other areas with incarcerated person access.

(d) Any contraband located shall be processed in accordance with the current evidence procedures.

(e) Members shall attempt to identify the incarcerated person who possessed the contraband and file appropriate person discipline and/or crime reports.

(f) Any excess property shall be seized, inventoried, and retained pending disposition according to jail procedures.

At the conclusion of the housing unit search, closely supervised incarcerated workers should clean the unit. All authorized incarcerated person personal property shall be respected and living areas should be returned to an orderly condition.

514.7 PHYSICAL PLANT SEARCHES

The following areas of this jail shall be periodically searched for contraband:

(a) Exercise yards shall be searched before and after each incarcerated person group occupies the yard.

(b) Holding cells shall be searched before and after each occupation.

(c) Program areas, such as classrooms and multipurpose rooms, shall be searched after each use by an incarcerated person or incarcerated person group.

(d) Laundry areas shall be searched before and after incarcerated person use.

(e) Kitchen areas shall be frequently searched for contraband and to account for tools, knives, and food items.

(f) Incarcerated person visiting and public areas shall be frequently inspected.

(g) The jail perimeter shall be searched at least once each shift.

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514.8 CRIMINAL EVIDENCE SEARCHES

The Captain or the authorized designee shall be notified, as soon as practicable, any time it is suspected that a crime has been committed in the jail or other area controlled by jail members, and there is a need to search for evidence related to the crime. A search for evidence may be conducted by members whenever there is a need for such action.

Any evidence collected in connection with an alleged crime should be processed in accordance with the office's current evidence procedures.

514.9 TRAINING

The Training Manager shall provide training for members on this policy, including how to conduct pat-down searches, modified strip searches, and strip searches in a professional and respectful manner and in the least intrusive manner possible, consistent with jail security needs. This training shall include cross-gender pat downs and searches, as well as searches of transgender and intersex incarcerated persons (28 CFR 115.15).

514.10 CANINE-ASSISTED SEARCHES

It is the policy of this jail to use canines to assist members in searching for contraband. Such searches shall occur only with a supervisor's approval. Only canines trained to detect contraband will be allowed within the secure perimeter of the jail. Canines trained solely in crowd control or to assist in physically subduing individuals will not be used in the jail.

Canines will generally be used to assist members in physical plant, housing unit, and perimeter searches. Contact between incarcerated persons and canines should be kept to a minimum (see the Canines Policy).

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Reporting In-Custody Deaths

515.1 PURPOSE AND SCOPE

This policy provides direction for notifications, reporting, and review of in-custody deaths (15 CCR 1046).

515.1.1 DEFINITIONS

Definitions related to this policy include:

In-custody death - The death of any person, for whatever reason (natural, suicide, homicide, accident), who is in the process of being booked or is incarcerated or under supervision at any facility of this office (Penal Code § 832.10).

515.2 POLICY

It is the policy of this office to follow state and local guidelines regarding notifications and reporting in-custody deaths.

515.3 MANDATORY REPORTING

All in-custody deaths shall be reported within 10 days of the death to the state Attorney General's office, in accordance with reporting guidelines and statutory requirements. Any change or new information that becomes available after the initial reporting to the Attorney General shall be updated to the report and provided to the Attorney General within 10 days of the date of change or the date the new information becomes available (Government Code § 12525).

If the decedent is a boarder for another agency, the Captain shall notify that agency so that agency will assume responsibility for the notification of the decedent's family.

Pursuant to Article 37 of the Vienna Convention on Consular Relations 1963, in the case of the death of a foreign national, telephonic notification to the appropriate consulate post should be made without unreasonable delay and confirmatory written notification shall be made within 72 hours of the death to the appropriate consulate post. The notification shall include the incarcerated person's name, identification number, date and time of death, and the attending physician's name.

In the event that a juvenile dies while in custody, the Captain or the authorized designee shall notify the court of jurisdiction and the juvenile offender's parent or guardian (15 CCR 1047).

A copy of the initial review report for every in-custody death provided to the state Attorney General's office shall be submitted to the Board of State and Community Corrections (BSCC) within 60 days of the death, and contain the information required by 15 CCR 1046 and comport with the disclosure requirements of Penal Code § 832.10 (public disclosure of records) (15 CCR 1046).

515.4 PROCEDURE

Upon determining that a death of any person has occurred while in the custody of this office, the Shift Supervisor is responsible for ensuring that the Sheriff and all appropriate investigative authorities, including the Coroner, are notified without delay and all written reports are completed.

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The Shift Supervisor shall also promptly notify the Captain and make any other notifications required by policy or direction. The Captain shall observe all pertinent laws and allow appropriate investigating agencies full access to all facts surrounding the death.

The Office shall establish policies and procedures for the investigation of any in-custody death.

The decedent's personal belongings shall be disposed of in a responsible and legal manner. All property and records shall be retained according to established records retention schedules.

The individual designated by the decedent shall be notified of all pertinent information as required by law.

During an investigation, all inquiries regarding the death shall be referred to the Public Information Officer. Correctional officers shall not make a public comment.

515.5 IN-CUSTODY DEATH REVIEW

The Sheriff is responsible for establishing a team of qualified staff to conduct an administrative review of every in-custody death. At a minimum, the review team should include the following (15 CCR 1046; 15 CCR 1030):

(a) Sheriff and/or the Captain

(b) County Counsel

(c) District Attorney

(d) Investigative staff

(e) Responsible Physician, qualified health care professionals, supervisors, or other staff who are relevant to the incident

The in-custody death review should be initiated as soon as practicable, and a written report shall be completed within 30 days of the death. The team should review the appropriateness of clinical care, determine whether changes to policies, procedures, or practices are warranted, and identify issues that require further study (15 CCR 1046).

515.5.1 BOARD OF STATE AND COMMUNITY CORRECTIONS IN-CUSTODY DEATH REVIEW RECOMMENDATIONS

The Sheriff or the authorized designee shall review the BSCC recommendations within 90 days of receipt, following the BSCC review of an in-custody death. In a written response to the BSCC, the Sheriff or the authorized designee shall (Penal Code § 6034):

(a) Identify the recommendations that the Office will implement and the anticipated cost and timeline of implementation.

(b) Identify the recommendations that the Office cannot or will not implement and provide an explanation.

The Office shall make the recommendations and responses available to the public with appropriate redactions as permitted by law (Penal Code § 6034).

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515.6 RECORD RELEASE REQUIREMENTS

Records subject to public disclosure that are related to an in-custody death investigation shall be made available for public inspection at the earliest time possible or no later than 45 days from the date of a request, unless the record is subject to delayed release, redaction, or other release restrictions as provided by law (Penal Code § 832.10).

The Records Supervisor should work with the Sheriff or the authorized designee in determining what records exist and whether the records are subject to delay from disclosure, redaction, or other release restrictions.

515.6.1 DELAY OF RELEASE

Disclosure of in-custody death records during active criminal or administrative investigations may be delayed as follows (Penal Code § 832.10):

(a) Disclosure may be delayed up to 60 days from the date the death occurred or until the Office is informed of the district attorney's charging decision, whichever is first.

(b) The Office may continue to delay the disclosure of records after 60 days from the in-custody death if the disclosure could reasonably be expected to interfere with a criminal enforcement proceeding against any person.

(c) If criminal charges are filed related to the death, disclosure may be delayed until the court case reaches final disposition.

(d) During an administrative investigation, disclosure may be delayed until the Office determines whether a policy or law was violated related to the death.

The Office shall provide the records when the investigation or proceedings are no longer active or no later than 18 months after the death, whichever is first.

515.6.2 NOTICE OF DELAY OF RELEASE

The Records Supervisor shall provide written notice to the requester as follows when delaying the disclosure of records (Penal Code § 832.10):

(a) During the initial 60 days, the Records Supervisor shall provide the requester with the specific basis for the determination that the interest in delaying disclosure clearly outweighs the public interest in disclosure and include the estimated date for the disclosure.

(b) When delay is continued after 60 days, the Records Supervisor shall provide the requester, at 180-day intervals as necessary, with the specific basis for the determination that the disclosure could reasonably be expected to interfere with a criminal enforcement proceeding and include the estimated date for the disclosure.

515.6.3 REDACTION

The Office is authorized to redact records for the following reasons (Penal Code § 832.10):

(a) To remove personal data or information, such as a home address, telephone number, or identities of family members, other than people's names and work-related information.

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(b) To preserve the anonymity of whistleblowers, complainants, victims, and witnesses.

(c) To protect confidential medical, financial, or other information of which disclosure is specifically prohibited by federal law or would cause an unwarranted invasion of personal privacy that clearly outweighs the strong public interest in records about possible misconduct.

(d) Where there is a specific, articulable, and particularized reason to believe that disclosure of the record would pose a significant danger to the physical safety of any person.

Additionally, the Office may redact a record, including personal identifying information, where, on the facts of the particular case, the public's interest in the nondisclosure of information is clearly outweighed by the disclosure of information (Penal Code § 832.10).

515.7 IN-CUSTODY DEATH PUBLICATION

The Sheriff or the authorized designee should ensure that all specified information relating to the in-custody death is posted on the office's website as prescribed and within the time frames provided in Penal Code § 10008.

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Staff and Incarcerated Person Contact

516.1 PURPOSE AND SCOPE

Interaction with incarcerated persons allows for continual assessment of the safety and security of the facility and the health and welfare of the incarcerated persons. However, inappropriate interaction can undermine security and order in the facility and the integrity of the supervision process.

This policy provides guidelines for appropriate and professional interaction between members and incarcerated persons, and is intended to promote high ethical standards of honesty, integrity, and impartiality as well as increase facility safety, discipline, and morale.

Violation of this policy may result in disciplinary action up to and including dismissal. Members who seek information or clarification about the interpretation of this policy are encouraged to promptly contact their supervisor.

516.2 POLICY

The Captain shall ensure that incarcerated persons have adequate ways to communicate with staff and that the staff communicates and interacts with incarcerated persons in a timely and professional manner.

516.3 GENERAL CONTACT GUIDELINES

Members are encouraged to interact with the incarcerated persons under their supervision and are expected to take prompt and appropriate action to address health and safety issues that are discovered or brought to their attention.

All members should present a professional and command presence in their contact with incarcerated persons. Members shall address incarcerated persons in a civil manner. The use of profanity, and derogatory or discriminatory comments is strictly prohibited.

Written communication (e.g., request forms, incarcerated person communication, grievances, rules infraction forms, disciplinary reports) shall be answered in a timely manner. Such communication shall be filed with the person's records.

Members shall not dispense legal advice or opinions, or recommend attorneys or other professional services to incarcerated persons.

While profanity and harsh language are prohibited, the Office recognizes the necessity for staff to give incarcerated persons direction in a firm, determined, and authoritative manner in order to maintain proper supervision and control. Authoritative directions to persons are particularly instructed when activities or events pose a threat to the safety or security of this facility.

516.4 ANTI-FRATERNIZATION

Personal or other interaction not pursuant to official duties between facility staff with current incarcerated persons, persons who have been discharged within the previous year, their family

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members or known associates have the potential to create conflicts of interest and security risks in the work environment.

Members shall not knowingly maintain a personal or unofficial business relationship with any persons described in this section unless written permission is received from the Captain.

Prohibited interactions include but are not limited to:

(a) Communications of a sexual or romantic nature.

(b) Salacious exchanges.

(c) Sexual abuse, sexual assault, sexual contact, or sexual harassment.

(d) Exchanging letters, phone calls, or other similar communications, such as texting.

(e) Exchanging money or other items.

(f) Extending privileges, giving or accepting gifts, gratuities, or favors.

(g) Bartering.

(h) Any financial transactions.

(i) Being present at the home of an incarcerated person for reasons other than an official visit without reporting the visit.

(j) Providing an incarcerated person with the staff member's personal contact information, including social media accounts.

516.4.1 EXCEPTIONS

The Captain may grant a written exception to an otherwise prohibited relationship on a case-by-case basis based upon the totality of the circumstance. In determining whether to grant an exception, the Captain should give consideration to factors including, but not limited to:

- Whether a relationship existed prior to the incarceration of the person.
- Whether the relationship would undermine security and order in the facility and the integrity of the supervision process.
- Whether the relationship would be detrimental to the image and efficient operation of the facility.
- Whether the relationship would interfere with the proper discharge of, or impair impartiality and independence of, judgment in the performance of duty.

516.5 REPORTING

Members shall promptly report all attempts by incarcerated persons to initiate sexual acts or any salacious conversations, and forward any correspondence from an incarcerated person or former incarcerated person to the Captain or the authorized designee.

Members shall report all attempts by incarcerated persons to intimidate or instill feelings of fear to their supervisor.

Members shall promptly notify their immediate supervisor in writing if:

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- A family member or close associate has been incarcerated or committed to the custody of the facility.
- The member is involved in a personal or family relationship with a current incarcerated person or with a person who has been discharged within the previous year.

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Transportation of Incarcerated Persons Outside the Secure Facility

517.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for the transportation of incarcerated persons outside this facility and to ensure that the staff assigned to transportation duties is qualified and adequately trained.

517.2 POLICY

It is the policy of the Tehama County Sheriff's Office to provide safe, secure, and humane transportation for all incarcerated persons and other persons as required by law.

This office shall transfer all incarcerated persons from the jail to the place of imprisonment pursuant to the sentence of the court as soon as practicable after the sentence, in accordance with all laws relating to the transfer of incarcerated persons and costs related to transfers to facilities and jurisdictions.

517.3 PROCEDURES

Only staff members who have completed office-approved training on incarcerated person transportation should be assigned incarcerated person transportation duty. All staff members who operate transportation vehicles shall hold a valid license for the type of vehicle being operated.

Any member who transports an incarcerated person outside the secure confines of this facility is responsible for:

(a) Obtaining all necessary paperwork for the incarcerated person being transported (e.g., medical/dental records, commitment documents).

(b) Submitting a completed transportation plan to the transportation supervisor. Items that should be addressed in the plan include:

1. Type of restraints to be used on the incarcerated persons being transported.
2. The routes, including alternate routes, to be taken during the transportation assignment. Routes should be selected with security for the community in mind.
3. Emergency response procedures in the event of a collision, the breakdown of a transportation vehicle, or some other unforeseen event.
4. Site verification, unloading and reloading instructions, and parking rules at the destination.

(c) Ensuring that all incarcerated persons are thoroughly searched and appropriate restraints are properly applied.

1. Incarcerated persons who are known to be pregnant will not be handcuffed behind their backs or placed in waist restraints while being transported (see the Use of Restraints Policy).

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2. Incarcerated persons who are transported to a hospital for the purpose of childbirth shall be transported in the least restrictive way possible and in accordance with Penal Code § 3407. The incarcerated person shall not be shackled to anyone else during transport (see the Use of Restraints Policy) (Penal Code § 4023.8(l)).

(d) Ensuring that all vehicle security devices (e.g., window bars, inside cages, door locks) are in good repair and are operational.

(e) Thoroughly searching the transporting vehicle for contraband before any incarcerated person is placed inside, and again after removing the person from the transporting vehicle.

517.3.1 TRANSPORTATION LOGS

Incarcerated person transportation logs shall be developed by the Captain or the authorized designee and used to log all incarcerated person transportation. The logs shall include:

- Name and identification number of the incarcerated person.
- Date and start/stop time of the transport.
- Location where the incarcerated person was transported.
- Name and identification number of the transporting correctional officer.
- Circumstances of any unusual events associated with the transportation.

The logs shall be retained by the facility in accordance with established records retention schedules.

517.4 TRAINING

The Training Manager shall ensure that all employees charged with incarcerated person transportation duties receive training appropriate for the assignment.

Documentation of all training presented shall be retained in the employee's training file in accordance with established records retention schedules.

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Safety and Sobering Cells

518.1 PURPOSE AND SCOPE

This policy establishes the requirement for placing inmates into and the continued placement of inmates in safety cells or sobering cells.

518.1.1 DEFINITIONS

Definitions related to this policy include:

Safety cell - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for inmates who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property, or who are in need of a separate cell for any reason, until suitable housing is available.

Sobering cell - A holding cell designed to minimize the risk of injury by falling or dangerous behavior. It is used as an initial sobering place for arrestees or inmates who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other inmates.

518.2 POLICY

This facility will employ the use of safety and sobering cells to protect inmates from injury or to prevent the destruction of property by an inmate in accordance with applicable law.

A sobering or safety cell shall not be used as punishment or as a substitute for treatment. The Jail Commander or the authorized designee shall review this policy annually with the Responsible Physician.

518.3 SAFETY CELL PROCEDURES

The following guidelines apply when placing any inmate in a safety cell:

(a) Placement of an inmate into a safety cell requires approval of the Shift Supervisor or the Responsible Physician.(15 CCR 1055)

(b) A safety cell log shall be initiated every time an inmate is placed into the safety cell and should be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.

(c) A safety check consisting of direct visual observation that is sufficient to assess the inmate’s well-being and behavior shall occur twice every 30 minutes.(15 CCR 1055) Each safety check of the inmate shall be documented. Supervisors shall electronically scan every two hours and will be maintained with in the current jail management system.

(d) Inmates should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the inmate has demonstrated that clothing articles may pose a risk to the inmate's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the safety cell log.

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(e) Inmates in safety cells shall be given the opportunity to have fluids (water, juices) at least hourly. Correctional officers shall provide the fluids in paper cups. The inmates shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an inmate is provided the opportunity to drink fluids will be documented on the safety cell log.

(f) Inmates will be provided meals during each meal period. Meals will be served on paper plates or in other safe containers and the inmates will be monitored while eating the meals. Inmates shall be given ample time to complete their meals prior to the plate or container being removed. All meals provided to inmates in safety cells will be documented on the safety cell log.

(g) The Shift Supervisor shall review the appropriateness for continued retention in the safety cell at least everyfour hours.(15 CCR 1055) The reason for continued retention or removal from the safety cell shall be documented on the safety cell log.

(h) A medical assessment of the inmate in the safety cell shall occur within 12 hours of placement or at the next daily sick call, whichever is earliest. Continued assessment of the inmate in the safety cell shall be conducted by a qualified health care professional and shall occur at least every 24 hours thereafter. Medical assessments shall be documented.

(i) A mental health assessment shall be conducted within 12hours of an inmate’s placement in the safety cell(15 CCR 1055). The mental health professional’s recommendations shall be documented.

518.4 SOBERING CELL PROCEDURES

The following guidelines apply when placing any inmate in a sobering cell:

(a) A sobering cell log shall be initiated every time an inmate is placed into a sobering cell. The log shall be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.

(b) A safety check consisting of direct visual observation that is sufficient to assess the inmate’s well-being and behavior shall occur twice every 30 minutes on an irregular schedule. Each visual observation of the inmate by staff shall be documented. Supervisors shall check the logs for completeness every two hours and document this action on the sobering cell log.

(c) Qualified health care professionals shall assess the medical condition of the inmate in the sobering cell at least every six hours in accordance with the office Detoxification and Withdrawal Policy(15 CCR 1056). Only inmates who continue to need the protective housing of a sobering cell will continue to be detained in such housing.

(d) Inmates will be removed from the sobering cell when they no longer pose a threat to their own safety and the safety of others and are able to continue the booking process.

(e) Females and males will be detained in separate sobering cells.

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Biological Samples

519.1 PURPOSE AND SCOPE

This policy provides guidelines for the collection of biological samples from those incarcerated persons required to provide samples upon conviction and/or arrest for certain offenses. This policy does not apply to biological samples collected at a crime scene or taken from a person in conjunction with a criminal investigation. Nor does it apply to biological samples collected from those required to register, for example, as sex offenders.

519.2 POLICY

The Tehama County Sheriff's Office will assist in the expeditious collection of required biological samples from arrestees and offenders in accordance with the laws of this state and with as little reliance on force as practicable.

519.3 PERSONS SUBJECT TO BIOLOGICAL SAMPLE COLLECTION

Incarcerated persons must submit a biological sample (Penal Code § 296: Penal Code § 296.1):

(a) Upon conviction or other adjudication of any felony offense.

(b) Upon conviction or other adjudication of any offense if the person has a prior felony on record.

(c) When arrested or charged with any felony.

519.4 PROCEDURE

When an incarcerated person is required to provide a biological sample, a trained employee shall attempt to obtain the sample in accordance with this policy.

519.4.1 COLLECTION

The following steps should be taken to collect a sample:

(a) Verify that the incarcerated person is required to provide a sample pursuant to Penal Code § 296 and Penal Code § 296.1.

(b) Verify that a biological sample has not been previously collected from the offender by querying the individual's criminal history record for a DNA collection flag or, during regular business hours, calling the California Department of Justice (DOJ) designated DNA laboratory. There is no need to obtain a biological sample if one has been previously obtained.

(c) Use the designated collection kit provided by the California DOJ to perform the collection and take steps to avoid cross contamination.

519.5 CALCULATED USE OF FORCE TO OBTAIN SAMPLES

If an incarcerated person refuses to cooperate with the sample collection process, correctional officers should attempt to identify the reason for refusal and seek voluntary compliance without resorting to using force. Force will not be used in the collection of samples except as authorized

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by court order or approval of legal counsel and only with the approval of the Shift Supervisor. Methods to consider when seeking voluntary compliance include contacting:

(a) The incarcerated person's parole or probation officer when applicable.

(b) The prosecuting attorney to seek additional charges against the incarcerated person for failure to comply or to otherwise bring the refusal before a judge.

(c) The judge at the incarcerated person's next court appearance.

(d) The incarcerated person's attorney.

(e) A chaplain.

(f) A supervisor who may be able to authorize disciplinary actions to compel compliance, if any such actions are available.

The Shift Supervisor shall review and approve any calculated use of force. The supervisor shall be present to supervise and document the calculated use of force.

519.5.1 VIDEO RECORDING

A video recording should be made any time force is used to obtain a biological sample. The recording should document all staff participating in the process, in addition to the methods and all force used during the collection. The recording should be part of the investigation file, if any, or otherwise retained in accordance with the office’s established records retention schedule.

If the use of force includes a cell extraction, the extraction shall also be video recorded, including audio. The video recording shall be retained by the facility in accordance with established records retention schedules. Notwithstanding the use of the video as evidence in a criminal proceeding, the tape shall be retained by the jail administration (15 CCR 1059).

519.6 LEGAL MANDATES AND RELEVANT LAWS

California law provides for the following:

519.6.1 DOCUMENTATION RELATED TO FORCE

The Shift Supervisor or the authorized designee on-duty shall prepare prior written authorization for the use of any force (15 CCR 1059).

The written authorization shall include information that the subject was asked to provide the requisite sample and refused, as well as any related court order authorizing the force.

519.6.2 BLOOD SAMPLES

A blood sample should only be obtained under this policy when:

(a) The California DOJ requests a blood sample and the subject consents, or

(b) A court orders a blood sample following a refusal.

The withdrawal of blood may only be performed in a medically approved manner by health care providers trained and qualified to draw blood. A California DOJ collection kit shall be used for this purpose (Penal Code § 298(a); Penal Code § 298(b)(2)).

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519.6.3 STATE MANDATES

Correctional officers shall document their efforts to secure voluntary compliance and include an advisement of the legal obligation to provide the requisite specimen, sample, or impression, and the consequences of refusal (15 CCR 1059).

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End of Term Release

520.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain procedures governing the end of term release of incarcerated persons to ensure that incarcerated persons are not released in error (15 CCR 1029).

520.2 POLICY

It will be the policy of the Tehama County Sheriff's Office to provide for the timely, efficient, and legal release of incarcerated persons.

520.3 RELEASE PROCEDURE

Incarcerated persons who have reached the end of their sentenced term or who are ordered released by the court will be scheduled for release at staggered times on their release date to avoid congestion in the release area. Incarcerated persons scheduled for release shall be escorted by the staff to the transfer/release area to begin the release procedure 30 minutes prior to their scheduled release time.

The Shift Supervisor or release officer shall sign and date the release paperwork on the same day the incarcerated person is to be released.

Incarcerated persons shall not be released or moved during incarcerated person count, change of shift, or at any time that would pose a potential safety threat or disrupt the orderly operation of the facility.

All incarcerated persons must be positively identified by the staff prior to being released from the facility. Incarcerated person identities should be verified using intake records bearing the incarcerated person's name, photograph, and facility identification number or a single digit fingerprint match system, if available.

Before any incarcerated person may be released, the following conditions must be met:

(a) The identity of the incarcerated person has been verified.

(b) All required paperwork for release is present. The staff shall review the active incarcerated person file to verify the validity of the documents authorizing the release. The file should also be reviewed for other release-related or pending matters, including:

    1. Verifying calculations and release-date adjustments for good time.

    2. Any pending arrangements for follow-up, such as medications needed, appointments, or referral to community or social resources.

    3. Unresolved grievances, damage claims, or lost property.

(c) Releasing staff must complete National Crime Information Center (NCIC) and local warrant checks to ensure that there are no outstanding warrants or detention orders.

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If any agency has outstanding charges against the incarcerated person, the staff shall notify the agency that the incarcerated person is available for release.

(d) If an incarcerated person has known mental health concerns, the incarcerated person shall be evaluated by a qualified health care professional and medically authorized for release. To the extent reasonably practicable, individuals who have been determined to be severely mentally ill should be released during business hours to facilitate their ability to receive services immediately after release.

(e) All personal property shall be returned to the incarcerated person during the release process. The incarcerated person must acknowledge receiving their property by signed receipt. Any discrepancies shall be promptly reported to the Shift Supervisor.

(f) All facility property must be returned by the incarcerated person. Any missing or damaged facility property should be documented and promptly reported to the Shift Supervisor. The incarcerated person shall remain in custody until the Shift Supervisor determines whether additional criminal charges should be filed against the incarcerated person for the damage.

(g) A forwarding address for the incarcerated person should be on file and verified with the incarcerated person for the return of mail.

(h) Incarcerated persons on probation or parole should be directed by the staff to report to the probation or parole office immediately upon release. The parole authorities having jurisdiction shall be notified of the incarcerated person's release, if required.

(i) Incarcerated persons shall have access to at least three free telephone calls to plan for a safe and successful release (Penal Code § 4024.5).

(j) Release standards, release processes, and release schedules shall be made available to an incarcerated person following the determination to release the incarcerated person (Penal Code § 4024.5).

The housing sheet, release log, and daily census log shall be updated accordingly after the incarcerated person's release. The Shift Supervisor shall ensure all release documents are complete and properly signed by the incarcerated person and the staff where required.

520.3.1 DISCHARGE OF INCARCERATED PERSONS WITH MENTAL ILLNESS OR SUBSTANCE ADDICTION

Incarcerated persons who are eligible for release and suffer from mental illness or substance addiction may be offered to stay in the facility for up to 16 additional hours or until normal business hours, whichever is shorter, in order for the incarcerated person to be discharged to a treatment center or be discharged during daylight hours. The incarcerated person may revoke the incarcerated person's consent and be released as soon as possible and practicable (Penal Code § 4024).

520.3.2 DISCHARGE OF INCARCERATED PERSONS CONVICTED OF FELONIES

Incarcerated persons who have been convicted of a felony and meet the conditions in Penal Code § 4852.01 shall be advised of the right to petition for certificate of rehabilitation and pardon prior to release. The Records Division shall inform the incarcerated person in writing of the incarcerated

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person's right to petition, and of the procedures for filing a petition and obtaining the certificate (Penal Code § 4852.21).

520.3.3 TRANSFERS TO IMMIGRATION AUTHORITIES

Members shall not transfer an individual to immigration authorities unless one of the following circumstances exist (Government Code § 7282.5; Government Code § 7284.6):

(a) Transfer is authorized by a judicial warrant or judicial probable cause determination

(b) The individual has been convicted of an offense as identified in Government Code § 7282.5(a)

(c) The individual is a current registrant on the California Sex and Arson registry

(d) The individual is identified by the U.S. Department of Homeland Security's Immigration and Customs Enforcement as the subject of an outstanding federal felony arrest warrant

520.3.4 DISCHARGE OF SEX OFFENDER REGISTRANTS

The Records Division shall inform the California Department of Justice when incarcerated persons required to register changes in address under Penal Code § 290.013 have been released from the jail within 15 days of release (Penal Code § 290.013).

520.3.5 ARRESTEE RELEASED FROM CUSTODY

Upon request, a detained arrestee released from custody shall be provided with the appropriate Judicial Council forms to petition the court to have the arrest and related records sealed (Penal Code § 851.91).

The jail shall display the required signage that complies with Penal Code § 851.91 advising an arrestee of the right to obtain the Judicial Council forms.

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Over-Detention and Inadvertent Releases

521.1 PURPOSE AND SCOPE

This policy is intended to provide guidance to staff and management to prevent and address over-detention or inadvertent release.

521.1.1 DEFINITIONS

Definitions related to this policy include:

Inadvertent release - Any instance of an incarcerated person being mistakenly released.

Over-detention - Any instance of an incarcerated person being mistakenly detained beyond their scheduled release date.

521.2 POLICY

It is the policy of this office to reasonably ensure that over-detention and inadvertent releases do not occur.

521.3 OVER-DETENTION

Any custody member who discovers or receives information of an over-detention, or a complaint from an incarcerated person regarding over-detention (which could be discovered through a grievance), should immediately notify the Shift Supervisor (see the Grievances Policy).

The Shift Supervisor should direct the jail records unit to immediately conduct an investigation to determine the correct release date of the incarcerated person and to report the findings to the Shift Supervisor.

Incarcerated persons who are found to be over-detained shall be processed for immediate release in accordance with the End of Term Release Policy. The Shift Supervisor shall ensure that the Captain is notified, an entry is made to the daily activity log, and that a report is completed.

521.3.1 OVER-DETENTION GRIEVANCES

Any custody member who receives information or a complaint from an incarcerated person regarding over-detention should assist the person with completing a grievance form and forward the form directly to the Shift Supervisor as soon as practicable.

The Shift Supervisor receiving a grievance regarding an over-detention should direct the jail records unit to immediately conduct an investigation to determine the correct release date of the incarcerated person and to report the findings to the Shift Supervisor.

If the Shift Supervisor decides not to release the incarcerated person, the Shift Supervisor should ensure the person receives a grievance hearing within 24 hours of the grievance submission. The hearing documentation should reflect efforts made to investigate the allegation (see the Grievances Policy).

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521.4 INADVERTENT RELEASE

Whenever an inadvertent release is discovered, the custody member making the discovery shall immediately notify the Shift Supervisor. The notification shall be documented in the daily activity log.

521.4.1 INADVERTENT RELEASE INVESTIGATION

The Shift Supervisor should direct the jail records unit to immediately conduct an investigation to determine the cause of the inadvertent release.

The Shift Supervisor will coordinate a response based upon the seriousness of the threat the incarcerated person may pose to the community. The threat assessment should be based upon the person's criminal history and the reason the person is currently in custody, among other factors.

In the case of an inadvertent release, the Shift Supervisor should immediately notify the Captain and ensure a report is completed. The Captain should notify the Sheriff.

An appropriate evaluation of the circumstances shall be made to determine whether the inadvertent release should be classified as an escape.

521.4.2 RETURNING THE INCARCERATED PERSON TO CUSTODY

When the incarcerated person is located and returned to the facility, the appropriate notifications should be made as soon as possible.

521.5 CORRECTIONAL CASE RECORDS COORDINATOR

The Sheriff or the authorized designee shall designate a Correctional Case Records Coordinator to establish procedures to conduct a biweekly review of the incarcerated person records and take immediate action if an incarcerated person lacks an upcoming court appearance or scheduled end-of-term release date. Procedures should involve timely communication with the relevant court or prosecutor's office to establish or verify accurate dates when necessary. Results of this process should be reported to the Sheriff and documented in the incarcerated person's file.

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Body Worn Cameras

522.1 PURPOSE AND SCOPE

The Tehama County Sheriff's Office has identified a need to equip sworn department members with body worn cameras (BWC) as part of its continuing effort to promote transparency, protect its members from frivolous claims and increase efficiency. This policy is intended to provide deputies with instructions and guidelines on when and how to use BWCs so contacts with the public can be recorded reliably and in accordance with the law. In the event of a conflict between any provision of this policy and a mandatory provision of any applicable law, the mandatory provision of the applicable law shall apply.

The use of a recording system complements Deputies in the performance of their duties by providing a digital record of enforcement and investigative field and corrections contacts. A recording of an event or contact also enables the delivery of timely, relevant and appropriate training to maximize safety for Deputies and improves the provision of services to the community. These recordings will also protect Deputies from false accusations and can be instrumental in resolving public complaints.

The video recordings captured by recording devices do not necessarily reflect the experience or state of mind of an individual Deputy in a given incident. Moreover, video recordings have limitations and may depict events differently than the events recalled by the involved Deputy. Specifically, it is understood that the BWC may capture information that may not have been heard and/or observed by the involved Deputy.

522.1.1 DEFINITIONS

Definitions related to this policy include:

A. **Activate -** Any process that causes the BWC system to transmit or store video or audio data in an active mode.

B. **BWC - Body Worn Camera System -** An acronym for body-worn camera, which is a camera worn on an individual member's person that records and/or stores audio and/or video.

C. **Digital Recording -** BWC files, including photographs, audio recordings and/or video footage, captured by a BWC and stored digitally.

D. **Docking Station -** A multi-ported docking station installed in the Tehama County Sheriff's Office facilities. The docking station simultaneously recharges the BWC while uploading all the data from the device. The docking station then transfers the data to the designated storage (physical or Cloud based storage).

E. **Metadata -** Complaint report numbers, Deputy information and other descriptors used to identify digital recordings.

F. **Evidentiary Data -** Data of an incident or encounter that could prove useful for investigative purposes including, but not limited to, a crime, a detention, an arrest,

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a citation, a search, a use-of-force incident, or a confrontational encounter with a citizen(s) or person in custody.

G. **System Administrator -** A designated supervisor assigned by the Sheriff to act s the BWC system administrator, with full access to user rights, who also sets user access parameters.

H. **Supervisor -** Employee of the Tehama County Sheriff's Office with a rank of at least Sergeant within the department.

I. **Deputy Sheriff -** A peace officer with the Tehama County Sheriff's Office.

522.2 POLICY

It is the policy of the Tehama County Sheriff's Office to use mobile audio and video technology to more effectively fullfill the department's mission and to ensure these systems are used securely and efficiently.

522.3 DEPUTY RESPONSIBILITIES

Deputies shall be aware of their surroundings when operation the BWC, and shall take privacy concerns into consideration, including inpatient care areas of medical facilities, hospitals, rape treatment centers, or other health care facilities where persons are receiving treatment. Deputies shall also demonstrate caution with regard to what the BWC video optic/lens is actively recording to ensure non-involved persons and documents that are confidential remain uncompromised, unless an enforcement action such as a crime in progress, criminal investigation, or anticipating an encounter with an uncooperative person is taking place. Recording should resume when privacy is no longer an issue unless circumstances no longer fit the criteria for recording.

Deputies should be authorized by the department to wear and/or use the BWC system. Each Deputy should be assigned an individual camera and storage account.

Deputies shall position the camera on their uniform to facilitate optimum recording field of view. Uniformed Deputies should wear the BWC in a conspicuous manner or otherwise notify people that they are being recorded, whenever possible. Any member assigned to a non-uniformed position may carry an approved portable recorder at any time the member believes that such a device may be useful. However, non-uniformed personnel should use and wear the BWC if engaged in pre-planned law enforcement activites such as serving a search warrant, or conducting a parole/ probation search. Unless conducting a lawful recording in an authorized undercover capacity, non-uniformed members should wear the recorder in a conspicuous manner when in use or otherwise notify person(s) they are being recorded.

Deputies will use the BWC issued and approved by the Tehama County Sheriff's Office for official law enforcement duties only. The wearing of any other personal video recorder for the same purpose is not authorized without permission from the Sheriff or an authorized designee.

Many portable recorders, including BWCs and audio/video tranmitters, emit radio waves that could trigger an explosive device. Therefore, these devices should not be used when an explosive device may be present.

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Deputies are not required to obtain consent from a private person to record when:

A. They are in a public place; and/or

B. They are in a location or dwelling where the deputy is lawfully present and engaged in the preformance of official duties.

522.4 ACTIVATION OF THE BWC

The BWC system is activated by the Deputy, as needed, using the following required activation guidelines.

522.4.1 Required Activation of BWC

This policy is not intended to describe every possible situation in which the BWC may be used, although there are many situations where its use is appropriate. Deputies may activate the system any time the Deputy believes it would be appropriate or valuable to document an incident or contact.

In some circumstances it is not possible to capture images of the incident due to conditions or the location of the camera and officer safety should not be compromised in an attempt to get better video or activate the BWC. However, the audio portion can be valuable evidence and is subject to the same activation requirements as the BWC system. The BWC system should be activated in the following situations:

A. Unless a specific exception applies, uniformed Deputies are required to activate the BWC prior to or in any of the following:

   1. All enforcement and investigative contacts
   2. All contacts specifically related to a call for service
   3. Any contact that becomes adversarial in nature
   4. All cell extractions

B. Unless a specific exception applies, non-uniformed Deputies are required to activate the BWC prior to or in any of the following:

   1. All pre-planned enforcement activity (e.g. search warrant service, suspect apprehensions, etc.)

C. Any other circumstance where the Deputy believes a recording of an incident would be appropriate and/or valuable to document an incident.

D. Deputies may terminate the recording after an encounter is completed

E. Deputies are encouraged to advise private person(s) they are recording if the advisement may gain compliance, assist in the investigation, and does not interfere with the investigation or Deputy safety.

522.4.2 Cessation Of Recording/Deactivation Of The BWC

Once activated, the BWC system should remain on continuously unless deactivated for one of the following reasons:

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A. The Deputies direct participation in the incident is complete, or the situation no longer fits the criteria for activation

B. In the event of an arrest, upon entering into the sally port at the jail or once the intake is completed

C. In the event of an extended event such as traffic control or an accident scene, to conserve recording time

D. The Deputy believes recording at a hospital or healthcare facility may compromise patient confidentiality. However, such recording may be appropriate if responding to an emergency, crime in progress, or other circumstance which takes precedence over elevated privacy concerns.

E. Interviewing a confidential informant for the purpose of intelligence gathering

F. The Deputy is exchanging or discussing administrative, tactical, or law enforcement sensitive information

G. The use of the BWC causes emotional distress to the victim of a crime, resulting in the refusal to provide a statement

H. Upon the lawful and proper order of a supervisor

When a deactivation occurs prior to the event having been concluded, the Deputy should orally document the reason(s) for deactivation while the BWC is still recording. If a Deputy is unable to orally document the reason(s) for deactivation when the deactivation occurs because such action would be unsafe or impractical, the Deputy may document the reason(s) in their report.

Members shall cease audio recording whenever necessary to ensure conversations are not recorded between a person in custody and the person's attorney, religious advisor or physician, unless there is explicit consent from all parties to the conversation.

522.4.3 When Activation Is Not Required/Exceptions To Recording

Activation of the BWC is not required when exchanging information with other Deputies or during breaks, meal periods, when not in service or actively on patrol or in the back of the jail during normal operations. Deputies should take due care to insure the BWC system is not actively recording in the Office or while at home for a break.

No member of this Department may surreptitiously record a conversation of any other member of this Department except with a court order or when lawfully authorized by the Sheriff or the authorized designee for the purpose of conducting a criminal or administrative investigation.

Deputies are not required to activate and record encounters with the public when:

A. Activation of the BWC is unsafe or impractical in that it jeopardizes the safety of an individual

B. Mechanical issues impede the activation of the BWC

C. A witness or victim refuses to provide a statement if recorded and the encounter is non-confrontational

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D. Recording would risk the safety of a confidential informant or investigative technique preserved (as authorized by California Evidence Code 1040, 1041, and 1042), citizen informant, or undercover Officer/Deputy/Agent

E. Recording will jeopardize the privacy of an individual in an inpatient care area of a medical facility, hospital, rape treatment center, or other healthcare facility where persons are receiving treatment. However, such recording may be appropriate if responding to an emergency, crime in progress, or other circumstance which takes precedence over elevated privacy concerns.

F. a recording would interfere with their ability to conduct an investigation due to sensitive circumstances (i.e. body cavity search, nudeness, a victim of rape, incest or other form of sexual assault)

G. Recording would jeopardize confidential discussions

H. Recording would jeopardize the tactics of the Tehama County Sheriff's Office or other responding agencies

522.4.4 System Administrator, Supervisor And Sworn Member Responsibilities

BWCs that do not operate properly should be returned to the docking station and notifications should be made to the System Administrator, who can make arrangements for repair or return of the device.

The System Administrator is designated by the Sheriff, as applicable. Oversight of the BWC system responsibilities include but are not limited to, the following:

A. Operation and user administration of the system

B. System evaluation

C. Training

D. Policy and procedure review and evaluation

E. Coordination with information technology (IT) regarding system-related issues

F. Securing and retaining files with evidentiary value, coordination with Evidence personnel and DA Office

G. Documenting system malfunctions and/or failures related to the BWC

Supervisors overseeing the use of BWCs shall be responsible for the following:

A. Ensure Deputies utilize the BWC according to policy

B. Ensure videos related to critical incidents are uploaded in a timely manner

C. Review recordings in order to develop intelligence, resolve public complaints or as directed by the Sheriff and/or their designee, as applicable

D. Monitor system effectiveness and make recommendations for operational improvements and policy revisions

Sworn members utilizing BWCs shall be responsible for the following:

A. Ensure BWCs are fully functional and operating properly prior to going into service

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B. Immediately report unresolved equipment malfunctions and/or problems to their supervisor

C. Properly store and secure the BWC when not in use

D. Continue to prepare reports in the same manner as prior to the implementation and use of the BWC system. Deputies should not substitute "refer to video" for detailed and thorough report

E. Tag or make videos taken with the correct case number or incident number and categorize each video that contains evidence with the proper crime or incident identifier

Violations

A. Deputies shall not intentionally use the BWC recording functions to record any personal conversation of or between another department member or Deputy without the recorded member/Deputies knowledge or permission. Penal Code section 632 prohibits any individual from surreptitiously recording any conversation in which any party to the conversation has a reasonable belief that the conversation was private or confidential. Penal Code section 633 provides an exception for law enforcement if the surreptitious recording occurs during the course of a criminal investigation. Accordingly, this prohibition does not apply to any criminal investigation involving sworn members of the department.

B. It shall be deemed a violation of this policy for a supervisor to review recordings for the sole purpose of searching for violations of policy or law where there is no prior indication, suspicion or notice of a complaint or incident that warrants such review

C. Personnel reviewing recordings should remain focused on the incident or incidents in question and review only those recordings relevant to their investigative scope. If improper conduct is discovered during any review of digital records, the person who discovered the conduct in question shall notify a supervisor as soon as practical

D. Minor infractions discovered during routine review of the recorded material should be viewed as training opportunities and not as routine disciplinary actions. Should the behavior or action be repetitive after being addressed by a supervisor, the appropriate disciplinary or corrective action should be pursued. Intentional failure to activate the device when required under this policy or the intentional termination of a recording in violation of this policy may be subject to disciplinary action

Task Force And Outside Agency Assignments

A. The Tehama County Sheriff's Office has employees who participate in outside agency assignments and task forces where the use of the BWC might conflict with the rules, regulations, policies or practices of the task force or outside agency. In some instances, the sue of the recording devices of any kind might be prohibited. Deputies will be notified of any conflicts prior to participating with outside agencies. Any discussions or agreements with outside agencies regarding the use of the BWC shall take place through the Sheriff or their designee.

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522.5 REVIEW OF BWC RECORDINGS

All recording media, recorded images and audio recordings are the property of the Department. Dissemination outside of the agency is strictly prohibited, expect to the permitted or required by law. Deputies shall have no expectation of privacy or ownership interest in the content of any BWC recording.

To prevent damage to, or alteration of, the original recorded media, it shall not be copied, viewed or otherwise inserted into any device not approved by the department BWC System Administrator forensic media staff. When reasonably possible, a copy of the original media shall be used for viewing (unless otherwise directed by the courts) to preserve the original media.

All access to the video management system (LensLock) is logged and subject to the audit provisions of this policy at any time. Access to the data from the system is permitted on a right to know/need to know basis. Employees authorized under this policy may review video according to the provisions of this policy.

Data captured by the BWC is not considered criminal offender record information (CORI), but it shall be treated in the same manner as CORI data.

Recordings may be reviewed in any of the following situations:

A. By the employee, of their own video, for use when preparing reports of statements, and prior to courtroom testimony or for courtroom presentation

B. By a supervisor investigating a specific act of conduct

C. By a supervisor to assess Deputy performance with cause, videos shall not be intentionally reviewed solely for the purpose of seeking discipline

D. By the System Administrator, or their designee, to assess proper functioning of the BWC systems

E. By department investigators who are participating in an official investigation, such as a personnel complaint, administrative inquiry or a criminal investigation

F. By sworn personnel who request to review recordings of another sworn personnel, upon approval of a supervisor, who requests to review recordings for a legitimate law enforcement purpose

G. By a Deputy who is captured on or referenced in the video or audio data and reviews and uses such data for any purpose relating to their employment

H. By court personnel through proper process or with permission of the Sheriff or the authorized designee

I. By the media through proper process or with permission of the Sheriff or the authorized designee, if a recording is to be released to a member of the media or public, as required by law, the Tehama County Sheriff's Office shall give the Deputy(ies) whose recording is being produced ample notice of the release of the recording.

J. To assess possible training values

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1. BWC files may be utilized as a training tool for individuals, specific units, and the Tehama County Sheriff's Office as a whole. A recommendation to utilize a file for such a purpose may come from any source. A person recommending utilization of BWC files for training purposes shall submit the recommendation through the chain of command to the Sheriff or their designee. The Sheriff or designee shall make the final determination regarding the utilization of the BWC for training purposes. If a file is to be used for training, the involved Deputy(ies) shall be notified prior to the use of any video for training. If the involved deputy(ies) objects to the showing of a recording, the objection shall be submitted to the Sheriff, to determine if the training value outweighs the objection for not showing the recording. The Sheriff's decision is final

K. Recordings may be shown for training purposes. If an involved Deputy objects to showing a recording, their objection will be submitted to the Administrative Staff to determine if the training value outweighs the Deputy's objection

L. Pursuant to lawful process, by those who are authorized to review evidence in a related case

M. By field training personnel or corrections training personnel for the purpose of reviewing a Deputies performance while their enployment is classified as probationary

N. In no event shall any recording be used or shown for the purpose of ridiculing, for harassing or embarrassing any employee

Employees desiring to view any previously uploaded or archived BWC system recording should submit a request in writing to the Shift Supervisor. Approved requests should be forwarded to the BWC System Administrator for processing.

When safe and practical, an on-scene supervisor may retrieve the BWC from an involved Deputy at the scene of the critical incident. In such cases, the supervisor shall be responsible for ensuring the BWC is docked and uploaded into the system and provide the involved Deputy with a replacement BWC.

Following a time sensitive critical incident (such as an officer involved shooting, in custody death, or the serious injury or death of a sworn member of the agency), a video may only be viewed prior to being uploaded into the docking station when exigent circumstances occur, such as a Deputy being injured and to obtain identifying suspect information or other pertinent information. This does not prevent BWC users from viewing video on the LensLock app attached to a cellular phone.

It is not the intent of the Tehama County Sheriff's Office to review digital records for the purpose of general performance review, for routine preparation of performance reports, or to discover policy violations. However, the Sheriff' Office has discretion to reference and/or utilize BWC recordings within performance reports or as a basis for corroborating policy violations.

For the purpose of ensuring law enforcement incidents are being recorded per this policy, a supervisor or administrator has the ability to periodically audit the system to determine usage. Access to the BWC files, deletion of files, sharing and redaction of files will be documented via

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an audit trail. The audit trail shall be maintained per county document retention guidelines, but a minimum of 5 years.

522.6 DOCUMENTING BWC USE

If any incident is recorded with either the video or audio system, the existence of that recording shall be documented in the Deputy's report. If a citation is issued, the Deputy shall make a notation on the back of the Records copy of the citation, indicating that the incident was recorded. Deputies should document any instance where the recorder malfunctioned or the member deactivated the recording. Deputies should include the reason for deactivation.

Unauthorized use of the equipment:

A. Unauthorized use, duplication, and/or distribution of video files for any purpose is prohibited

B. Providing or receiving unauthorized access to video files, either through the provision of passwords or viewing video files in person, is prohibited

C. Employees are prohibited from using a recording device such as a phone camera or secondary video camera as an alternative to the BWC equipment provided by the Tehama County Sheriff's Office. However, this does not preclude the use of other department issued equipment, with the prior approval of a supervisor, for specific investigation purposes

D. The BWC shall not be used to record non-work related activity

E. Sworn department members shall not remove, dismantle or tamper with any hardware and/or software component or part of the BWC system

522.7 RECORDING MEDIA STORAGE AND INTEGRITY

Once submitted for evidence, all physical recording media will be labeled and stored in Evidence. All recording media that is not booked as evidence and only stored on the Cloud will be retained for the minimum storage time assigned to each video category, after which time it will be erased, destroyed or recycled in accordance with the established records retention schedule (Government Code 34090.6).

Deputies shall:

A. When assigned, note the complaint or case report number in the video information section of the video file

B. Enter a title. The title should include sufficient information to identify the file, such as a crime code, suspect name, location, event, etc.

C. Select the appropriate category.

D. The information may be entered by hand held device (LensLock app) or department computer work station.

E. All sworn members should dock the BWC for automatic upload of data files daily at the end of their shift at the docking stations provided to ensure storage capacity is not exceeded on the device and/or to view uploaded audio/video files. In the event the

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Deputy is unable to return to the office prior to the end of shift, the BWC should be docked at the start of the shift to upload the data.

F. Recordings related to criminal charges shall be treated the same as other forms of direct evidence which must be provided to the prosecution and are subject to discovery and disclosure in accordance with law. Prosecuting agencies shall be made aware of the existence of recordings when they pertain to any criminal case so they can comply with their discovery obligations.

522.7.1 Copies Of Original Recording Media

Original recording media shall not be used for any purpose other than for initial review by a supervisor. Upon proper request, a copy of the original recording media will be made for use as authorized in this policy.

Original recording media may only be released in response to a court order or upon approval of the Sheriff or the authorized designee. In the event that the original recording is released to a court, a copy shall be made and placed in storage until the original is returned.

522.7.2 BWC Recordings as Evidence

Deputies who reasonably believe that a BWC recording is likely to contain evidence relevant to a criminal offense, potential claim against the Deputy or against the Tehama County Sheriff's Office should indicate this in an appropriate report. Deputies should ensure relevant recordings are preserved by placing a copy of the video into evidence as well as in the LensLock software. The Tehama County Sheriff's Office, in its discretion, may retain any video media for any period of time exceeding the minimum periods.

The following encounter types list a retention duration preset in the LensLock software as examples:

A. Agency Assist (2 years)

B. Arrest, Felony (5 years)

C. Arrest, Misdemeanor (3 years)

D. Citizen Contact (2 years)

E. DUI (5 years)

F. Error/Test (180 days)

G. Homicide (indefinitely)

H. Interview (2 years)

I. Miscellaneous (1 year)

J. OIS - Deadly Use Of Force (indefinitely)

K. Pursuit (5 years)

L. Traffic Stop - Warning (180 days)

M. Traffic Stop - Citation (2 years)

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N. Training (1 year)

O. Use Of Force (10 years)

P. No Encounter Type Listed (180 days)

BWC evidence may be shared with the District Attorney's Office upon request of the prosecuting attorney. The Deputy or designated personnel can provide the digital link to the video for the prosecuting attorney to review through the LensLock application. Physical digital copies may be provided at the District Attorney's Office official request for review or prosecution of a case.

Other than as provided in this policy, no member of the Tehama County Sheriff's Office shall download any video from the BWC/LensLock system onto any computer, device, drive, CD, DVD, or any other format without the express consent of the Sheriff or their designee.

Investigators conducting criminal or internal investigations shall:

A. Advise the System Administrator to restrict access to recordings to 1) a sworn member being criminally investigated for matters related to or contained in the recording and/ or 2) public disclosure of the file in criminal or internal investigations, when deemed necessary by the investigator.

B. Document the reason for access by entering the related case report or internal affairs case number in the field prior to viewing

C. Review the file to determined whether the file is of evidentiary value and process in accordance with established procedures

D. Investigators shall notify the System Administrator to remove the access restriction when the investigation is closed

522.8 BWC SYSTEM MAINTENANCE STANDARDS

Deputies shall immediately report any recognized problems with the BWC to their immediate supervisor. Upon notification, the immediate supervisor shall notify the System Administrator by email or telephone of the problem or malfunction. The System Administrator or designee shall report unresolved deficiencies to the LensLock customer service team.

No maintenance other than charging, switching body mounts, downloading/uploading, routine wiping or dusting of debris from the BWC shall be preformed unless authorized by the System Administrator or designee.

Deputies shall immediately report a lost BWC to their supervisor and to the BWC System Administrator. Deputies shall complete a lost property information report and contact the BWC System Administrator to obtain a replacement BWC.

522.9 BWC EVIDENCE TECHNICIAN RESPONSIBILITIES

The BWC Evidence Technician is responsible for:

A. Ordering, issuing, retrieving, storing, erasing and duplicating of all recorded media per the retention policy.

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B. Collecting all completed media for oversight and verification of wireless download of media. Once collected, the Evidence Technician

1. Ensures it is stored in a secure location with authorized control access
2. Makes the appropriate entries in the chain of custody log

C. Erasing of media:

1. Pursuant to a court order
2. In accordance with established records retention policies, including erasing and reissuing all other recording media deemed to be of no evidentiary value

D. Ensuring that an adequate supply of physical recording media is available

E. Managing the long term storage of media that has been deemed to be of evidentiary value in accordance with the department evidence storage protocols and the records retention schedule.

522.10 TRAINING

The Tehama County Sheriff's Office should provide training in the use of the BWC prior to deployment in the field. The training should include:

A. Training on the operation (including when to activate and deactivate), downloading, maintenance and care

B. Training on mandatory, discretionary and non-permissible use of the BWC

C. Training on law pertaining to BWC

D. Training as necessary to ensure continued effective use of BWC equipment, performance, and to incorporate changes, updates, and significant change to the law or other revisions in policies and equipment

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Chapter 6 - Inmate Due Process

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Discipline

600.1 PURPOSE AND SCOPE

This policy addresses the fair and equitable application of incarcerated person rules and disciplinary actions for those who fail to comply (15 CCR 1081).

600.2 POLICY

It is the policy of this office to maintain written general categories of prohibited incarcerated person behavior that are clear, consistent, and uniformly applied. Written rules and guidelines will be made available to all incarcerated persons. They will include a process for resolving minor infractions and a hearing process for a more serious breach of incarcerated person rules. Criminal acts may be referred to the appropriate criminal agency.

600.3 DUE PROCESS

Incarcerated persons who are subject to discipline as a result of rule violations shall be afforded the procedural due process by the Sheriff that is established in the policies, procedures, and practices relating to incarcerated person discipline. All incarcerated persons will be made aware of the rules of conduct related to maintaining facility safety, security, and order, as well as clearly defined actions for rule violations. Staff will not engage in arbitrary actions against incarcerated persons. All disciplinary actions will follow clearly established procedures. All disciplinary actions will be fairly and consistently applied (15 CCR 1081 et seq.).

The process for an incarcerated person accused of a major rule violation includes:

(a) A fair hearing in which the Captain or the authorized designee presents factual evidence supporting the rule violation and the disciplinary action.

(b) Advance notice to the incarcerated person of the disciplinary hearing, to allow the incarcerated person time to prepare a defense.

(c) An impartial hearing officer.

(d) The limited right to call witnesses and/or present evidence on the person's behalf.

(e) The appointment of an assistant or representative in cases where the incarcerated person may be incapable of self-representation.

(f) A formal written decision that shows the evidence used by the hearing officer, the reasons for any actions, and an explanation of the appeal process.

(g) Reasonable actions for violating rules that relate to the severity of the violation.

(h) The opportunity to appeal the finding.

600.3.1 RULES AND ACTIONS

The Captain is responsible for ensuring that rules and actions are developed, distributed, reviewed annually, and revised as needed.

Incarcerated persons cannot be held accountable for rules of which they are unaware. However, it is impossible to define every possible prohibited act or rule violation that might be encountered in

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a detention facility. Therefore, a current list of recognized infractions that are generally prohibited should be available in each housing unit. All incarcerated persons, regardless of their housing unit, shall have access to these rules. For those individuals with limited literacy, unable to read English, and for persons with disabilities, provisions shall be made for staff to instruct them verbally or provide them with material in an understandable form (15 CCR 1080) (see the Handbook and Orientation Policy).

Disciplinary procedures governing incarcerated person rule violations should address rules, minor and major violations, criminal offenses, disciplinary reports, prehearing detention, and prehearing actions or investigations.

600.3.2 RULE VIOLATION REPORTS

California Penal Code § 4019.5 requires that all disciplinary actions administered be documented. This requirement may be satisfied by retaining copies of rule violation reports, including the disposition of each violation (15 CCR 1084). Rule violation reports are required for major rule violations or any other violation that will require investigation or a formal resolution. The staff member who observed or detected the rule violation or who was charged with investigating a rule violation is responsible for completing the rule violation report. The rule violation report shall include, at a minimum:

- The date, time, and location of the incident.
- Specific rules violated.
- A written description of the incident.
- The identity of known participants in the incident.
- Identity of any witnesses to the incident.
- Description and disposition of any physical evidence.
- Action taken by staff, including any use of force.
- Name and signature of the reporting correctional officer.
- Date and time of the report.

The supervisor investigating the violation shall ensure that certain items are documented in the investigation or rule violation report, including:

- Date and time the explanation and the written copy of the complaint and appeal process was provided to the incarcerated person.
- The incarcerated person's response to the charges.
- Reasons for any actions.
- The identity of any staff or witnesses involved, as revealed by the incarcerated person.
- The findings of the hearing officer.
- The incarcerated person's appeal, if any.

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- The appeal findings, if applicable.

600.3.3 POSTING

The Captain or the authorized designee is responsible for conspicuously posting notices about rules, disciplinary procedures, and actions in a conspicuous location, as set forth in 15 CCR 1080.

600.4 RULE VIOLATION PROCEDURES

Minor acts of non-conformance to the rules may be handled informally by any correctional officer (15 CCR 1081).

A violation of rules observed by general service employees, volunteers, or contractors will be reported to a correctional officer for further action. Correctional officers are authorized to recommend informal actions on minor violations.

Any staff member imposing informal discipline shall complete the reporting portion of the disciplinary report and provide the form to the supervisor for review prior to the imposition of the action.

Disciplinary actions that may be imposed for minor rule violations include (15 CCR 1081):

- Counseling the incarcerated person regarding expected conduct.
- Assignment to extra work detail.
- Removal from work detail (without losing work time credits).
- Loss of television, telephone, and/or commissary privileges for a period not to exceed 24 hours.
- Lockdown in the incarcerated person's assigned cell or confinement in the incarcerated person's bunk area for a period not to exceed 24 hours.

An incarcerated person may request that a supervisor review the imposed action. However, this request must be made within one hour of receiving notice of the action. The supervisor should respond to the request within a reasonable time (generally within two hours) and shall have final authority as to the imposition of informal discipline.

600.4.1 MULTIPLE MINOR RULE VIOLATIONS

Staff may initiate a major rule violation report if an incarcerated person is charged with three or more minor rule violations in a consecutive 30-day period. Copies of all minor rule violations will be attached to the major rule violation report. A staff member shall conduct a hearing according to the procedures of a major rule violation.

600.4.2 MAJOR RULE VIOLATIONS

Major rule violations are considered a threat to the safety, security, or efficiency of the facility, its staff members, incarcerated persons, or visitors. Staff members witnessing or becoming aware of a major rule violation shall take immediate steps to stabilize and manage the situation, including immediate notification of a supervisor. The supervisor shall assess the situation and initiate any emergency action, if necessary, and notify the Shift Supervisor.

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The staff member who learned of the rule violation shall write and submit a disciplinary report, along with all relevant evidence, to the appropriate supervisor prior to the end of the shift (15 CCR 1081).

600.4.3 PREHEARING DETENTION

Incarcerated persons who are accused of a major rule violation may be moved to administrative restrictive housing for prehearing detention, with the Shift Supervisor's approval, if there is a threat to safety or security. Incarcerated persons placed in prehearing detention are subject to the property and privilege restrictions commensurate with separated confinement (15 CCR 1081).

The Captain or the authorized designee shall, within 72 hours including weekends and holidays, review the status of any incarcerated person in prehearing detention to determine whether continued prehearing restrictive housing is appropriate.

600.5 INVESTIGATIONS

Investigations involving major rule violations should be initiated within 24 hours of the initial report and completed in sufficient time for the incarcerated person to have a disciplinary hearing, which is required within 72 hours of the time the incarcerated person was informed, in writing, of the charges. If additional time is needed, the investigating supervisor will request more time in writing from the Shift Supervisor. The incarcerated person will be notified in writing of the delay.

If upon completion of the investigation, the investigating supervisor finds insufficient evidence to support a major rule violation, the supervisor may discuss alternative actions with the Shift Supervisor, including handling the incident as a minor violation or recommending that charges be removed. Such alternatives shall be documented in the incarcerated person's file.

If the investigating supervisor determines that sufficient evidence exists to support a major rule violation, the supervisor will act as the hearing coordinator and will be responsible for:

- Reviewing all reports for accuracy and completeness.
- Overseeing or conducting any required additional investigation.
- Making a determination as to the final charges.
- Making preliminary decisions about the appointment of a staff member to act as an assistant to the incarcerated person.
- Identifying any witnesses that may be called to the hearing.

600.6 NOTIFICATIONS

An incarcerated person charged with a major rule violation shall be given a written description of the incident and the rules violated at least 24 hours prior to a disciplinary hearing.

Unless waived in writing by the incarcerated person, hearings may not be held in less than 24 hours from the time of notification (15 CCR 1081).

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600.7 HEARING OFFICER

The Captain shall appoint at least one hearing officer to preside and conduct disciplinary hearings of major rule violations. The hearing officer should be a qualified supervisor or suitably trained designee who will have the responsibility and authority to rule on charges of incarcerated person rule violations. The hearing officer shall also have the power to impose actions. The hearing officer shall not investigate nor preside over any incarcerated person disciplinary hearing on cases where the hearing officer was a witness or was directly involved in the incident that generated the complaint (15 CCR 1081).

600.8 HEARING PROCEDURE

Incarcerated persons charged with major rule violations are entitled to be present at a hearing unless waived in writing or excluded because their behavior poses a threat to facility safety, security, and order (15 CCR 1081). Staff shall inform the hearing officer when any incarcerated person is excluded or removed from a scheduled hearing and shall document the reasons for the exclusion or removal. A copy of the report shall be forwarded to the Captain.

Hearings may be postponed or continued for a reasonable period of time for good cause. Reasons for postponement or continuance shall be documented and forwarded to the Captain (15 CCR 1081).

The hearing officer shall disclose to the accused incarcerated person all witnesses who will be participating in the hearing. Incarcerated persons have no right to cross-examine witnesses. However, the accused incarcerated person may be permitted to suggest questions that the hearing officer, in the hearing officer's discretion, may ask.

600.8.1 EVIDENCE

Accused incarcerated persons have the right to make a statement, present evidence, and call witnesses at the hearing (15 CCR 1081). Requests for witnesses shall be submitted in writing by the incarcerated person no later than 12 hours before the scheduled start of the hearing. The written request must include a brief summary of what the witness is expected to say.

The hearing officer may deny the request when it is determined that allowing the witness to testify would be unduly hazardous to institutional safety or correctional goals, when the witness's information would not be relevant or would be unnecessarily duplicative, or is otherwise unnecessary. The reason for denying a witness to testify shall be documented in the hearing report. The reason for denial of any documents requested by the incarcerated person shall also be documented in the hearing record.

A witness's signed written statement may be submitted by the incarcerated person as an alternative to a live appearance. The hearing officer shall review and determine whether the statement is relevant to the charges and shall document the reason for exclusion when any written statement is not given consideration.

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Absent a safety or security concern, all staff reports and evidence, including exculpatory evidence, obtained during the disciplinary investigation shall be made available to the accused incarcerated person prior to the hearing.

600.8.2 CONFIDENTIAL INFORMANTS

If information from any confidential informant is to be presented at the hearing, information establishing the reliability and credibility of the informant shall be provided to the hearing officer prior to the hearing. The hearing officer shall review such information to determine whether the informant is reliable and credible.

600.8.3 STAFF ASSISTANCE

A staff member shall be assigned to assist an incarcerated person who is incapable of self-representation at a disciplinary hearing due to limited literacy, developmental disabilities, language barriers, or mental status (15 CCR 1081). The scope of the duties of the assistant shall be commensurate with the reasons for the appointment. The assistant should be allowed sufficient time to confer with the incarcerated person to fulfill the individual's obligations. In these cases, the incarcerated person does not have a right to appoint a person to assist in the individual's disciplinary hearing. The final decision regarding the appointment rests with the hearing officer.

Incarcerated person discipline is an administrative and not a judicial process. Incarcerated persons do not have a right to an attorney in any disciplinary hearing. Additionally, disciplinary matters may be referred for criminal prosecution and jail disciplinary action concurrently as there is no double jeopardy defense for an administrative process.

600.8.4 DISCIPLINARY DECISIONS

Disciplinary decisions shall be based on the preponderance of evidence presented during the disciplinary hearing.

The disciplinary process shall consider whether an incarcerated person's mental disabilities or mental illness contributed to the incarcerated person's behavior when determining what type of discipline, if any, should be imposed (28 CFR 115.78(c)).

600.8.5 REPORT OF FINDINGS

The hearing officer shall write a report regarding the decision and detailing the evidence and the reasons for the disciplinary action. A copy of the report shall be provided to the incarcerated person. The original shall be filed with the record of the proceedings. All documentation related to the disciplinary process shall be retained and a copy should be placed in the incarcerated person's file (15 CCR 1081).

If it is determined that the incarcerated person's charge is not sustained at the end of the disciplinary hearing, the documentation shall be removed from the incarcerated person's file but otherwise maintained in accordance with records retention requirements.

All disciplinary hearing reports and dispositions shall be reviewed by the Captain or the authorized designee soon after the final disposition (15 CCR 1081).

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600.9 DISCIPLINARY APPEALS

Incarcerated persons wishing to appeal the decision of the hearing officer must do so in writing within five days of the decision. All appeals will be forwarded to the Captain or the authorized designee for review (15 CCR 1081).

Only appeals based on the following will be considered:

(a) The disciplinary process or procedures were not followed.

(b) There was insufficient evidence to support the hearing officer's decision.

(c) The discipline imposed was not proportionate to the violation committed.

A final disposition shall be rendered as soon as possible if the incarcerated person's appeal is granted or discipline is reduced but no later than 10 days after the appeal. The decision of the review authority shall be final and the result of the appeal shall be provided to the incarcerated person in writing.

600.10 LIMITATIONS ON DISCIPLINARY ACTIONS

The U.S. and state constitutions expressly prohibit all cruel or unusual punishment, disciplinary actions shall not include corporate punishment, group punishment when feasible, or physical or psychological degradation (15 CCR 1083). Additionally, there shall be the following limitations:

- Disciplinary separation shall be considered an option of last resort and as a response to the most serious and threatening behavior, for the shortest time possible, and with the least restrictive conditions possible (15 CCR 1083).
- In no case shall any incarcerated person or group of incarcerated persons be delegated the authority to punish any other incarcerated person or group of incarcerated persons (Penal Code § 4019.5; 15 CCR 1083).
- In no case shall a safety cell, as specified in the Safety and Sobering Cells Policy, be used for disciplinary purposes (15 CCR 1083).
- In no case shall any restraint device be used for disciplinary purposes (15 CCR 1083).
- Food shall not be withheld as a disciplinary measure (15 CCR 1083).
- Correspondence privileges shall not be withheld except in cases where the incarcerated person has violated correspondence regulations, in which case correspondence other than legal mail may be suspended for no longer than 72 hours without the review and approval of the Captain (15 CCR 1083).
- In no case shall access to the courts and/or legal counsel be suspended as a disciplinary measure (15 CCR 1083).
- No incarcerated person may be deprived of the implements necessary to maintain an acceptable level of personal hygiene (15 CCR 1083; 15 CCR 1265).
- Discipline may be imposed for sexual activity between incarcerated persons. However, such activity shall not be considered sexual abuse for purposes of discipline unless the activity was coerced (28 CFR 115.78(g)).

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- No discipline may be imposed for sexual contact with staff unless there is a finding that the staff member did not consent to such contact (28 CFR 115.78(e)).
- No incarcerated person may be disciplined for falsely reporting sexual abuse or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation, if the report was made in good faith based upon a reasonable belief that the alleged conduct occurred (28 CFR 115.78(f)).

600.11 GUIDELINES FOR DISCIPLINARY ACTIONS

Discipline shall be commensurate with the nature and circumstances of the offense committed, the incarcerated person's disciplinary history, and the actions imposed for comparable offenses by other incarcerated persons with similar histories (28 CFR 115.78(b); 15 CCR 1082).

In all cases, actions should be imposed for the purpose of controlling or changing an incarcerated person's behavior, promotion of desired behavior through a progressive disciplinary process, and not for the purpose of punishment (15 CCR 1082).

Acceptable forms of discipline shall consist of but not be limited to the following (15 CCR 1082):

- Loss of privileges
- Extra work detail
- Short-term lockdown for less than 24 hours
- Removal from work details
- Forfeiture of work time credits earned under Penal Code § 4019
- Forfeiture of good time credits earned under Penal Code § 4019
- Disciplinary detention

The Sheriff or the Captain shall be responsible for developing and implementing a range of disciplinary actions for violations.

Incarceratedpersons shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the incarcerated person engaged in incarcerated person-on-incarcerated person sexual abuse or following a criminal finding of guilt for incarcerated person-on-incarcerated person sexual abuse (28 CFR 115.78(a)).

To the extent that there is available therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse, the facility shall consider whether to require an incarcerated person being disciplined for sexual abuse to participate in such interventions as a condition of access to programming or other benefits (28 CFR 115.78(d)).

600.12 TRAINING

The Captain or the authorized designee is responsible for ensuring that a wide range of training and disciplinary tools are available to aid staff and that preprinted forms are available for documenting rule violations in a consistent and thorough manner.

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The Training Manager is responsible for developing and delivering, or procuring, training for staff members who participate in the disciplinary hearing process. Training topics should include the legal significance of due process protections and the hearing officer’s role in assuring that those protections are provided.

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Disciplinary Separation

601.1 PURPOSE AND SCOPE

This policy specifically addresses disciplinary separation and guiding principles relating to the conditions attached to that separation. It will provide guidance to the staff on acceptable practices with regard to management of incarcerated persons in disciplinary separation or classified as requiring special management needs.

601.1.1 DEFINITIONS

Definitions related to this policy include:

Disciplinary separation - A status assigned to an incarcerated person after a disciplinary hearing in which the person was found to be in violation of a jail rule or state or federal law. This status results in separating the person from the rest of the incarcerated person population to serve the consequence imposed.

601.2 POLICY

The Tehama County Sheriff's Office will maintain a disciplinary separation unit to house incarcerated persons who, after an impartial due process hearing, are receiving disciplinary actions for violating one or more jail rules. Restrictions on privileges will be subject to the disciplinary process and in accordance with this policy.

601.3 DISCIPLINARY SEPARATION

Incarcerated persons may be placed into disciplinary separation only after an impartial hearing to determine the facts of the rule violation, in accordance with the office Discipline Policy. The hearing officer shall impose discipline in accordance with the discipline schedule established by the Captain. Maximum disciplinary actions for any one incident, regardless of the number of rules violated, shall not exceed 60 days.

Disciplinary separation in excess of 30 days shall be reviewed by the Captain before the discipline is imposed. The review shall include a consultation with health care staff. Such reviews shall continue at least every 15 days thereafter until the disciplinary status has ended. These reviews shall be documented (15 CCR 1082(g); 15 CCR 1083(a)).

601.4 ACCESS TO SERVICES

The ability to discipline incarcerated persons for conduct violations is not absolute. Absent legitimate government reasons, incarcerated persons continue to have a right to receive certain services. However, incarcerated persons in disciplinary separation, in accordance with the Discipline Policy, or special management incarcerated persons who are disciplined for one or more rule violations, may be subject to loss of privileges or credit for good time and work time.

Services to provide for basic human needs must continue to be made available. There are minimum service requirements that must be maintained to ensure the facility continues to operate in a constitutional manner. All custody staff will adhere to the following policy sections to guide

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them in the supervision of incarcerated persons held in disciplinary separation or classified as requiring special management needs.

601.4.1 MEDICATION, CLOTHING, AND PERSONAL ITEMS

Incarcerated persons placed in disciplinary separation are considered special management incarcerated persons and shall not be denied prescribed medication.

Special management incarcerated persons will be provided with clothing that identifies their status, but in no case will this clothing be used to intentionally disgrace the incarcerated person.

Absent unusual circumstances, special management incarcerated persons will continue to have the same access to personal items in their cell as general population incarcerated persons have, including the following:

- Clean laundry
- Barbering and hair care services
- Clothing exchanges
- Bedding and linen exchanges

Incarcerated persons in disciplinary separation shall not be deprived of bedding or clothing except in cases where the incarcerated person destroys such articles or uses them to attempt suicide (15 CCR 1083(a)(2)). The decision to continue to deprive the incarcerated person of these articles must be made by the Captain or the authorized designee and reviewed every 24 hours.

601.4.2 SHOWERING AND PERSONAL HYGIENE

Incarcerated persons in disciplinary separation should be allowed to shower with the same frequency as the general population, if reasonably practicable, but at a minimum shall be afforded the opportunity to shower at least every other day and shave daily (15 CCR 1083(d)). The opportunities for each incarcerated person to shave and shower will be documented on the disciplinary separation unit log.

Exceptions to this policy can only be made when the restriction is determined to be reasonably necessary for legitimate government purposes. Any exceptions to this basic requirement must be reviewed and approved by the Shift Supervisor. The circumstances necessitating a restriction must be clearly documented on the unit log.

601.4.3 DENIAL OF AUTHORIZED ITEMS OR ACTIVITIES

Personal items may be withheld when it reasonably appears that the items will be destroyed by the incarcerated person or it is reasonably believed that the personal item will be used for a self-inflicted injury or to harm others.

Whenever an incarcerated person in disciplinary separation is denied personal care items or activities that are usually authorized to the general population incarcerated persons, except for restrictions imposed as a result of a disciplinary hearing, the correctional officer taking such action shall prepare a report describing the circumstances that necessitated the need to restrict personal

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items or activities. The report shall be submitted to a supervisor for review, who will then forward it to the Captain. A copy of the report shall be placed in the incarcerated person's file.

601.4.4 MAIL AND CORRESPONDENCE

Incarcerated persons in disciplinary separation shall have the same privileges to write and receive correspondence as incarcerated persons in general population, except in cases where incarcerated persons violated correspondence regulations. In such cases, mail privilege may be suspended. The Captain or the authorized designee shall approve all mail privilege suspensions that exceed 72 hours. Legal mail shall not be suspended from delivery to the incarcerated person (15 CCR 1083(f)).

601.4.5 VISITATION

Incarcerated persons in disciplinary separation shall have the same opportunities for visitation as general population incarcerated persons, except when the visitation privileges are suspended pursuant to an action imposed by the disciplinary hearing officer. Disciplinary actions that limit or curtail visitation must be clearly documented and approved by a supervisor if not a condition of the original approved discipline.

601.4.6 READING AND LEGAL MATERIALS

Incarcerated persons in disciplinary separation shall have the same access to reading materials and legal materials as the general population incarcerated persons, unless the restriction is directed by a court of law or there is a reasonable basis to believe the materials will be used for illegal purposes or pose a direct threat to the security and safety of the facility. In such cases the basis for the action shall be documented in the incarcerated person's file and unit log. Access to courts and legal counsel shall not be suspended as a disciplinary measure (15 CCR 1083(g)).

601.4.7 EXERCISE

Incarcerated persons in disciplinary separation shall be given a minimum of three hours of exercise per week outside of their cell. Exceptions to this may occur if there are legitimate security or safety considerations. The circumstances relating to the limitation of exercise shall be documented in an incident report. The report shall be reviewed and the restriction shall be approved by a supervisor.

601.4.8 LIMITED TELEPHONE PRIVILEGES

Incarcerated persons in disciplinary separation may have their telephone privilege restricted or denied. Exceptions include the following:

(a) Making legal calls

(b) Responding to verified family emergencies, when approved by the sergeant or Captain

All telephone access based on the above exceptions shall be documented on the unit log.

601.4.9 BEDDING AND CLOTHING

Incarcerated persons in disciplinary separation shall not be deprived of bedding or clothing except in cases where theperson destroys such articles or uses them for self-harm or to harm others

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or for something other than the intended purpose. Clothing and bedding shall be returned to the incarcerated person as soon as it is reasonable to believe the behavior that caused the action will not continue. The decision to continue to deprive the incarcerated person of these articles must be made by the Captain or the authorized designee and reviewed at least every eight hours. This review shall be documented and placed into the incarcerated person's file.

601.5 DIET

Under no circumstances will an incarcerated person be denied food as a means of punishment (15 CCR 1083(e)).

601.6 INITIAL EVALUATION OF INMATES UPON PLACEMENT

After notification from staff that an inmate is being placed in segregation, the Shift Supervisor shall ensure that the following occurs:

(a) A qualified health care professional shall review the inmate’s health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.

(b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Shift Supervisor and coordinate the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

601.7 MENTAL HEALTH

Due to the possibility of self-inflicted injury and depression during periods of separation, health evaluations should include notations of any bruises and other trauma markings, and the qualified health care professional's comments regarding the incarcerated person's attitude and outlook.

(a) A qualified health care professional should visit each incarcerated person a minimum of once a day and more often if needed. A medical assessment should be documented in the incarcerated person's medical file.

(b) Mental health staff or a qualified mental health professional should also conduct weekly rounds.

If after placement in separation, mental health or medical staff determine an incarcerated person to have a serious mental illness or an intellectual disability, the person shall be removed from disciplinary separation immediately upon this determination (15 CCR 1083(a)).

Where reasonably practicable, a qualified health care professional should provide screening for suicide risk following admission to the separation unit.

601.8 SAFETY CHECKS

A staff member shall conduct a face-to-face safety check of all disciplinary separation incarcerated persons at least every 60 minutes on an irregular schedule. If an incarcerated person is violent, has mental health problems, or demonstrates unusual behavior, the face-to-face check by custody should occur every 15 minutes on an irregular schedule.

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Incarcerated persons who are at risk of suicide shall be under continuous observation until seen by a qualified health care professional. Subsequent supervision routines should be in accordance with orders provided by the qualified health care professional.

Disciplinary separation incarcerated persons shall receive increased monitoring to include at a minimum:

(a) A visit by the Shift Supervisor once a day.

(b) Visits by program staff, upon request.

(c) Visits by a qualified health care professional a minimum of once a day and more often, if needed.

All management, program staff, and qualified health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

601.8.1 DOCUMENTATION OF SEPARATION CHECKS

Separation rounds shall be documented on door cards, logs, and/or rounds forms, and include the following:

(a) Date and time of contact

(b) Signature or initials of the qualified health care professional making rounds

(c) Any needed referrals

(d) All significant findings and observations, medical assessment, treatment, recommendations, notifications, and actions, all of which should be documented in the incarcerated person's health record

601.9 LOG PROCEDURES

All management, program staff, and qualified health care professional visits shall be documented on the appropriate records and logs and retained in accordance with established records retention schedules.

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry.

Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

(a) Incarcerated person's name

(b) Incarcerated person's booking number

(c) Housing location

(d) Classification status

(e) Date and time placed in separation

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(f) Date and time of entry and exit from the cell

(g) Violation and length of discipline

(h) Scheduled date of removal from separation

(i) Medical, psychological, or behavioral considerations

(j) Counseling for behavior

(k) Date and time of removal from separation

Log entries should be legible, be entered promptly, and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At a minimum, supervisors should enter the date and time of each review.

All safety checks will be documented in detail and should include the exact time of the safety check and the identification information of the employee conducting the check. All documentation will be gathered and provided to the Shift Supervisor or the Captain at midnight each day.

601.9.1 LOG INSPECTION AND ARCHIVE OF LOGS

The Shift Supervisor shall review and evaluate the logs and pass any significant incidents via the chain of command to the Captain for review.

The logs will be retained by the Office in accordance with established records retention schedules but in no case less than one year.

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Incarcerated Persons with Disabilities

602.1 PURPOSE AND SCOPE

This policy provides guidelines for addressing the needs and rights of incarcerated persons detained by this office in accordance with the Americans with Disabilities Act (ADA).

602.1.1 DEFINITIONS

Definitions related to this policy include:

Disability - The ADA defines a disability as a physical or mental impairment that limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity.

602.2 POLICY

This office will take all reasonable steps to accommodate incarcerated persons with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited.

602.3 CAPTAIN RESPONSIBILITIES

The Captain, in coordination with the Responsible Physician and the ADA Coordinator (see the Accessibility - Facility and Equipment Policy), will establish written procedures to assess and reasonably accommodate disabilities of incarcerated persons. The procedures will include but are not limited to:

(a) Establishing housing areas that are equipped to meet the physical needs of disabled incarcerated persons, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with incarcerated persons.

(b) Establishing classification criteria to make housing assignments to incarcerated persons with disabilities.

(c) Assigning individuals with adequate training to assist disabled incarcerated persons with basic life functions, as needed.

(d) Establishing transportation procedures for moving incarcerated persons with limited mobility.

(e) Establishing guidelines for services, programs, and activities for the disabled and ensuring that incarcerated persons with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment (28 CFR 115.16).

(f) Enlisting or contracting for trained service personnel who have experience working with people with disabilities.

(g) Establishing procedures for the request and review of accommodations.

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(h) Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments and developmental disabilities, or have common medical issues, such as epilepsy.

(i) Identifying and evaluating all incarcerated persons with developmental disabilities, including contacting the regional center to assist with diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends (15 CCR 1057).

The Captain is responsible for ensuring the Tehama County Sheriff's Office jail is designed or adapted to reasonably accommodate incarcerated persons with disabilities. At a minimum this includes:

- Access to telephones equipped with a telecommunications device for the deaf (TDD) for incarcerated persons who are deaf, are hard of hearing, or have a speech impairment.
- If orientation videos are used to explain facility rules to newly admitted incarcerated persons, subtitles may be displayed on the video presentation to assist incarcerated persons who have impaired hearing.
- Some cells and dormitories should be equipped with wheelchair-accessible toilet and shower facilities. Incarcerated persons with physical disabilities should be allowed to perform personal care in a reasonably private environment.
- Tables designed for eating should be accessible to those in wheelchairs.

602.4 CORRECTIONAL OFFICERS' RESPONSIBILITIES

Correctional officers should work with qualified health care professionals to aid in making accommodations for those with physical disabilities.

Correctional officers who work in the classification process should be aware of incarcerated persons with disabilities before making housing decisions. For example, persons with mobility issues may require a lower bunk and accessible toilet and shower facilities. When necessary or required, a supervisor of the classification correctional officer should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Correctional officers should assist an incarcerated person with a disability by accommodating the incarcerated person consistent with any guidelines related to the incarcerated person's disability. If there are no current guidelines in place, correctional officers receiving an incarcerated person request for accommodation of a disability should direct the incarcerated person to provide the request in writing or assist the incarcerated person in doing so, as needed. The written request should be brought to the on-duty supervisor as soon as practicable but during the correctional officer's current shift. Generally, requests should be accommodated if the accommodation would not raise a safety concern or affect the orderly function of the jail. The formal written request should still be submitted to the on-duty supervisor.

Requests that are minor and do not reasonably appear related to a significant or ongoing need may be addressed informally, such as providing extra tissue to an incarcerated person with a cold. Such requests need not be made in writing.

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602.5 ACCOMMODATION REQUESTS

Incarcerated persons shall be asked to reveal any accommodation requests during the intake classification process. Any such request will be addressed according to the classification process.

Requests for accommodation after initial entry into the facility should be made through the standard facility request process and should be reviewed by a supervisor within 24 hours of the request being made. The reviewing supervisor should evaluate the request and, if approved, notify the Captain, ADA Coordinator (see the Accessibility - Facility and Equipment Policy) and any other staff as necessary to meet the accommodation. The supervisor should make a record of the accommodation in the incarcerated person's file.

A supervisor who does not grant the accommodation, either in part or in full, should forward the request to the Captain and the ADA Coordinator within 48 hours of the request being made. The Captain, with the assistance of the ADA Coordinator and/or legal counsel, should make a determination regarding the request within five days of the request being made.

602.6 TRAINING

The ADA Coordinator should work with the Training Manager to provide periodic training on such topics as:

(a) Policies, procedures, forms, and available resources for incarcerated persons with developmental disabilities.

(b) Working effectively with interpreters, telephone interpretive services and related equipment.

(c) Training for management staff, even if they may not interact regularly with disabled individuals, so that they remain fully aware of and understand this policy and can reinforce its importance and ensure its implementation.

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Access to Courts and Counsel

603.1 PURPOSE AND SCOPE

The purpose of this policy is to protect the constitutional rights of incarcerated persons to access the courts and legal counsel, while holding incarcerated persons accountable to the rules and regulations that govern conduct in this facility. The staff at every level is reminded the fundamental constitutional right of access to courts does not end when a person is incarcerated.

603.2 POLICY

It is the policy of this office that all incarcerated persons will have access to the courts and the ability to consult with legal counsel (15 CCR 1068).

603.3 INCARCERATED PERSON ACCESS

Staff should not unreasonably interfere with incarcerated persons' attempts to seek counsel and where appropriate should assist persons with making confidential contact with attorneys and authorized representatives.

Access to courts and legal counsel may occur through court-appointed counsel, attorney, or legal assistant visits, telephone conversations, or written communication. To facilitate access, this facility will minimally provide:

- Confidential attorney visiting areas that include the means by which the attorney and the incarcerated person can share legal documents.
- Telephones that enable confidential attorney-client calls.
- Reasonable access to legal materials.
- A means of providing assistance through the court process by individuals trained in the law. This assistance will be available to illiterate incarcerated persons and those who cannot speak or read English or who have disabilities that would impair their ability to access.
- Writing materials, envelopes, and postage for indigent incarcerated persons for legal communications and correspondence.

The Captain shall be responsible for ensuring that information regarding access to courts and legal counsel and requesting legal materials or legal assistance is included in the incarcerated persons handbook, which is provided during orientation.

603.4 CONFIDENTIALITY

All communication between incarcerated persons and their attorneys is confidential, including telephone conversations, written communication, and video conferencing. The content of written attorney-client communication will not be reviewed or censored, but the documents may be inspected for contraband.

Outgoing and incoming legal correspondence shall be routed through the staff, who have received special training in inspecting confidential documents and who are accountable for maintaining

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confidentiality. Incoming legal correspondence shall be opened and inspected for contraband in the presence of the recipient incarcerated person.

Incarcerated persons may seek the assistance of other incarcerated persons in writing writs and other legal correspondence to the courts, when needed subject to the security and safety needs of the incarcerated persons, staff, and the facility.

603.5 REQUEST FOR ASSISTANCE

Written materials addressing how an incarcerated person can access local attorneys and key legal documents shall be available in each housing unit. Staff shall provide these materials to any incarcerated person upon request. However, staff shall not provide legal advice or assist any person in the completion of any legal document.

Habeas corpus forms shall be made available to any incarcerated person by the staff upon request.

Legal forms filled out by the incarcerated person shall be forwarded to court administration directly or via an appointed legal assistant.

603.6 VISITATION RELATED TO LEGAL DEFENSE

Visits with incarcerated persons that are related to legal defense, including attorneys, paralegals, and investigators, will be permitted only in the areas designated for legal visitation or by way of video visitation to assure confidentiality (15 CCR 1068(b)). Contact visits may be approved by the Captain for special circumstances.

(a) Visits shall be of a reasonable length of time to discourage any allegation the defense of the incarcerated person was hindered due to the length of time allowed for the legally authorized visit. These visits shall be of such a length of time that they do not interfere with the security, order, and discipline of this facility. The permissible time for visitation should be flexible but shall not substantially interfere with other facility schedules, such as medical examinations, meal service, or other required activities.

(b) Only materials brought to this facility by an approved legal assistant shall be allowed.

(c) All materials shall be subject to security inspections by the staff and shall be routed through the Shift Supervisor for logging and distribution.

603.7 MAIL

Legal mail shall be handled in accordance with the Mail Policy.

603.8 IN PROPRIA PERSONA (PRO PER) INCARCERATED PERSONS

Incarcerated persons may be granted pro per status by court order only. Any time a court order is received designating an incarcerated person as having been granted pro per status, all relevant records systems at the facility shall be updated to reflect this information. A copy of the court order shall be maintained in the person's file in accordance with established records retention schedules.

The court may, but is not required to, appoint to an incarcerated person who is designated pro per a back-up attorney, paralegal, or other person to assist the person with legal research. All information related to appointed assistants should be recorded in the relevant facility records.

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Any provision of legal materials shall be in accordance with court directives and in consultation with the County Counsel.

603.8.1 PRO PER STATUS MISUSE

Any incarcerated person who is granted pro per status and is found to be misusing or abusing that status to the extent that it poses a demonstrable threat to the safety and security of the facility shall be immediately reported to the Captain. The Captain may recommend the suspension or a limitation of the person's pro per privileges if they adversely affect the safety and security of the jail.

Upon the concurrence with the findings and recommendation of the Captain, the Sheriff or the authorized designee shall consult with the Office's legal counsel prior to notifying the court of any intent to limit the described pro per privileges.

The incarcerated person may petition the court if they are dissatisfied with the action taken.

603.8.2 PRO PER STATUS - MATERIALS AND SUPPLIES

The facility may provide the following materials and supplies to a pro per incarcerated persons. These items may be retained by the person but must be kept in the container supplied for such purpose. The items may include:

- Up to one-half of a ream of 8½-inch x 11-inch plain bond typing paper
- Up to three ruled legal notepads
- Standard legal-size envelopes
- One dozen (maximum) black lead golf pencils
- Two erasers
- One legal size accordion file
- 9-inch x 12-inch manila envelopes and 10-inch x 14-inch manila envelopes
- Up to a maximum of four law books at one time (paperback or hardback)

Unless otherwise ordered by the court, the Office shall have no obligation to supply materials beyond those listed above. Replacement of any of the listed items shall be accomplished through a written request to the Shift Supervisor or the authorized designee. Supplies provided by a court legal liaison will be received and distributed by the Shift Supervisor or the authorized designee. All supplies distributed to the incarcerated person will be recorded in the person's pro per activities record. Supplies not listed in this policy are subject to approval by the Captain or the authorized designee.

Access to ballpoint pens, for signature purposes only, will be provided through a supervisor. The use of the pen will be supervised by the staff and taken from the incarcerated person immediately after its use.

Copies of an incarcerated person's final legal (criminal case) work product, upon the person's request, may be provided subject to arrangements with the court.

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Incarcerated persons may purchase their own legal books and materials. However, such materials will be subject to safety inspection and rules pertaining to items permitted to be in the person's possession. Personal books must be marked with the person's name and booking number.

Any books or materials found in the incarcerated person's possession beyond what is authorized will be returned or placed in the person's property.

603.8.3 PRO PER INCARCERATED PERSONS INTERVIEWING WITNESSES

A pro per incarcerated person may be permitted to interview prospective witnesses in the regular visitation area. Requests for visits outside of normal visiting hours will be directed to a supervisor for approval and should be accommodated when practicable.

Interviews conducted by pro per incarcerated persons are subject to the following rules and restrictions:

(a) No interview will be permitted without notification from a judge confirming or validating the prospective witness. The pro per incarcerated person is responsible for providing the judge with the list of prospective witnesses for validation.

(b) No visit shall be permitted by a prospective witness who is in the custody of this office or otherwise detained by a government agency, except upon a specific court order.

603.8.4 TELEPHONE USAGE

Pro per incarcerated person may use the telephones in their housing areas to place calls concerning their cases. Court-authorized pro per telephone calls shall not be monitored and shall be provided without charge to the person in accordance with the orders of the court (see the Telephone Access Policy).

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Foreign Nationals and Diplomats

604.1 PURPOSE AND SCOPE

This policy addresses the privileges and immunities afforded to members of foreign diplomatic missions and consular posts.

This policy also addresses the legal requirements related to consular notifications that should occur when a foreign national is in custody.

604.2 POLICY

The Tehama County Sheriff's Office Jail will treat foreign diplomatic and consular personnel with due regard for the privileges and immunities to which they are entitled under international law. The Office will investigate all claims of immunity and accept custody of the person when appropriate.

The Tehama County Sheriff's Office Jail will also honor the laws related to foreign nationals in custody by making proper consular notifications and by assisting those who wish to contact their consular representative.

604.3 DIPLOMATIC AND CONSULAR IMMUNITY

604.3.1 AVAILABILITY OF RESOURCES

The Shift Supervisor will ensure that current contact information for the U.S. Department of State and the U.S. Mission to the United Nations is readily available for office members who need to verify a claim of diplomatic or consular immunity. Relevant material for law enforcement published by the U.S. Department of State Bureau of Diplomatic Security should be readily available as well.

604.3.2 ADDRESSING CLAIMS OF DIPLOMATIC OR CONSULAR IMMUNITY

When an arrestee who claims diplomatic or consular immunity is brought to the Tehama County Sheriff's Office Jail the receiving correctional officer shall first inform the Shift Supervisor and then generally proceed as follows:

(a) Do not accept custody of the person from the transporting correctional officer. The person should not be brought inside the Tehama County Sheriff's Office Jail unless doing so would facilitate the investigation of their claim of immunity.

(b) Do not handcuff the person, or, if handcuffs have been applied, remove them unless there is an articulable threat that would justify their use.

(c) If the person has already been accepted into custody, inform the person that they will be detained until their identity and immunity can be confirmed. Attempt to obtain a U.S. Department of State-issued identification card or other identification or documents that may relate to the claimed immunity.

(d) In all cases, verify the status and level of immunity by contacting the U.S. Department of State or the U.S. Mission to the United Nations, as appropriate.

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It will be the responsibility of the Shift Supervisor to communicate the claim of immunity to the on-duty supervisor of the arresting office (if not the Tehama County Sheriff's Office). The Shift Supervisor may assist another agency in determining the person's immunity status.

The Shift Supervisor is responsible for ensuring appropriate action is taken based upon information received regarding the person's immunity status.

604.3.3 REPORTING

If the person's immunity status has been verified, the Shift Supervisor should ensure a report is prepared describing the details and circumstances of any detention or custody. A copy of the report should be faxed or mailed as soon as possible to the U.S. Department of State in Washington, D.C., or to the U.S. Mission to the United Nations in New York in cases involving a member of the United Nations community.

604.4 CONSULAR NOTIFICATIONS

604.4.1 CONSULAR NOTIFICATION LIST AND CONTACTS

The Captain will ensure that the U.S. Department of State's list of countries and jurisdictions that require mandatory notification is readily available to office members. There should also be a published list of foreign embassy and consulate telephone and fax numbers, as well as standardized notification forms that can be faxed and then retained for the record. Prominently displayed placards informing incarcerated persons of rights related to consular notification should also be posted.

604.4.2 CONSULAR NOTIFICATION ON BOOKING

Office members assigned to book incarcerated persons shall:

(a) Inform the foreign national, without delay, that they may have their consular officers notified of the arrest or detention and may communicate with them. Members shall ensure this notification is acknowledged and documented.

(b) Determine whether the foreign national's country is on the U.S. Department of State's mandatory notification list.

(c) If the foreign national's country is not on the list for mandatory notification but the foreign national requests that their consular officers be notified, then:

1. Notify the nearest embassy or consulate of the foreign national's country of the person's arrest or detention by faxing the appropriate notification form. If no fax confirmation is received, a telephonic notification should be made and documented.

2. Forward any communication from the foreign national to their consular officers without delay.

(d) If the foreign national's country is on the list for mandatory notification, then:

1. Notify the nearest embassy or consulate of the foreign national's country, without delay, of the person's arrest or detention by faxing the appropriate notification

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form. If no fax confirmation is received, a telephonic notification should be made and documented.

2. Tell the foreign national that this notification has been made and inform them without delay that they may communicate with their consular officers.
3. Forward any communication from the foreign national to their consular officers without delay.
4. Document all notifications to the embassy or consulate and retain the faxed notification and any fax confirmation for the incarcerated person's file.

Members should never discuss anything with consulate personnel beyond the required notifications, such as whether the incarcerated person is requesting asylum. Requests for asylum should be forwarded to the Shift Supervisor.

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Inmate Rights - Protection from Abuse

605.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that inmates are afforded a safe, healthful environment free from abuse, corporal punishment or harassment, and that inmate property is protected.

605.2 POLICY

It is the policy of this office to make every reasonable effort to protect inmates from personal abuse, corporal punishment, personal injury, disease, property damage and harassment by other inmates or staff. Staff shall take reasonable actions to safeguard vulnerable inmates from others and shall use the classification policies and procedures to make housing decisions that will provide for inmate safety. Abuse of inmates by staff or other inmates will not be tolerated.

The Jail Commander or the authorized designee shall be responsible for including prohibitions against inmate abuse and harassment, rules regarding respect for the property of others, and the prevention of disease in the inmate handbook. All inmates shall receive a copy of the inmate handbook during the booking process, which shall be printed in a language understood by the inmate. The inmate also shall receive verbal instruction on inmate rights during orientation.

605.3 RESPONSIBILITY

It shall be the responsibility of all facility staff to adhere to policies, procedures and practices, and to make every reasonable effort to prevent inmate injury, harassment and abuse, to prevent theft or damage to inmate property and to eliminate conditions that promote disease. These procedures include, but are not limited to:

- Following the classification guidelines for inmate housing.
- Closely supervising inmate activities and interceding as needed to prevent violence, harassment or abuse of inmates.
- Using force only when necessary and to the degree that is reasonable.
- Reporting all inmate injuries, investigating the cause of reported injuries and documenting these efforts in an incident report.
- Enforcing all rules and regulations in a fair and consistent manner.
- Preventing any practice of inmates conducting kangaroo courts or dispensing discipline toward any other inmate.
- Conducting required safety checks of all inmate housing areas.
- Checking all safety equipment for serviceability and making a report of any defective equipment to the appropriate supervisor or Jail Commander.
- Referring sick or injured inmates to a qualified health care professional without unnecessary delay.
- Maintaining high standards of cleanliness throughout the jail.

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- Documenting all abuse protection efforts in facility logs and incident reports as applicable.

605.4 TRAINING

The Training Manager shall be responsible for developing and delivering a training curriculum on the topic of protecting inmates from abuse to all staff. A roster of attendees shall be maintained from each class. Training completion documents shall be filed in each employee’s training file.

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Prison Rape Elimination Act

606.1 PURPOSE AND SCOPE

This policy provides guidance for compliance with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect, and respond to sexual abuse and sexual harassment (28 CFR 115.11; 15 CCR 1029).

606.1.1 DEFINITIONS

Definitions related to this policy include:

Intersex - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development (28 CFR 115.5).

Sexual abuse - Any of the following acts, if the incarcerated person does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse (28 CFR 115.6; 15 CCR 1006):

(a) Contact between the penis and the vulva or the penis and the anus, including penetration, however slight

(b) Contact between the mouth and the penis, vulva, or anus

(c) Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument

(d) Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation

Sexual abuse also includes abuse by a staff member, contractor, or volunteer as follows, with or without consent of the incarcerated person, detainee, or resident:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus
- Contact between the mouth and any body part where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties, or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described above

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- Any display by a staff member, contractor, or volunteer of their uncovered genitalia, buttocks, or breast in the presence of an incarcerated person, detainee, or resident
- Voyeurism by a staff member, contractor, or volunteer

Sexual harassment - Repeated and unwelcome sexual advances; requests for sexual favors; verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one incarcerated person, detainee, or resident that are directed toward another; repeated verbal comments or gestures of a sexual nature to an incarcerated person, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures (28 CFR 115.6; 15 CCR 1006).

Transgender - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth (28 CFR 115.5).

606.2 POLICY

This office has zero tolerance with regard to sexual abuse and sexual harassment in this facility. This office will take appropriate affirmative measures to protect all incarcerated persons from sexual abuse and harassment, and promptly and thoroughly investigate all allegations of sexual abuse and sexual harassment.

606.3 PREA COORDINATOR

The Captain shall appoint an upper-level manager with sufficient time and authority to develop, implement, and oversee office efforts to comply with the PREA standards. The PREA coordinator shall review facility policies and practices, and make appropriate compliance recommendations to the Captain (28 CFR 115.11).

The PREA coordinator's responsibilities shall include:

(a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators, and facility management to an incident of sexual abuse. The plan must also outline the office's approach to identifying imminent sexual abuse toward incarcerated persons and preventing and detecting such incidents (28 CFR 115.11; 28 CFR 115.65; 28 CFR 115.62).

(b) Ensuring that within 30 days of intake, incarcerated persons are provided with comprehensive education, either in person or through video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding the office's policies and procedures for responding to such incidents (28 CFR 115.33).

(c) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration (28 CFR 115.13):

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1. Generally accepted detention and correctional practices.
2. Any judicial findings of inadequacy.
3. Any findings of inadequacy from federal investigative agencies.
4. Any findings of inadequacy from internal or external oversight bodies.
5. All components of the facility's physical plant, including blind spots or areas where staff or incarcerated persons may be isolated.
6. The composition of the incarcerated person population.
7. The number and placement of supervisory staff.
8. Institution programs occurring on a particular shift.
9. Any applicable state or local laws, regulations, or standards.
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
11. Any other relevant factors.

(d) Ensuring that, when designing, acquiring, expanding, or modifying facilities, or when installing or updating a video-monitoring system, electronic surveillance system, or other monitoring technology, consideration is given to the office's ability to protect incarcerated persons from sexual abuse (28 CFR 115.18).

(e) Ensuring that any contract for the confinement of office detainees or incarcerated persons includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187. Any new contract or contract renewal shall provide for office contract monitoring to ensure that the contractor is complying with the PREA standards (28 CFR 115.12).

(f) Making reasonable efforts to enter into agreements with community service providers to provide incarcerated persons with confidential, emotional support services related to sexual abuse. The facility shall provide persons with access to outside victim advocates for emotional support services related to sexual abuse by giving incarcerated persons mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The facility shall enable reasonable communication between incarcerated persons and these organizations and agencies in as confidential a manner as possible. The facility shall inform persons, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws (28 CFR 115.53).

(g) Ensuring the protocol describing the responsibilities of the Office and of another investigating agency, if another law enforcement agency will be responsible for conducting any sexual abuse or sexual harassment investigations, is published on the facility website or by other means, if no website exists (28 CFR 115.22).

(h) Implementing a process by which incarcerated persons may report sexual abuse and sexual harassment to a public/private entity or an office that is not part of the

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Office, and that the outside entity or office is able to receive and immediately forward incarcerated person reports of sexual abuse and sexual harassment to the Captain, allowing the person anonymity (28 CFR 115.51; 15 CCR 1029).

(i) Establishing a process to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under the direct control of this office, using a standardized instrument and set of definitions. Upon request, the Office shall provide all such data from the previous calendar year to the U.S. Department of Justice (DOJ) no later than June 30 (28 CFR 115.87; 34 USC § 30303; 15 CCR 1041).

1. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U.S. DOJ.
2. The data shall be aggregated at least annually.

(j) Establishing a process to monitor the conduct and treatment of detainees or staff who have reported sexual abuse, and the conduct and treatment of detainees who were reported to have suffered sexual abuse.

(k) Ensuring that the following are published on the office's website or by other means, if no website exists:

1. Office policy governing investigations of allegations of sexual abuse and sexual harassment or the referral of such investigations of sexual abuse or sexual harassment (unless the allegation does not involve potentially criminal behavior) (28 CFR 115.22)
2. Information on how to report sexual abuse and sexual harassment on behalf of an incarcerated person (28 CFR 115.54)

(l) Ensuring audits are conducted pursuant to 28 CFR 115.401 through 28 CFR 115.405 (28 CFR 115.93).

(m) Implementing a protocol requiring mid-level or higher-level supervisors to conduct and document unannounced inspections to identify and deter sexual abuse and sexual harassment. The protocol shall prohibit announcing when such inspections are to occur, unless it is necessary for operational considerations (28 CFR 115.13).

(n) Ensuring agreements with outside investigating agencies include PREA requirements, including a requirement to keep the Tehama County Sheriff's Office informed of the progress of the investigation (28 CFR 115.71).

(o) Ensuring that information for uninvolved incarcerated persons, family, community members, and other interested third parties to report sexual abuse or sexual harassment is publicly posted at the facility (15 CCR 1029).

(p) Ensuring the Office conducts follow-up criminal background records checks at least once every five years on members or contractors who may have contact with incarcerated persons or has in place a system for otherwise capturing such information (28 CFR 115.17).

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606.4 REPORTING SEXUAL ABUSE, HARASSMENT, AND RETALIATION

Any employee, agency representative, volunteer, or contractor who becomes aware of an incident of sexual abuse, sexual harassment, or retaliation against incarcerated persons or staff shall immediately notify a supervisor, who will forward the matter to a sexual abuse investigator (28 CFR 115.61). Staff may also privately report sexual abuse and sexual harassment of incarcerated persons (e.g., report to the Captain) (28 CFR 115.51; 15 CCR 1029).

The facility shall provide information to all visitors or third parties on how they may report any incident, or suspected incident of sexual abuse, or sexual harassment to a staff member (28 CFR 115.54; 15 CCR 1029).

Incarcerated persons may report sexual abuse or sexual harassment incidents anonymously or to any staff member they choose. Staff shall accommodate all incarcerated person requests to report allegations of sexual abuse or harassment. Staff shall accept reports made verbally, in writing, anonymously, or from third parties and shall promptly document all verbal reports (28 CFR 115.51; 15 CCR 1029).

Threats or allegations of sexual abuse and sexual harassment, or retaliation, regardless of the source, shall be documented and referred for investigation. Sexual abuse and sexual harassment reports shall only be made available to those who have a legitimate need to know, and in accordance with this policy and applicable law (28 CFR 115.61).

606.4.1 REPORTING TO OTHER FACILITIES

If there is an allegation that an incarcerated person was sexually abused while the person was confined at another facility, the Captain shall notify the head of that facility as soon as possible but not later than 72 hours after receiving the allegation. The Captain shall ensure that the notification has been documented (28 CFR 115.63).

606.5 RETALIATION

All incarcerated persons and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, shall be protected from retaliation.

Protective measures, including housing changes, transfers, removal of alleged abusers from contact with victims, administrative reassignment, or reassignment of the victim or alleged perpetrator to another housing area, and support services for incarcerated persons or staff who fear retaliation, shall be utilized (28 CFR 115.67; 15 CCR 1029).

The Captain or the authorized designee shall assign a supervisor to monitor, for at least 90 days, the conduct and treatment of incarcerated persons or staff who report sexual abuse or sexual harassment, as well as persons who were reported to have suffered sexual abuse, to determine if there is any possible retaliation. The supervisor shall act promptly to remedy any such retaliation. The assigned supervisor should consider incarcerated person disciplinary reports, housing or program changes, negative staff performance reviews, or reassignment of staff members. Monitoring may continue beyond 90 days if needed. Incarcerated person monitoring

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shall also include periodic status checks. The Captain should take reasonable steps to limit the number of people with access to the names of individuals being monitored and should make reasonable efforts to ensure that staff members who pose a threat of retaliation are not entrusted with monitoring responsibilities.

If any other individual who cooperates with an investigation expresses a fear of retaliation, the facility shall take reasonable measures to protect that individual against retaliation (28 CFR 115.67).

606.6 FIRST RESPONDERS

If an allegation of incarcerated person sexual abuse is made, the first correctional officer to respond shall (28 CFR 115.64):

(a) Separate the parties.

(b) Request medical assistance as appropriate. If no qualified health care or mental health professionals are on-duty when a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate qualified health care and mental health professionals (28 CFR 115.82).

(c) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.

(d) If the time period allows for collection of physical evidence, request that the alleged victim, and ensure that the alleged abuser, do not take any actions that could destroy physical evidence (e.g., washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, eating).

(e) Consider whether a change in classification or housing assignment for the victim is needed or whether witnesses to the incident need protection, both of which may include reassignment of housing.

(f) Determine whether the alleged perpetrator should be administratively separated or administratively transferred during the investigation.

If the first responder is not a correctional officer, the responder shall request the alleged victim to refrain from any actions that could destroy physical evidence and then immediately notify a correctional officer.

Should an investigation involve incarcerated persons who have disabilities or who have limited English proficiency, the first responder shall not rely on incarcerated person interpreters, incarcerated person readers, or other types of incarcerated person assistants, except in limited circumstances where an extended delay in obtaining an interpreter could compromise incarcerated person safety, the performance of first responder duties, or the investigation of sexual abuse or sexual harassment allegations (28 CFR 115.16).

606.7 SEXUAL ABUSE AND SEXUAL HARASSMENT INVESTIGATIONS

An administrative investigation, criminal investigation or both shall be completed for all allegations of sexual abuse and sexual harassment (28 CFR 115.22). Administrative investigations shall

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include an effort to determine whether the staff's actions or inaction contributed to the abuse. All administrative and/or criminal investigations shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Only investigators who have completed office-approved training on sexual abuse and sexual harassment investigation shall be assigned to investigate these cases (28 CFR 115.71).

When practicable, an investigator of the same gender as the victim should be assigned to the case. Sexual abuse and sexual harassment investigations should be conducted promptly and continuously until completed. Investigators should evaluate reports or threats of sexual abuse and sexual harassment without regard to an incarcerated person's sexual orientation, physical gender, or gender identity. Investigators should not assume that any sexual activity among incarcerated persons is consensual.

The departure of the alleged abuser or victim from the employment or control of the jail or Office shall not provide a basis for terminating an investigation (28 CFR 115.71).

If the investigation is referred to another agency for investigation, the Office shall request that the investigating agency follow the requirements as provided in 28 CFR 115.21 (a) through (e). The referral shall be documented. The Office shall cooperate with the outside agency investigation and shall request to be informed about the progress of the investigation (28 CFR 115.71) If criminal acts are identified as a result of the investigation, the case shall be presented to the appropriate prosecutor's office for filing of new charges (28 CFR 115.71).

Evidence collection shall be based on a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (28 CFR 115.21).

Incarcerated persons alleging sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with an investigation (28 CFR 115.71).

If a victim considered a vulnerable adult under state law, the assigned investigator shall report the allegation to the designated social services agency as required (28 CFR 115.61).

606.7.1 INVESTIGATIVE FINDINGS

All completed written investigations shall be forwarded to the Captain or, if the allegations may reasonably involve the Captain, to the Sheriff. The Captain or Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence (28 CFR 115.71; 28 CFR 115.72).

The staff shall be subject to disciplinary actions, up to and including termination, for violating this policy. Termination shall be the presumptive disciplinary action for staff members who have engaged in sexual abuse. All discipline shall be commensurate with the nature and circumstances

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of the acts committed, the staff member's disciplinary history, and the actions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to the law enforcement agency that would handle any related investigation and to any relevant licensing bodies (28 CFR 115.76).

606.7.2 REPORTING TO INCARCERATED PERSONS

The Captain or the authorized designee shall inform a victim incarcerated person in writing whether an allegation has been substantiated, unsubstantiated, or unfounded. If the Office did not conduct the investigation, the Office shall request relevant information from the investigative agency in order to inform the incarcerated person.

If a staff member is the accused (unless the Office has determined that the allegation is unfounded), the incarcerated person shall also be informed whenever:

(a) The staff member is no longer assigned to the incarcerated person's unit or employed at the facility.

(b) The Office learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility.

If another incarcerated person is the accused, the alleged victim shall be notified whenever the Office learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

All notifications or attempted notifications shall be documented. When notification is made while the incarcerated person is in custody, the incarcerated person will sign a copy of the notification letter. The letter will be added to the case file (28 CFR 115.73).

606.8 SEXUAL ABUSE AND SEXUAL HARASSMENT BETWEEN STAFF AND INCARCERATED PERSONS

Sexual abuse and sexual harassment between staff, volunteers or contract personnel and incarcerated persons is strictly prohibited. The fact that an incarcerated person may have initiated a relationship or sexual contact is not recognized as a defense to violating this policy.

Any incident involving allegations of staff-on-incarcerated person sexual abuse or sexual harassment shall be referred to the Internal Affairs Unit for investigation.

606.8.1 SEXUAL ABUSE BY CONTRACTOR OR VOLUNTEER

Any contractor or volunteer who engages in sexual abuse within the facility shall be immediately prohibited from having any contact with incarcerated persons. The contractor or volunteer shall be promptly reported to the law enforcement agency that would investigate such allegations and brought to the attention of any relevant licensing bodies (28 CFR 115.77).

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606.9 SEXUAL ABUSE VICTIMS

Incarcerated persons who are victims of sexual abuse shall be transported to the nearest appropriate location for treatment of injuries and collection of evidence, and for crisis intervention services (28 CFR 115.82). Depending on the severity of the injuries, transportation may occur by a staff member or by ambulance, in either case with appropriate security to protect the staff, the incarcerated person, and the public, and to prevent escape.

A victim advocate from a rape crisis center should be made available to the victim. If a rape crisis center is not available, the Office shall make available a qualified member of a community-based organization, or a qualified health care or mental health professional from the Office, to provide victim advocate services. Efforts to secure services from a rape crisis center shall be documented. A rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in (34 USC § 12511), to sexual assault victims of all ages. A rape crisis center that is part of a government unit may be used if it is not part of the criminal justice system (such as a law enforcement agency) and it offers a level of confidentiality comparable to the level at a nongovernmental entity that provides similar victim services (28 CFR 115.21).

606.10 EXAMINATION, TESTING, AND TREATMENT

Examination, testing, and treatment shall include the following (15 CCR 1206):

(a) Forensic medical examinations shall be performed as evidentiarily or medically appropriate, without financial cost to the victim. Where possible, these examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANE)s. If neither SAFEs nor SANEs are available, other qualified medical practitioners can perform the examination. The Office shall document its efforts to provide SAFEs or SANEs (28 CFR 115.21).

(b) If requested by the victim, a victim advocate, a qualified office staff member, or a qualified community organization staff member shall accompany the victim through the forensic medical examination process and investigatory interviews. That person will provide emotional support, crisis intervention, information, and referrals (28 CFR 115.21).

(c) Provisions shall be made for testing the victim for sexually transmitted diseases (28 CFR 115.82).

(d) Counseling for the treatment of sexually transmitted diseases, if appropriate, shall be provided.

(e) Victims shall be offered information about, and given access to, emergency contraception, prophylaxis for sexually transmitted infections, and follow-up treatment for sexually transmitted diseases (28 CFR 115.82; 28 CFR 115.83). This shall be done in a timely manner.

(f) Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the abuse, such victims shall receive comprehensive information about, and access to, all lawful pregnancy-related medical services (28 CFR 115.83). This shall be done in a timely manner.

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(g) Victims shall be provided with follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody (28 CFR 115.83).

(h) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident (28 CFR 115.82; 28 CFR 115.83).

(i) The health authority or mental health staff shall obtain informed consent from incarcerated persons before reporting information to jail staff about prior sexual victimization that occurred somewhere other than an institutional setting unless the incarcerated person is under the age of 18 (28 CFR 115.81).

(j) Medical and mental health practitioners shall ensure that information related to sexual victimization that occurred in an institutional setting is limited to medical and mental health practitioners and other staff unless it is necessary to inform jail staff about security or management decisions (28 CFR 115.81).

606.11 PROTECTIVE CUSTODY

Incarcerated persons at high risk for sexual victimization shall not be placed in involuntary protective custody unless an assessment of available alternatives has been made and it has been determined that there is no reasonably available alternative means of separation. Incarcerated persons may be held in involuntary protective custody for less than 24 hours while an assessment is completed.

If an involuntary protective custody assignment is made because of a high risk for victimization, the Captain shall clearly document the basis for the concern for the incarcerated person's safety and the reasons no alternative means of separation can be arranged (28 CFR 115.43).

The facility shall assign these persons to involuntary protective custody only until an alternative means of separation from likely abusers can be arranged, not ordinarily in excess of 30 days.

Incarcerated persons placed in temporary protective custody shall continue to have reasonable access to programs, privileges, education, and work opportunities. If restrictions are put in place, the Captain shall document the following:

(a) The opportunities that have been limited

(b) The duration of the limitation

(c) The reasons for such limitations

Every 30 days, the Captain shall afford each such incarcerated person a review to determine whether there is a continuing need for protective custody (28 CFR 115.43).

606.12 SEXUAL ABUSE INCIDENT REVIEW

An incident review shall be conducted at the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded (28 CFR 115.86). The review should occur within 30 days of the conclusion of the investigation.

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The review team shall include upper-level management officials and seek input from line supervisors, investigators, and qualified health care and/or mental health professionals, as appropriate:

(a) Consider whether the investigation indicates a need to change policy or practice in order to better prevent, detect, or respond to sexual abuse.

(b) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification status or perceived status; gang affiliation; or other group dynamics at the facility.

(c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers may enable abuse.

(d) Assess the adequacy of staffing levels in the area during different shifts.

(e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

(f) Prepare a written report of the team's findings, including but not limited to determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Sheriff and the PREA coordinator.

The Captain or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

606.13 DATA REVIEWS

This office shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training by:

(a) Identifying problem areas.

(b) Identifying corrective actions taken.

(c) Recommending corrective actions.

(d) Comparing current annual data and corrective actions with those from prior years.

(e) Assessing the office's progress in addressing sexual abuse.

The reports shall be approved by the Captain and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility. However, the nature of the redacted material shall be indicated (28 CFR 115.88).

All aggregated sexual abuse data from Tehama County Sheriff's Office facilities and private facilities with which it contracts shall be made available to the public at least annually through the office website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed (28 CFR 115.89).

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606.14 RECORDS

All case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment or counseling shall be retained in accordance with confidentiality laws.

The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years (28 CFR 115.71).

All other data collected pursuant to this policy shall be securely maintained for at least 10 years after the date of the initial collection, unless federal, state or local law requires otherwise (28 CFR 115.89).

606.15 PRESERVATION OF ABILITY TO PROTECT INCARCERATED PERSONS

The Office shall not enter into or renew any collective bargaining agreement or other agreement that limits the office's ability to remove alleged staff sexual abusers from contact with any incarcerated persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted (28 CFR 115.66).

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Grooming

608.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure incarcerated person grooming standards are based upon legitimate government interests.

608.2 POLICY

It is the policy of this facility to allow incarcerated persons choice in personal grooming, except when a valid government interest justifies that grooming standards be established. The Captain or the authorized designee shall establish incarcerated person grooming standards specific to classification, work status, facility safety and security, or health and hygiene. Any established standards should not unreasonably interfere with religious observances. Grooming standards should be identified in the incarcerated person handbook.

608.3 HAIRCUTS

Incarcerated persons will be provided haircuts and hair-cutting tools subject to established facility rules. If hair length, style, or condition presents a security or sanitation concern, haircuts may be mandatory. Incarcerated persons who significantly alter their appearance may be required to submit to additional booking photos.

Incarcerated persons shall not cut names, numbers, or other designs into their hair. Incarcerated persons shall not manipulate their hair into any style, including but not limited to braids, ponytails, cornrows, or twists, that could facilitate the concealment and movement of contraband and weapons.

608.3.1 HAIR CARE SERVICES

The Captain or the authorized designee shall establish written procedures for incarcerated person hair care services (15 CCR 1267(a)). The procedures will include schedules for hair care services and allow rescheduling for conflicts, such as court appearances.

Incarcerated persons shall generally be permitted to receive hair care services once per month after being in custody for at least 30 days. Staff may suspend access to hair care services if an incarcerated person appears to be a danger to themself or others or to the safety and security of the facility.

608.4 SHAVING

Incarcerated persons may shave daily. Facial hair shall be clean and well groomed. Long beards may allow persons to conceal weapons or contraband. Incarcerated persons may be required to trim facial hair if it poses a security or safety risk. Incarcerated persons may be required to submit to new booking photographs if their appearance is significantly altered due to facial hair. Incarcerated persons with facial hair who work around food shall wear appropriate facial coverings.

An incarcerated person may be denied access to razors if they appear to be a danger to themself or others, or if such access may jeopardize the safety and security of the facility.

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Incarcerated persons may be restricted from significantly altering their appearance for reasons of identification in court (15 CCR 1267(b)).

608.5 NAILS

Nail clippers will be kept at the control station and will be issued to incarcerated persons upon request. Incarcerated workers are required to keep their nails clean and trimmed. Incarcerated persons with long nails may be required to trim their nails if there is a security concern and the person is admitted to general population.

608.6 GROOMING EQUIPMENT

Grooming equipment is to be inventoried and inspected by the staff at the beginning of each shift and prior to being issued to incarcerated persons. The staff shall ensure that all equipment is returned by the end of the shift and is not damaged or missing parts.

Grooming equipment will be disinfected before and after each use by the methods approved by the State Board of Barbering and Cosmetology to meet the requirements of (16 CCR 979; 16 CCR 980; 15 CCR 1267(c)). Cleaning methods include:

- Removing foreign matter.
- Cleaning tools with soap or detergent and water.
- Immersing non-electrical equipment in disinfectant.
- Spraying electrical equipment with disinfectant.
- Storing cleaned equipment in clear, covered containers that are labeled as such.

Disinfectant solution shall be changed at least once per week or whenever the solution is cloudy or dirty. Solution will be stored in covered containers with labeled instructions for its use and the Environmental Protection Agency registration number.

608.7 PERSONAL CARE ITEMS

Incarcerated persons are expected to maintain their hygiene using approved personal care items.

No incarcerated person will be denied the necessary personal care items. For sanitation and security reasons, personal care items shall not be shared (15 CCR 1265 et seq.).

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Nondiscrimination

609.1 PURPOSE AND SCOPE

The constitutional rights of persons regarding discrimination are protected during incarceration. These protections extend to administrative decisions (e.g., classification, access to programs, availability of services). This policy is intended to guide the staff toward nondiscriminatory administrative decisions and to detail an incarcerated person complaint and discrimination investigation process.

609.2 POLICY

All decisions concerning incarcerated persons housed at this facility shall be based on reasonable criteria that support the health, safety, security, and good order of the facility.

609.3 INCARCERATED PERSONS REPORTING DISCRIMINATION

Incarcerated persons who wish to report an allegation of discrimination may communicate with facility management in any way, including:

(a) Confidential correspondence addressed to the Captain or the Sheriff or other government official, including the courts or legal representative.

(b) Verbally to any supervisor or other staff member of this facility.

609.3.1 HANDLING COMPLAINTS OF DISCRIMINATION

Staff shall promptly forward all written allegations of discrimination by incarcerated persons to the Shift Supervisor. If the allegation is presented verbally, the receiving staff member shall prepare an incident report identifying the circumstances prompting the allegation, the individuals involved, and any other pertinent information that would be useful to investigating the allegation.

Unless the complaint submitted by the incarcerated person is clearly identified as confidential and addressed to the Captain, Sheriff, or other official, the Shift Supervisor shall review the complaint and attempt to resolve the issue. In any case, the Shift Supervisor shall document the circumstances of the allegation and what actions, if any, were taken to investigate or resolve the complaint. All reports of alleged discrimination shall be forwarded to the Captain for review and further investigation or administrative action as needed.

Administrative evaluations and response to allegations of discrimination shall be based upon objective criteria:

(a) The incarcerated person's classification

(b) The incarcerated person's criminal history

(c) Current and past behavior and disciplinary history

(d) Housing availability

(e) The availability of programs

(f) The ability to safely provide the requested services

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609.4 DISCRIMINATION COMPLAINT AUDITS

The Captain should perform an annual audit of all incarcerated person discrimination complaints to evaluate whether any policy or procedure changes or training are indicated. The Captain should record these findings in a confidential memorandum to the Sheriff. Specific details of complaints and identifying information, such as names of the involved persons, dates, or times, are not part of this process and should not be included in the memorandum. If the audit identifies any recommended changes or content that may warrant a critical revision to this Custody Manual, the Captain should promptly notify the Sheriff.

Any training issues identified as a result of this audit should be forwarded to the Training Manager, who shall be responsible for ensuring all necessary and required training is scheduled and completed.

609.5 DISCRIMINATION PROHIBITED

Discriminating against an incarcerated person based upon actual or perceived race, ethnicity, national origin, religion, sex, sexual orientation, gender identity or expression, age, disability, pregnancy, genetic information, veteran status, marital status, and any other classification or status protected by law is prohibited.

Reasonable and comparable opportunities for participation in services and programs including vocational, educational, and religious programs shall be made available to incarcerated persons in a nondiscriminatory manner.

The Captain should periodically conduct interviews with incarcerated persons and staff members to identify and resolve potential problem areas related to discrimination before they occur.

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Grievances

610.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process by which incarcerated persons may file grievances and receive a formal review regarding the conditions of their confinement (15 CCR 1073).

610.2 POLICY

It is the policy of this office that any incarcerated person may file a grievance relating to conditions of confinement, which includes release date, housing, medical care, food services, hygiene and sanitation needs, out of cell time opportunities, classification actions, disciplinary actions, program participation, telephone and mail use procedures, visiting procedures, and allegations of sexual abuse.

Grievances will not be accepted if they are challenging the rules and policies, state or local laws, court decisions, and probation/parole actions.

Retaliation for use of the grievance system is prohibited.

610.3 GRIEVANCE PROCEDURES

Members shall attempt to informally resolve all grievances at the lowest level. All attempts to resolve a grievance shall be documented in the incarcerated person's file. If there is no resolution at this level, the incarcerated person may request a grievance form.

The incarcerated person should be advised to complete the form and return it to any member or submit it electronically. A grievance should be filed by an incarcerated person within 14 days of the complaint or issue.

Incarcerated persons cannot file a grievance on behalf of another incarcerated person but an incarcerated person may assist another incarcerated person in the preparation of a grievance. Members may take reasonable steps to assist the incarcerated person in the preparation of a grievance, if requested.

Upon receiving a completed grievance form, the member shall acknowledge receipt of the grievance by signing the form and giving a copy to the incarcerated person. The member receiving the form shall gather all associated paperwork and reports and immediately forward them to a supervisor.

610.3.1 EXCEPTION TO INITIAL GRIEVANCE FILING

Incarcerated persons may request to submit the grievance directly to a supervisor or mail it directly to the Captain if they reasonably believe the issues to be grieved are sensitive or that their safety would be in jeopardy if the contents of the grievance were to become known to other incarcerated persons.

Incarcerated persons with limited access to mail privileges, who are in restrictive housing or are indigent may deposit their grievances in the locked grievance box within their housing unit or place

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their grievance in a sealed envelope labeled "Grievance" and deposit it in the regular mailboxes. These envelopes will be delivered directly to the Captain and not forwarded to the United States Postal Service.

610.3.2 TIMELY RESOLUTION OF GRIEVANCES

Upon receiving a completed incarcerated person grievance form, the supervisor shall ensure that the grievance is investigated and resolved or denied in a timely manner, as established by the Captain. The supervisor shall assign the investigation of the grievance to the manager in charge of the department the incarcerated person is grieving.

Grievances related to medical care should be investigated by the medical staff or the authorized designee. The findings of that investigation, along with any recommendations, shall be forwarded to the sergeant. Any appeals of the findings of the medical staff shall be forward to the Captain as the final level of appeal.

Grievances about food-related matters should be investigated by the food services manager. The findings of that investigation, along with any recommendations, shall be forwarded to the sergeant. Any appeals shall be forwarded to the Captain as the final level of appeal.

Other grievances relating to programs or other services provided by the Office shall be investigated by the custody staff with the assistance of the supervising employee in charge of those services. Findings relating to the investigation will be forwarded to the sergeant. Any appeals shall be forwarded to the Captain as the final level of appeal.

610.3.3 APPEALS TO GRIEVANCE FINDINGS

Incarcerated persons may appeal the finding of a grievance to the Captain as the final level of appeal within five days of receiving the findings of the original grievance. The Captain will review the grievance and either confirm or deny it. If the Captain confirms the grievance, corrective actions will be initiated. In either case, the incarcerated person shall receive a written response to the appeal.

Appeals related to sexual abuse allegations shall be confirmed or denied by the Captain within 10 calendar days.

610.3.4 RECORDING GRIEVANCES

The Captain should maintain a grievance log in a central location accessible to all supervisors. The supervisor who originally receives a grievance shall record the grievance, along with its finding, on the grievance log. Periodic reviews of the log should be made by the Captain or the authorized designee to ensure that grievances are being handled properly and in a timely manner. A copy of each grievance should be filed in the incarcerated person's official record and maintained throughout the incarcerated person's period of incarceration.

The original grievance should be retained in a file maintained by the Captain or the authorized designee, and shall be retained in accordance with established records retention schedules.

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610.3.5 FRIVOLOUS GRIEVANCES
Incarcerated persons shall use the grievance process only for legitimate problems or complaints. If there is concern that an incarcerated person is abusing the grievance process, the person shall be informed that continued behavior may result in disciplinary action.

610.3.6 REVIEW OF GRIEVANCES
The Captain or the authorized designee shall conduct a quarterly review of grievances, responses, and appeals (15 CCR 1073).

610.3.7 EMERGENCY GRIEVANCES
Incarcerated persons may file an emergency grievance to address issues that could subject the incarcerated person to immediate substantial risk of personal injury or cause other serious and irreparable harm, as defined by the Captain. An emergency grievance may be submitted to any member and forwarded immediately without substantive review to the Shift Supervisor.

The Shift Supervisor should promptly initiate an investigation or direct the manager responsible for the program or service to commence an investigation. The Shift Supervisor should produce or receive findings and recommendations from the investigation within 48 hours of receipt of the grievance and communicate the resolution to the incarcerated person immediately. The incarcerated person may appeal the decision to the Captain within 24 hours of notification, and the Captain will communicate the final decision within 24 hours of receipt of the appeal.

610.4 GRIEVANCE AUDITS
The Captain should perform an annual audit of all incarcerated person grievances and complaints filed the previous calendar year. The Captain should forward a memorandum to the Sheriff detailing the findings, including recommendations regarding any changes to policy or procedures or any additional training that might be warranted to reduce future complaints. Specific identifying information regarding dates, times, or individuals named in the complaints is not part of this process and should not be included in the memorandum.

The Sheriff should evaluate the recommendations and ensure appropriate action is taken.

Any training issues identified as a result of this audit should be forwarded to the Training Manager, who will be responsible for ensuring all necessary and required training is scheduled and completed.

610.5 TRAINING
The Training Manager shall ensure that all members receive initial and periodic training regarding all aspects of this policy. All training delivered should include testing to document that the member understands the subject matter.

610.6 ADDITIONAL PROVISIONS FOR GRIEVANCES RELATED TO SEXUAL ABUSE
The following apply to grievances that relate to sexual abuse allegations (28 CFR 115.52; 15 CCR 1029):

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(a) Incarcerated persons may submit a grievance regarding an allegation of sexual abuse at any time.

(b) Third parties, including fellow incarcerated persons, staff members, family members, attorneys, and outside advocates, are permitted to assist incarcerated persons in filing such grievances and to file such grievances on behalf of incarcerated persons if the incarcerated person agrees to have the grievance filed on the person's behalf. Staff members who receive a grievance filed by a third party on behalf of an incarcerated person shall inquire whether the incarcerated person wishes to have the grievance processed and shall document the incarcerated person's decision.

(c) Grievances may be submitted to any staff member and need not be submitted to the member who is the subject of the complaint

(d) Staff receiving a grievance shall forward the grievance to a supervisor. Grievances shall not be forwarded to any supervisor who is the subject of the complaint. The supervisor receiving the grievance shall refer the grievance to the Shift Supervisor for investigation. Incarcerated persons and staff are not required to attempt to informally resolve grievances related to sexual abuse.

(e) The Shift Supervisor shall ensure that grievances related to sexual abuse are investigated and resolved within 90 days of the initial filing. The Shift Supervisor may grant an extension of up to 70 days if reasonable to make an appropriate decision. If an extension is granted, the incarcerated person shall be notified and provided a date by which a decision will be made.

(f) At any level of the process, including the appeal, if the incarcerated person does not receive a response within the allotted time, including any properly noticed extension, the incarcerated person may consider the absence of a response to be a denial at that level.

(g) Incarcerated persons may be disciplined for filing a false grievance related to alleged sexual abuse only when it is determined that the incarcerated person filed the grievance in bad faith.

610.6.1 EMERGENCY GRIEVANCES RELATED TO SEXUAL ABUSE

Any incarcerated person who believes the person or any other incarcerated person is in substantial risk of imminent sexual abuse may file an emergency grievance with any supervisor. The supervisor shall determine whether immediate action is reasonably necessary to protect the incarcerated person and shall provide an initial response within 48 hours.

The supervisor shall refer the grievance to the Shift Supervisor, who will investigate and issue a final decision within five calendar days.

The initial response and final decision shall be documented and shall include a determination whether the incarcerated person is in substantial risk of imminent sexual abuse and identify actions taken in response to the emergency grievance (28 CFR 115.52).

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610.7 ACCESS TO THE GRIEVANCE SYSTEM

All incarcerated persons shall be provided with a grievance process for resolving complaints arising from facility matters with at least one level of appeal.

Incarcerated persons will receive information concerning the grievance procedure during the orientation process. Information will also be contained in the incarcerated persons handbook. Information regarding the grievance process will be provided to incarcerated persons in the language they understand.

The information will include (15 CCR 1073):

(a) A grievance form or instructions for registering and appealing a grievance, including relevant dates.

(b) A process for submission and handling of anonymous grievances.

(c) Instructions for the resolution of the grievance at the lowest appropriate staff level.

(d) The appeal process to the next level of review.

(e) Written reasons for denial of a grievance at each level of review.

(f) A provision for a non-automated initial response within a reasonable time limit which shall not exceed a period of 15 calendar days.

(g) A provision for resolving questions of jurisdiction within the facility.

(h) Provisions for providing a copy of the grievance, appeal, response, and related documents to the incarcerated person.

(i) Consequences for abusing the grievance system.

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Voting

611.1 PURPOSE AND SCOPE

This policy establishes the requirement for providing eligible incarcerated persons the opportunity to vote during elections, pursuant to election statutes (15 CCR 1071).

611.2 POLICY

The Office will assist incarcerated persons who wish to vote in an election.

611.3 PROCEDURES

Prior to each election, the Captain will designate a correctional officer to be a liaison between the Office and the county elections office. The designated correctional officer will be responsible for assisting incarcerated persons who have requested to vote.

Incarcerated persons should be advised of voting methods during the incarcerated person orientation.

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Chapter 7 - Medical-Mental Health

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Health Care Administrative Meetings and Reports

700.1 PURPOSE AND SCOPE

The Office recognizes that the delivery of effective health care requires open and frequent communication between the Responsible Physician and the Captain. This policy provides guidelines for the continuous monitoring, planning, and problem resolution in providing health care that addresses the medical needs of the incarcerated person population and prevents potential outbreaks of communicable and contagious illness.

700.1.1 DEFINITIONS

Definitions related to this entire chapter include:

Access to care- An incarcerated person should be seen in a timely manner by a qualified health care professional. The incarcerated person should be given a professional clinical diagnosis and receive treatment that is ordered.

Clinical practice guidelines- A systematically developed science-based statement designed to assist practitioners and incarcerated persons with decisions about appropriate health care for specific clinical circumstances. Clinical practice guidelines are used to assist clinical decision-making, assess and assure the quality of care, educate individuals and groups about clinical disease, guide the allocation of health care resources, and reduce the risk of legal liability for negligent care.

Clinical setting - An examination or treatment room, either on- or off-site, which is appropriately supplied and equipped to address a patient's health care needs.

Daily - Seven days a week, including holidays.

Direct order - A written order issued by a qualified health care professional specifically for the treatment of an incarcerated person's particular condition.

Health appraisal - A comprehensive health evaluation completed within 14 days of an incarcerated person's arrival at the facility.

Health authority- The Responsible Physician, health services administrator or health agency responsible for providing all health care services or coordinating the delivery of all health care services.

Health care - The sum of all actions, preventive and therapeutic, taken for the physical and mental well-being of the incarcerated person population. The term health care includes medical, both physical and psychological, dental, nutrition, and other ancillary services, as well as maintaining safe and sanitary environmental conditions.

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Health-trained custody staff- A correctional officer or other facility employee who has received training from the Responsible Physician or the authorized licensed designee in limited aspects of health care coordination.

HIPAA - Health Insurance Portability and Accountability Act

Mental health staff- Qualified health care professionals who have received instruction and supervision in identifying and interacting with individuals in need of mental health services.

Physical examination - An objective, hands-on evaluation of an individual. It involves the inspection, palpation, auscultation, and percussion of a body to determine the presence or absence of physical signs of disease.

Qualified health care professional - Physicians, physician's assistants, nurses, nurse practitioners, dentists, mental health professionals or other persons who, by virtue of their education, credentials, and experience are permitted by law to evaluate and care for patients within the parameters of their license or certification.

Responsible Physician- An individual licensed to practice medicine and provide health services to the incarcerated person population of the facility, or the physician at an institution with final responsibility for decisions related to medical judgment.

Sick call- The evaluation and treatment of an ambulatory patient, either on- or off-site, by a qualified health care professional.

Special needs - Health conditions that require regular care.

Standing order- Written orders issued by a physician that specify the same course of treatment for each patient suspected of having a given condition and the specific use and amount of prescription drugs (e.g., immunizations, insulin, seizure medications).

Suicidal ideation - Having thoughts of suicide or of taking action to end one's own life. Suicidal ideation includes all thoughts of suicide when the thoughts include a plan to commit suicide and when they do not.

Treatment plan - A series of written statements specifying a patient's particular course of therapy and the roles of qualified health care professionals in delivering the care.

Triage - The sorting and classifying of health care requests to determine priority of need and the proper place for health care to be rendered.

700.2 POLICY

The Sheriff shall select the Responsible Physician in accordance with the Health Authority Policy. It is the policy of this facility that the Responsible Physician should meet with the Captain at least quarterly. The Responsible Physician should be required to submit a report addressing the effectiveness of the health care system, a description of any environmental or access issues that require improvement, and detail any progress that has been made in previously reported areas. The quarterly meeting should be documented through formal minutes, which should include

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the names of attendees and a list of the topics discussed. The minutes should be retained in accordance with established records retention schedules.

The data for the quarterly report should be gathered by the Responsible Physician via monthly meetings with all facility Shift Supervisors and qualified health care professionals. The monthly meetings should cover the following topics:

- Health care services
- Quality improvement findings
- Infection control efforts
- Incarcerated person grievances
- Environmental inspections report

700.2.1 STATISTICAL REPORTS

In addition to the quarterly report described above, a statistical report will be provided annually to the Captain. The statistical report will be prepared by the Responsible Physician and shall include but not be limited to the following (15 CCR 1202):

(a) The number of incarcerated persons receiving health services by category of care

(b) The number of referrals to specialists

(c) Prescriptions written and medications dispensed

(d) Laboratory and X-ray tests completed

(e) Infirmary admissions, if applicable

(f) On-site and off-site hospital admissions

(g) Serious injuries or illnesses

(h) Deaths

(i) Off-site transports

(j) Infectious disease monitoring

(k) Emergency services provided to incarcerated persons

(l) Dental visits provided

(m) Number of health care grievances by category (e.g., medication error, missed appointment, health staff complaint) and whether the grievance was founded or unfounded

It is the responsibility of the Captain to ensure that copies of the statistical reports and documentation of any remedies implemented are retained in accordance with established records retention schedules.

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Access to Health Care

701.1 PURPOSE AND SCOPE

The provision of adequate health services in a custody setting is a constitutional right afforded to all incarcerated persons. The purpose of this policy is to provide custody personnel and qualified health care professionals with a process to inform newly booked incarcerated persons of the procedure to access health care services and how to use the grievance system, if necessary.

701.2 POLICY

It is the policy of this office that all incarcerated persons, regardless of custody status or housing location, will have timely access to a qualified health care professional and receive a timely professional clinical judgment and appropriate treatment.

The Tehama County Sheriff's Office facility will provide medical, dental, and mental health services as necessary to maintain the health and well-being of incarcerated persons to a reasonable and socially acceptable standard (15 CCR 1200 et seq.; 15 CCR 1208).

701.3 ACCESS TO CARE

Incarcerated person medical requests will be evaluated by qualified health care professionals or health-trained custody staff. Health care services will be made available to incarcerated persons from the time of admission until they are released. Timely access to services will be provided within seven days of request. Information regarding how to contact the medical staff will be posted in all incarcerated person housing areas (15 CCR 1200 et seq.; 15 CCR 1208). Medications and community health resources and referrals may be provided upon request when the incarcerated person is released.

Unreasonable barriers shall not be placed on an incarcerated person's ability to access health services. Health care that is necessary during the period of confinement shall be provided regardless of an incarcerated person's ability to pay, the size of the facility, or the duration of the person's incarceration. Such unreasonable barriers include:

- Punishing incarcerated persons for seeking care for their health needs.
- Deterring incarcerated persons from seeking care for their health needs by scheduling sick call at unreasonable times.

All routine requests for medical attention shall be promptly routed to a qualified health care professional.

Any incident of an incarcerated person refusing medical treatment or causing a disruption in the delivery of health care services shall be documented in an incident report. The original incident report shall be forwarded to the Responsible Physician and a copy sent to the Captain.

701.4 HEALTH CARE GRIEVANCES

Custody personnel should authorize and encourage resolution of incarcerated person complaints and requests on an informal basis whenever possible. To the extent practicable, custody personnel

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should provide incarcerated persons with opportunities to make suggestions to improve programs and conditions.

Incarcerated persons will be informed of the grievance process during incarcerated person orientation. The grievance process is also explained in the incarcerated person handbook, which all incarcerated persons receive and which they should have additional access to in their housing units. Grievances will be handled in accordance with the Grievances Policy (15 CCR 1073(a)).

Custody personnel should minimize technical requirements for grievances and allow incarcerated persons to initiate the grievance process by briefly describing the nature of the complaint and the remedy sought. For simple questions and answers regarding clinical issues, incarcerated persons may meet with a qualified health care professional or may submit a written correspondence.

Incarcerated person grievances regarding health care issues will be investigated by an uninvolved member of the medical staff. If no such person is available or does not exist, an outside peer should be sought to investigate the grievance. The incarcerated person should be provided with a written response in accordance with the schedule set forth in the Grievances Policy. Responses to incarcerated person grievances should be based on the community standard of health care.

Copies of grievances and the facility's response shall be sent to the Captain, who, in consultation with the Responsible Physician, shall serve as the final authority in response to all incarcerated person grievances.

If an incarcerated person is not satisfied with the response, the incarcerated person may appeal the grievance as outlined in the Grievances Policy.

701.5 POSTING AVAILABLE RESOURCES

A listing of telephone numbers for medical, dental, mental health and ambulance services shall be posted at the facility’s medical area and in the primary staff control station, along with a schedule of availability.

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Non-Emergency Health Care

702.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a daily triage system of incarcerated person requests for health care services. This is to ensure that the health needs of the population are addressed properly and in a timely manner.

702.2 POLICY

It is the policy of this office to provide daily access to qualified health care professionals or health-trained custody staff in order for incarcerated persons to request medical services (15 CCR 1200). All health care requests will be documented, triaged, and referred appropriately by medical staff. Qualified health care professionals will conduct sick call and clinics for health care services on a scheduled basis to ensure a timely response to requests for medical services (15 CCR 1211).

The Responsible Physician, in coordination with the Captain or the authorized designee, is responsible for developing a process that includes:

(a) A process for incarcerated persons to request health services on a daily basis.

(b) A priority system for health care services to acquire and address requests for routine health care, and for urgent or emergent injuries, illnesses, and conditions.

(c) Making health care request forms available in each housing unit and to all incarcerated persons upon request.

(d) A system in which health care requests are documented, triaged, and referred appropriately.

(e) Restrictions that prohibit non-health services personnel from diagnosing or treating an illness.

702.3 HEALTH CARE REQUESTS

During the collection of health care requests from incarcerated persons, care should be taken to protect the confidentiality of the person and the nature of the health issue. The collector shall date and initial the request when the collection takes place. The requests shall be triaged to determine the priority of need and the proper place for health care to be delivered.

Incarcerated persons will be instructed on how to obtain medical services during the orientation process and in the incarcerated person handbook. Incarcerated persons shall submit a medical request form to the housing unit correctional officer or the health-trained staff delivering medications, or a nurse, if appropriate.

Medical request forms should be available in languages representative of the population. Incarcerated persons who communicate in a language not available in printed form shall have access to interpreter services.

Incarcerated persons with disabilities should be provided with appropriate assistance or accommodation to ensure they are able to request health care services.

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The housing unit correctional officer shall ensure the reason for seeking medical attention is on the medical request form. If no reason is given, the correctional officer shall encourage the incarcerated person to indicate whether the matter is urgent or confidential. The correctional officer shall forward all requests to the jail nurse.

702.4 TRIAGE OF HEALTH CARE REQUESTS

Qualified health care professionals shall perform a daily triage. Sick call shall be available to incarcerated persons at least five days a week and shall be performed by a qualified health care professional.

Other qualified health care professionals should schedule incarcerated persons in need of specialized treatment for the next available providers' clinic. The wait for the next available providers' clinic should not exceed two days. The qualified health care professional shall document the referral in the providers' scheduling book and on the incarcerated person's medical record.

The frequency and duration of sick call should be sufficient to meet the needs of the incarcerated person population but should be conducted at least weekly by a qualified health care professional. If an incarcerated person's custody status precludes attendance at sick call, arrangements shall be made to provide sick call services in the place of the person's detention (15 CCR 1211).

702.5 GUIDELINES FOR ELECTIVE PROCEDURES OR SURGERY

The Responsible Physician and the Captain shall work cooperatively to develop guidelines that govern elective procedures or surgery for incarcerated persons. The guidelines must include decision-making processes for elective procedures or surgery that is needed to correct a substantial functional deficit or an existing pathological process that threatens the well-being of the incarcerated person over a period of time. Any discussion of this nature with the incarcerated person should be conducted in a language easily understood by the person and should be carefully documented in the person's medical record. This record should be maintained in accordance with established records retention schedules.

702.6 REQUESTS FOR OUTSIDE MEDICAL CARE

Incarcerated persons who request access to health care services outside the facility may do so with advance authorization from the Captain or the authorized designee. The person shall be required to provide proof of sufficient private funds available to pay for all costs associated with transportation to the off-site facility and all costs associated with the medical services, diagnostics, treatment plans, medications, or any other costs associated with off-site medical care.

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Referrals and Coordination of Specialty Care

703.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for referring incarcerated persons who need health care or specialty care that is beyond the resources available in the facility. The policy includes guidelines regarding transportation under appropriate security provisions and the formulation of advance written agreements for around the clock or on-call availability of alternate services. Specialty care includes specialist-provided health care, such as nephrology, surgery, dermatology, and orthopedics.

703.2 POLICY

It is the policy of this office that incarcerated persons have access to necessary hospitalization and specialty services for serious medical needs. This facility will provide, either directly or through contracted sources, specialty care and emergency medical services to incarcerated persons when the need is determined by the Responsible Physician (15 CCR 1206(b); 15 CCR 1206(c)).

703.3 CAPTAIN RESPONSIBILITY

The Captain or the authorized designee, in coordination with the Responsible Physician, is responsible for establishing written agreements with outside specialty health care services for emergency and urgent care that is not available within the facility. In addition, a plan shall be developed for the secure transportation of incarcerated persons to a facility where such care is available.

703.4 REFERRAL TO OFF-SITE MEDICAL CARE

A qualified health care professional shall evaluate the incarcerated person, and if indicated, shall recommend specialty appointments in writing on the order sheet in the incarcerated person's medical record. A referral form should be completed and any supporting documentation attached. The written referral shall be reviewed and authorized, if appropriate, by the Responsible Physician.

A court order is generally required when an incarcerated person requires medical or surgical treatment necessitating hospitalization. A court order is not required for an incarcerated person in need of immediate medical or hospital care, but an application for a court order should be made as soon as practicable when the person's condition requires them to be gone from the facility more than 48 hours (Penal Code § 4011.5).

703.5 OFF-SITE COORDINATION

The qualified health care professional is responsible for recommending off-site medical and psychiatric care for incarcerated persons, coordinating outside appointments, and notifying supervisory custody staff of off-site transportation needs. The Captain should establish a written transportation procedure that ensures incarcerated persons are transported securely and in a timely manner for medical, mental health, dental clinic, or other specialty appointments. The procedure shall include the secure transfer of medical information to the receiving health care service.

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Any conflicts that arise regarding off-site consultation trips will be communicated by the correctional officer responsible for transportation to the Responsible Physician and the Captain or the authorized designee so that modifications may be made.

The jail supervisor shall keep a log of missed appointments to determine if transportation issues are impeding the ability of incarcerated persons to access appropriate medical care. Any issues identified shall be discussed and resolved between the Responsible Physician and the Captain (15 CCR 1206(c); 15 CCR 1206(n)).

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Emergency Health Care Services

704.1 PURPOSE AND SCOPE

The purpose of this policy is to establish plans and procedures for responding to medical emergencies in the facility when the level of medical or mental health services exceeds the licensure or certification of staff who are on-duty, and to define staff training requirements.

704.2 POLICY

It is the policy of this office that emergency medical, mental health, and dental services are available 24 hours a day. These services may include off-site health care services.

704.3 PROCEDURES

The Captain or the authorized designee shall work cooperatively with the Responsible Physician to develop plans and procedures for responding to emergency medical incidents that occur when the level of medical or mental health services needed exceeds the licensure or certification of staff who are on-duty. The plans should include: on-site emergency first aid, basic life support and crisis intervention; emergency evacuation of an incarcerated person from the facility, including security procedures to ensure an immediate transfer when appropriate; on-call physicians, dentists, and mental health professionals; predetermined back-up health care services when the emergency health facility is not located in a nearby community; and the identification of primary, secondary, and tertiary acute care facilities.

The plan may additionally include but is not limited to these components:

(a) Health-trained staff shall respond to all emergencies immediately upon notification.

(b) Contact information for emergency on-call health care services, both on- and off-site, is available and accessible for facility supervisors.

(c) Qualified health care professionals shall respond by reporting to the area of the emergency with the necessary emergency equipment and supplies.

(d) Emergency equipment and supplies are regularly maintained and accessible to the qualified health care professionals and health-trained custody staff.

(e) Most incarcerated persons will be stabilized on-site and then transferred to an appropriate health care unit, if necessary.

(f) Notification of on-call physicians and mental health staff will be done as soon as the situation reasonably allows.

(g) The qualified health care professionals will determine if the incarcerated person needs to be transported to a local emergency room for treatment.

(h) When necessary, facility staff shall activate 9-1-1 and notify a supervisor as soon as reasonably practicable.

(i) The Captain and the Responsible Physician will coordinate on the notification of the incarcerated person's next of kin in cases of serious illness and injury. Death notifications will be made in accordance with the Reporting In-Custody Deaths Policy.

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(j) Procedures to implement a program wherein staff may possess and administer epinephrine medication according to Health and Safety Code § 1797.197a and 22 CCR 100019, including the retention of related records pursuant to Business and Professions Code § 4119.4.

(k) Identifying when court orders to transport prisoners outside the facility for hospitalization may be required and the processes for obtaining those court orders (Penal Code § 4011.5).

(l) Identifying who is responsible to seek a court order when an incarcerated person is expected to be gone from the facility more than 48 hours for medical or surgical treatment necessitating hospitalization (Penal Code § 4011.5).

The goal of any emergency medical response plan is to provide emergency medical care to those in need as expeditiously as possible. While facility size and patient proximity to the health care service will vary, staff training will emphasize responding to medical emergencies as soon as reasonably possible.

704.4 EMERGENCY PROCEDURES

The health services administrator or the authorized designee is responsible for ensuring the following information, equipment, and personnel are available in the event an incarcerated person requires emergency treatment (15 CCR 1206(c)):

(a) A current list of names, addresses, and telephone numbers of all persons and agencies to be notified in an emergency. The list should be available to all health care and custody staff at all times, and should be updated quarterly.

(b) Emergency drugs, equipment, and supplies should be readily available at all times and replenished after each use. An inventory control system should be in use to ensure the necessary supplies are present when needed and have not expired.

(c) A physician, dentist, and mental health professional should be available on-call 24 hours a day, seven days a week (this can include off-site health care services) and there should be a back-up health care services plan.

(d) Ambulances should be accessed through the facility staff or by calling the appropriate emergency number. There should be a clear security plan in place for the transportation of incarcerated persons.

(e) The Shift Supervisor will be contacted and informed of any emergency as soon as practicable.

(f) All decisions regarding medical treatment and the need for emergency transportation are to be made by the qualified health care professionals or health-trained custody staff.

(g) Whenever reasonably possible, the on-call health care service should be notified prior to transporting the incarcerated person to the hospital or other emergency care. However, in the event of a life- or limb-threatening emergency, the incarcerated person shall be sent to the hospital in the most expedient way possible, which may require notifying the specific health care service after the person has been transported.

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704.5 FIRST-AID KITS

The Responsible Physician or the authorized designee is responsible for determining the contents, number, location, and procedures for monthly inspections of all first-aid kits in the facility. The Responsible Physician shall also ensure that (15 CCR 1220):

(a) The contents of each first-aid kit are:
    1. Approved by the Responsible Physician.
    2. Appropriate for its location.
    3. Arranged for quick use.
    4. Documented on the outside cover.
    5. Inventoried every month.
    6. Secured with a plastic tamper-proof seal.
        (a) Once the seal has been broken, the kit should be taken to the medical unit so the contents can be inventoried and restocked.

(b) Written protocols and training materials are developed for the use of medical supplies and equipment by health-trained custody staff.

(c) Inspections and testing of supplies and equipment are documented and maintained in accordance with established records retention schedules.

704.6 TRAINING

The Captain shall ensure that all qualified health care professionals are trained in the delivery of emergency medical services in the custody environment during new employee orientation.

The Captain or the authorized designee shall ensure that all facility staff members who have contact with incarcerated persons receive first-aid and basic life support training during new employee orientation, and that annual refresher training is conducted for the facility and qualified health care professionals. Training should include but not be limited to:

(a) The location of all emergency medical equipment and medications and the proper use of the equipment, such as AEDs.

(b) How to properly summon internal and external emergency services.

(c) Recognition of basic life support signs and symptoms and the actions required in emergency situations.

(d) Administration of basic first aid.

(e) Certification in CPR in accordance with the recommendations of the certifying health organization.

(f) Recognition of the signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal.

(g) Procedures for incarcerated person transfers to appropriate medical facilities or health care service.

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(h) Suicide recognition, prevention, and intervention techniques.

All records of the training provided, testing procedures and the results, and certificates achieved shall be maintained in each qualified health care professional's training file in accordance with established records retention schedules. The Responsible Physician should be bound by similar requirements in the contractual language between the Office and the vendor.

704.7 AUTOMATED EXTERNAL DEFIBRILLATORS (AED)

The Responsible Physician or the authorized designee is responsible for ensuring that an Automated External Defibrillator (AED) is available in the facility and that all staff members are trained in its use. The AEDs shall be inspected and tested at a frequency consistent with the manufacturer’s recommendations to ensure functionality.

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Health Care for Pregnant Incarcerated Persons

705.1 PURPOSE AND SCOPE

The purpose of this policy is to establish prenatal and postpartum health care services for incarcerated persons who are pregnant. Services may include assistance recovering from the effects of potentially unhealthy lifestyles, which could include tobacco use, alcohol and drug abuse or addiction, and a lack of previous adequate medical care. Because of unhealthy lifestyle choices prior to incarceration, many incarcerated person pregnancies are classified as high-risk. This policy is intended to protect the health of the pregnant person and the fetus.

705.2 POLICY

It is the policy of this office that a qualified health care professional should provide comprehensive prenatal and postpartum care for all pregnant persons during their incarceration.

All pregnant and postpartum incarcerated persons shall receive appropriate timely, culturally responsive, and medically accurate and comprehensive care, evaluation, and treatment of existing or newly diagnosed chronic conditions, including mental health disorders and infectious diseases (Penal Code § 4023.8).

705.3 BOOKING - PREGNANCY SCREENING

When booking an incarcerated person who is identified as possibly pregnant or capable of becoming pregnant, the following steps shall be taken:

(a) All incarcerated persons shall be asked if they are pregnant. They shall be offered a voluntary pregnancy test upon intake or by request, within 72 hours of arrival at the jail and administered by medical or nursing personnel (Penal Code § 4023.8(a)).

1. If a test is declined, the incarcerated person shall be asked to sign an Informed Refusal of Pregnancy Test form, and the form shall be filed in the incarcerated person's medical file.

(b) Incarcerated persons confirmed to be pregnant shall, within seven days of arriving at the jail, be scheduled for a pregnancy examination with a physician, nurse practitioner, certified nurse midwife, or physician assistant and examined as provided by Penal Code § 4023.8(d).

(c) Pregnant incarcerated persons who appear to be under the influence of or withdrawing from alcohol or other substances shall be referred to a qualified health care professional.

(d) The Responsible Physician, in collaboration with facility staff, shall ensure the proper clinic visits are scheduled in accordance with appropriate medical standards as provided in Penal Code § 4023.8(e).

(e) A medical record should be opened with a notation indicating pregnancy.

(f) The incarcerated person should be interviewed by a qualified health care professional for the following information, which should be written in the medical record:

1. Last menstrual period (LMP)

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2. Estimated date of conception (EDC)
3. Estimated due date (40 weeks from EDC)
4. Number of pregnancies (gravidity)
5. Number of live births (parity)
6. Therapeutic abortions (TAB)
7. Spontaneous abortions (SAB), aka miscarriages
8. Prenatal care history
9. Current medications
10. Any current adverse symptoms: vaginal bleeding or discharge, abdominal cramping or pain (if yes, notify on-site or on-call physician)
11. High-risk factors, if known: drug or alcohol use/abuse, smoking, previous pregnancy problems, other medical problems (cardiac issues, seizures, diabetes/DM, hypertension/HTN)
12. If use of an opioid or methadone is identified, notify the on-site or on-call physician for orders. The incarcerated person shall be offered medication-assisted treatment and shall be provided information on the risks of withdrawal (Penal Code § 4023.8(i)).

(g) Each pregnant incarcerated person should have:

1. A completed special diet form ordering a pregnant diet.
2. An appointment at the next available obstetric clinic if the person is 10 or more weeks gestation.

(h) Each pregnant incarcerated person shall (Penal Code § 4023.8):

1. Have access to daily prenatal vitamins in accordance with medical standards of care.
2. Be assigned to the lower bunk and lower-tier housing for those housed in a multitier housing unit.

705.4 HOUSING EXCEPTIONS

Incarcerated persons who are known to be pregnant may be housed in any unit appropriate for their classification, with the following exceptions:

(a) All pregnant incarcerated persons identified at intake or the obstetric clinic to be high-risk or who are in their last trimester of pregnancy shall be housed in the medical unit.

(b) Housing in the medical unit shall be by order of the obstetric specialist or the Responsible Physician.

705.5 COUNSELING AND TREATMENT REGARDING PROPER CARE

The Office will provide all necessary counseling and treatment to pregnant incarcerated persons to ensure they are receiving the proper care. To accomplish this, the following shall occur:

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(a) The directions of the obstetric specialist shall be followed throughout the pregnancy and postnatal period. No non-medical staff has the unilateral authority to change or overrule an order or care recommendation made by the Responsible Physician. The Captain and Responsible Physician shall develop a process by which perceived conflicts between medical orders/recommendations and safety and security interests of the jail can be discussed and resolved. Ultimately, the jail must provide adequate treatment for an incarcerated person's medical needs.

(b) The Responsible Physician shall be consulted immediately if a patient is under 10 weeks gestation and has medical concerns.

(c) Any pregnant incarcerated person with medical problems that occur between scheduled obstetric appointments shall be seen by a qualified health care professional. If the qualified health care professional assesses the problem as urgent and a physician is not available on-site, the person shall be sent to the hospital for evaluation.

(d) The incarcerated person shall be advised to notify health-trained custody staff immediately of the following:

1. Vaginal bleeding
2. Acute, persistent abdominal or pelvic pain and/or severe cramping
3. Leaking fluid
4. Decreased or no fetal movement
5. Headache or blurred vision
6. Rapid weight gain with swelling (edema)
7. Abnormal vaginal discharge
8. Symptoms of a urinary tract infection (UTI)
9. Fever

(e) Postpartum examinations and additional appointments shall be scheduled by the obstetric clinic as needed.

(f) An incarcerated person shall have the right to summon and receive the services of any physician, nurse practitioner, certified nurse midwife, or physician assistant of the person's choice in order to determine pregnancy. The Captain may develop reasonable rules and regulations governing the conduct of such examinations. If found to be pregnant, the incarcerated person is entitled to a determination of the extent of medical and surgical services needed from the medical professional of the person's choice. Expenses incurred by the services not provided by the Jail shall be borne by the incarcerated person (Penal Code § 4023.6).

705.6 RESTRAINTS

Incarcerated persons who are known to be pregnant or who are in labor shall not be placed in restraints except as provided in the Use of Restraints Policy and other policies related to medical treatment and transportation outside the secure facility.

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705.6.1 REQUIRED PROCEDURES
The health authority shall, in cooperation with the Captain, develop procedures in conformance with Penal Code § 3407 for the application and removal of restraints on pregnant incarcerated persons. The procedures shall be reviewed and updated at least every two years (15 CCR 1206).

705.7 ABORTIONS

An incarcerated person who chooses to have an abortion shall be given access to abortion services and be requested to sign a statement acknowledging that the person has been provided the opportunity for related counseling and chooses to have an abortion. Any financial obligations for elective abortions will be handled consistent with state law as provided in Penal Code § 4011.1 and 15 CCR 1200. The jail shall provide necessary transportation and supervision for such services. Staff members who object to facilitating an incarcerated person's elective abortion (including arrangements, transportation, and security) should not be required to perform such duties.

705.7.1 STATE REQUIREMENTS FOR ABORTION
The Jail shall not confer authority or discretion to nonmedical staff to decide if a pregnant incarcerated person is eligible for an abortion. Conditions or restrictions on abortion access shall not be imposed. Impermissible restrictions include but are not limited to imposing gestational limits inconsistent with state law, unreasonably delaying access to the procedure, or requiring court-ordered transportation (Penal Code § 4028(a)).

If the pregnant incarcerated person decides to have an abortion, the person shall be offered, but not forced to accept, all due medical care and accommodations until no longer pregnant. A pregnant incarcerated person who decides to have an abortion shall be referred to a licensed professional as specified in Business and Professions Code § 2253(b) (Penal Code § 4023.8(c)).

705.7.2 REQUIRED POSTED NOTICE
The rights provided for pregnant incarcerated persons by Penal Code § 4023.6, Penal Code § 4023.8, and Penal Code § 4028 shall be posted in at least one conspicuous place that all incarcerated persons can access.

705.8 ADVISEMENT AND COUNSELING

Incarcerated persons who are pregnant shall be advised of the provisions of this policy manual, the Penal Code, and the standards established by the Board of State and Community Corrections related to pregnant incarcerated persons (Penal Code § 3407(e); 15 CCR 1058.5).

A qualified health care professional or counselor shall provide comprehensive and unbiased counseling and information to pregnant incarcerated persons regarding their options, including but not limited to prenatal health care, adoption, and abortion. Staff shall not urge, force, or otherwise influence a pregnant incarcerated person's decision (15 CCR 1206(f); Penal Code § 4023.5; Penal Code § 4023.8(b)).

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Pregnant incarcerated persons shall also be referred to a social worker regarding options for feeding, placement, and care of the child after birth, including the benefits of lactation (Penal Code § 4023.8(k)).

705.9 INCARCERATED PERSONS IN LABOR AND POSTPARTUM CARE

Pregnant incarcerated persons who are in labor or are presumed to be in labor shall be treated as an emergency and shall be transported in the least restrictive way possible to a hospital outside the jail (Penal Code § 4023.8(l)).

Pregnant incarcerated persons may have an approved support person present during labor, childbirth, and postpartum recovery while hospitalized (Penal Code § 4023.8(m)).

Incarcerated persons shall be given the maximum level of privacy possible during the labor and delivery process as provided in Penal Code § 4023.8(o).

Upon an incarcerated person's return to the jail, a physician, nurse practitioner, certified nurse midwife, or physician assistant shall provide a postpartum examination within one week from childbirth and as needed for up to 12 weeks postpartum, and shall determine whether the incarcerated person may be cleared for full duty or if medical restrictions are warranted. Postpartum incarcerated persons shall be given at least 12 weeks of recovery after childbirth before they are required to resume normal activity (Penal Code § 4023.8).

705.9.1 INCARCERATED PERSON ACCESS TO NEWBORN CARE

The Responsible Physician should ensure than an incarcerated person is provided access to newborn care that includes access to appropriate assessment, diagnosis, care, and treatment for infectious diseases that may be transmitted from the incarcerated person to the infant (Penal Code § 4023.8(f)).

705.9.2 NOTICE OF SERVICES AFTER INCARCERATION

The Responsible Physician should ensure that eligible incarcerated persons who give birth after incarceration are provided notice of, access to, and written application for community-based programs serving pregnant, birthing, or lactating incarcerated persons (Penal Code § 4023.8(j)).

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Health Authority

707.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the responsibility of the health authority as arranging for all levels of health services, assuring the quality of all health services, identifying lines of medical authority for the incarcerated person health program, and assuring that incarcerated persons have access to all health services.

The policy also establishes properly monitored processes, policies, procedures, and mechanisms to ensure that the contracted scope of services is adequately and efficiently delivered.

The health authority is defined as the Responsible Physician, health services administrator, or health agency responsible for providing all health care services or coordinating the delivery of all health care services (see the Health Care Administrative Meetings and Reports Policy).

707.2 POLICY

The health authority is responsible and accountable for all levels of health care and has the final authority regarding clinical issues within this jail. The health authority is responsible for establishing, implementing, and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment. The health authority also approves all medical decisions and protocols.

707.3 SELECTION PROCESS

The Sheriff or the authorized designee shall select a health authority using an existing office procurement or selection process. The individual or organization selected shall be designated as the health authority for incarcerated person health care on behalf of the facility.

Aside from any monetary or term considerations, the contract between the Office and the selected individual or organization shall minimally include:

(a) Language establishing the scope of services being contracted and the type of health care service needed.

(b) Job descriptions, minimum qualifications, and performance expectations for contract personnel.

(c) Language requiring the contractor to develop appropriate measures and review processes for assessing the quality, effectiveness, and timeliness of the services provided and periodically reporting those findings to the facility.

(d) Identification of a Responsible Physician, who shall serve as the medical authority on treatment matters requiring medical expertise and judgment.

(e) Language regarding the minimum frequency that the health authority shall be present at the facility.

(f) The roles and responsibilities of staff in ensuring that the contractor may adequately deliver services in a safe and secure environment.

(g) A written plan for coordinating medical care from multiple health care services.

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(h) A written plan for the collection and maintenance of incarcerated person health records that is compliant with the Health Insurance Portability and Accountability Act (HIPAA).

(i) Identification of a dispute resolution process for the contracted parties and for incarcerated persons who may be questioning treatment plans.

(j) Language and a plan addressing liability and indemnification for issues related to incarcerated person health care.

The health authority shall be authorized and responsible for making decisions about the deployment of health resources and the day-to-day operation of the health services program. If the health authority is other than a physician, any final clinical judgments shall rest with a single designated Responsible Physician.

The health authority or the authorized designee will meet at least monthly with custody representatives to discuss the health care program and any issues that require correction or adjustment.

Security regulations are applicable to facility staff and health care personnel (15 CCR 1200(a)).

707.4 PROVISION OF HEALTH CARE

The health authority is responsible for arranging the availability of health care services. The qualified health care professionals should determine what medical services are needed on a case-by-case basis. The Captain shall provide the administrative support for making the health care services available to incarcerated persons. Clinical decisions are the sole province of qualified health care professionals and should not be countermanded by non-health care professionals.

If routine health services are provided by medical personnel outside this facility, all office policies regarding treatment, transfer, transportation, or referral of emergencies shall be followed.

The health authority is responsible for ensuring that the health services manual complies with all applicable state and federal law and that a review and update is conducted annually.

An annual audit of the quality and adequacy of health care services shall be done, with corrective action taken when deficiencies are identified (15 CCR 1202).

707.5 LACTATION PROGRAM

The health authority, in cooperation with the Captain, shall develop a program with written procedures for lactating incarcerated persons to express breast milk for feeding their infants or toddlers, cessation of lactation or weaning, and for maintaining their breast milk supply pending delivery to an approved person or the incarcerated person's release (Penal Code § 4002.5).

The health authority should ensure that the policy is posted in all locations where medical care is provided and is communicated to members who interact with or oversee pregnant or lactating incarcerated persons (Penal Code § 4002.5).

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Health Appraisals

708.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process for conducting health appraisals on all incarcerated persons following their arrival at this facility and for the continuity of care for incarcerated persons who remain in custody for extended periods. Further, it is to ensure the incarcerated person's health care needs are met and that health care started at one facility continues as needed.

708.2 POLICY

It is the policy of this office that all incarcerated persons will receive a comprehensive health appraisal within 14 days of incarceration unless there is documented evidence that the incarcerated person has received a health appraisal within the previous 90 days. In addition to the initial health appraisal, the person should have an annual evaluation to reassess their health status and to provide access to preventive medicine through education and lifestyle programs.

708.3 INITIAL HEALTH APPRAISAL

(a) Qualified health care professionals shall have access to the daily incarcerated person roster. From this, they can determine who needs a health appraisal and hands-on physical evaluation. The health appraisal should include:

1. A review of earlier medical screening information.
2. Administration of a skin test for tuberculosis (TB).
3. Recording of height and weight.
4. Recording of vital signs (blood pressure, pulse, respiration rate, and temperature).
5. Ordering other tests or examinations as appropriate.
6. The collection of any additional data needed to complete medical, dental, psychiatric, and immunization histories.

(b) Incarcerated persons shall be scheduled for a hands-on physical evaluation by a qualified health care professional within 48 hours of arrival at the jail. The evaluation shall include:

1. Review of the medical screening.
2. Review of the health history questionnaire.
3. Review of all vital signs and TB skin test results.
4. A medical examination, including a review of mental and dental status.
5. Initiation of treatment or therapy, as appropriate.
6. Development and implementation of a treatment plan, including recommendations for housing, job assignment, and program participation.

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The Responsible Physician shall review and authorize all health appraisals within 72 hours.

708.3.1 PRISON RAPE ELIMINATION ACT (PREA) SCREENING FOLLOW-UP
Incarcerated persons who have an identified history of sexual victimization shall be offered a follow-up meeting with a qualified health care or mental health provider within 14 days of intake screening (28 CFR 115.81).

708.4 ANNUAL HEALTH EXAMINATIONS

The Responsible Physician will determine the criteria for periodic health examinations for incarcerated persons. Incarcerated persons should be scheduled for an annual health examination within 14 days of the person's annual incarceration anniversary (15 CCR 1208.5). The examination should include:

- A review of current vital signs and weight.
- A TB skin test and review of the results.
- An evaluation of any health-related issues arising since the last health evaluation.
- Initiation of treatment, as appropriate.
- Any updates to the incarcerated person treatment plan.
- Any other specific components determined by the Responsible Physician based on the age, gender, and health of the incarcerated person (15 CCR 1208.5).

All incarcerated persons should also be examined prior to release to protect both the incarcerated person and the public.

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Healthy Lifestyle Promotion

709.1 PURPOSE AND SCOPE

The purpose of this policy is to affirm the Office's commitment to promote healthy lifestyle choices by incarcerated persons by providing health education and self-care learning opportunities that include classes, audio and video presentations, and brochures and pamphlets.

709.2 POLICY

This office will encourage incarcerated persons to maintain a healthy lifestyle by providing health education and wellness information.

709.3 HEALTH CARE ENCOUNTERS

During health care encounters, the qualified health care professionals should instruct incarcerated persons at the time service is rendered on how to avoid preventable diseases, such as athlete's foot, flu and the common cold, tooth decay, and sexually transmitted diseases. Such instruction should be documented in the health record. Documentation should include the topics discussed, the written materials provided, if any, and that the incarcerated person acknowledged an understanding of the information.

Informative brochures from various health organizations should also be available to incarcerated persons in the medical unit.

Appropriate topics for incarcerated person education include:

- Access to health care services
- Dangers of self-medication
- Personal hygiene and dental care
- Prevention of communicable diseases
- Education about smoking cessation
- Family planning
- Self-care for chronic conditions
- Self-examination for health concerns
- The benefits of physical fitness
- Chronic diseases and disabilities
- Counseling in preparation for release
- Domestic violence
- Medications
- Nutrition
- Sexually transmitted diseases

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- Substance abuse
- Tuberculosis

709.4 GENERAL HEALTH PROMOTION INFORMATION

Whenever possible, written materials and audio and video presentations should be made available to incarcerated persons for educational purposes. These materials are often available in bulk quantity through the public health department and other community-based organizations.

All items intended for distribution to the incarcerated person population shall be approved by the Captain to avoid any conflict with rules regarding contraband in the facility.

Classes should also be conducted to inform the incarcerated person on various healthy lifestyles. Class schedules should be posted in advance, curriculum and lesson plans developed, and attendance rosters maintained.

All documentation regarding health education and self-care should be retained in incarcerated person medical files in accordance with established records retention schedules. Statistics on program offerings and attendance may be used to determine program effectiveness and interest.

709.5 FAMILY PLANNING SERVICES

All incarcerated persons shall be offered family planning services at least 60 days prior to a scheduled release date (Penal Code § 4023.5).

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Transfer Screening

710.1 PURPOSE AND SCOPE

This policy recognizes that incarcerated persons are frequently transferred within the correctional authority's system and to facilities outside the system. This policy establishes a process for medical screening of transferred incarcerated persons to ensure continuation of care and avoid unnecessary diagnostics.

710.2 POLICY

It is the policy of this office that incarcerated persons who are transferred to another jail, correctional system, or health care facility will be screened prior to transfer to ensure that the receiving facility can assume and continue proper care. Medical needs of the incarcerated person will be clearly communicated to the receiving facility, including the ongoing treatment plan, scheduled surgeries, and outside appointments.

Incarcerated persons who are transferred to other facilities shall be sent with a discharge summary that includes information about the incarcerated person's medical and mental health condition, the current treatment plan, and any medications, if needed (15 CCR 1206(n)).

710.3 TRANSFERS

Any incarcerated person being transferred to another correctional or health care facility will be medically screened prior to transfer as described below.

The medical screening should include:

(a) A determination of whether the incarcerated person is being treated for a medical, mental health, or dental problem.

(b) A determination of whether the incarcerated person has any apparent, current medical, mental health, or dental needs or complaints.

(c) What medication, if any, the incarcerated person is presently prescribed.

(d) Whether the incarcerated person has any evidence of abuse or trauma.

(e) Whether the incarcerated person has any physical deformities or special daily living assistance needs.

(f) The incarcerated person's classification and clearance status (i.e., general population, separation).

(g) Whether the incarcerated person has any pending follow-up appointments or requirements.

Completed discharge summaries, including the medical screening results, shall accompany incarcerated persons being transferred to another office's jurisdiction to ensure that the receiving health care service can assume and continue necessary care. A release of information authorization is not required.

- Current health conditions

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- Current treatments and medications
- Upcoming appointments and diagnostic studies
- Allergies
- Copies of any health information that is critical to continuity of care

If the receiving facility requests a copy of the medical record, it will be supplied within five working days.

The discharge summary and any related medical records being transferred shall be placed in a file or envelope that maintains the confidentiality of the incarcerated person's medical information. The transporting personnel shall be provided separate written instructions regarding medication or health interventions, including necessary precautions that are required en route. The transporting personnel shall also document on the transfer log the date, time, and name of the person receiving the incarcerated person and the medical records.

710.3.1 EXTENDED TRANSPORTATION OF INCARCERATED PERSONS

When an incarcerated person will be in transfer status for several days and housed temporarily at various custody facilities along the way, a medical transfer packet shall be prepared by the qualified health care professional in a form that will advise the temporary housing facilities of any medical needs of the incarcerated person. When medically appropriate, a small supply of medication should be provided with the medical transfer packet so it will be available to the temporary housing facility as needed.

710.4 RECEIVING TRANSFERRED INCARCERATED PERSONS

When an incarcerated person being transferred to this facility arrives without a full and comprehensive medical transfer packet from another facility, the incarcerated person shall be medically screened and receive a comprehensive health appraisal in accordance with the Medical Screening Policy and Health Appraisals Policy. The medical department of the sending facility should be promptly contacted to determine if the transferred incarcerated person has any medical needs that require immediate attention or any scheduled surgeries or appointments with community health care services. Arrangements should then be made with the sending facility for the delivery of a more detailed review of the incarcerated person's medical needs.

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Medical Screening

711.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a medical screening process for newly booked incarcerated persons so that medical, mental health, and dental issues are properly identified and addressed, and to obtain a medical clearance when necessary.

711.2 POLICY

It is the policy of this office that a medical screening be performed on all incarcerated persons upon arrival at the intake area to ensure that existing, emergent, and urgent health care, dental, or mental health needs are identified, risks are assessed, and incarcerated persons with contagious and communicable diseases are properly classified and housed for their health and the health of the general population (15 CCR 1051; 15 CCR 1206.5(a); 15 CCR 1207).

711.3 ELEMENTS OF MEDICAL SCREENING

The medical screening shall be performed by health services personnel when available, but may also be performed by health-trained correctional staff. The Responsible Physician, in cooperation with the Captain, shall establish protocols for use by health-trained correctional staff during the medical screening. All completed medical screenings should be forwarded to the Responsible Physician. A review of any positive finding shall be performed by a qualified health care professional.

Regardless of training, no incarcerated person should be allowed to conduct health care evaluations or provide treatment to any other incarcerated person.

All incarcerated persons shall complete a medical screening as part of the booking process. If an arrestee refuses to cooperate with the medical screening, the screener will complete as much of the health assessment as reasonably possible and the arrestee will be closely observed until the arrestee cooperates with the remainder of the screening process.

The Responsible Physician should work cooperatively with the Captain to develop the medical screening forms, which should be applicable for general health, mental health, and suicide screening purposes. The forms should be completed no later than 24 hours after the arrival of an incarcerated person but prior to an incarcerated person being housed in the general population. All medical screening forms shall be forwarded to the medical unit and the qualified health care professionals shall be alerted to those that need priority attention.

711.3.1 MEDICAL SCREENING INQUIRY

The medical screening inquiry should include a review of the incarcerated person's prior jail medical record, if any, and document the following:

- History of infectious or communicable diseases that are considered serious in nature; current treatment, symptoms, medications, chronic illness, or health issues, including communicable diseases, or special health requirements, and/or dietary needs (15 CCR 1051)

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- Acute dental problems
- Past and recent serious communicable disease symptoms (e.g., chronic cough, coughing up bloody sputum, lethargy, weakness, weight loss, loss of appetite, fever, night sweats) (15 CCR 1051)
- Mental illness, including psychiatric hospitalizations within the last three months
- Gender issues
- History of or current suicidal ideation
- Acute allergies
- History of or current prescription or illegal drug use, including the time of last use
- History or current symptoms of substance abuse withdrawal
- Current, recent, or suspected pregnancy; any history of gynecological problems and present use and method of birth control
- Appearance or history of developmental disabilities, body deformities, or other physical abnormalities
- Incarcerated persons who have given birth in the past year and are charged with murder or attempted murder of their infants shall be referred to mental health services at the time of booking (15 CCR 1207.5)
- Any other health issues as identified by the Responsible Physician

Qualified health care professionals should assist in developing specific mental health medical screening questions and should provide training in analyzing incarcerated person responses. The Responsible Physician should establish the role of the qualified health care professional in the medical screening process.

Should the medical screening identify a need for a more comprehensive medical assessment of the incarcerated person, a qualified health care professional should initiate appropriate follow-up action, which may include transporting the incarcerated person to an off-site medical facility.

711.3.2 MEDICAL SCREENING OBSERVATION

The staff member completing the medical screening observation shall document the following observations:

- Appearance (e.g., sweating, tremors, anxious, disheveled)
- Behavior (e.g., disorderly, appropriate, insensible)
- State of consciousness (AVPU):
    - Alert - spontaneously responsive
    - Verbal - requires verbal stimulation to respond
    - Pain - requires painful stimulation to respond
    - Unresponsive - does not respond

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- Ease of movement (e.g., body deformities, gait)
- Breathing (e.g., persistent cough, hyperventilation)
- Skin (e.g., lesions, jaundice, rashes, infestations, bruises, scars, recent tattoos, needle marks or other indications of drug abuse)
- Any other observable health symptoms

The Captain and the Responsible Physician should develop a procedure through which it can be reliably determined what prescription medications the incarcerated person is taking and the medical urgency for continuing those medications without interruption.

711.3.3 DOCUMENTATION

Written documentation of the medical screening should include the name of the screener, the date and time, and the following information:

- Immediate or scheduled referral to a medical, dental, or mental health professional
- Guidance regarding housing placement, including disciplinary detention if necessary (15 CCR 1051)
- Guidance regarding activity limitations and work assignment
- The incarcerated person's responses to questions asked by the interviewer
- Other individualized observations and recommendations

The initial medical screening should become part of the incarcerated person's medical record and should be retained in accordance with established records retention schedules.

711.4 MEDICAL SCREENING DISPOSITIONS

Persons who are brought to the facility and are obviously in need of immediate medical attention shall be referred to an emergency medical facility for clearance. Conditions that require a medical clearance prior to booking include but are not limited to the following:

- Unconsciousness
- Uncontrolled bleeding
- Significant injuries from a motor vehicle accident
- Significant injuries from an altercation
- Significant injuries from handcuffs or other restraint devices
- Knife wounds, gunshot wounds, or lacerations
- Exposure to pepper spray, TASER® device deployment, or blunt force trauma during arrest
- Intoxication to a degree that the individual cannot speak coherently or stand or walk unaided
- Recent drug overdose

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- Suspected or known complications of pregnancy
- Active seizures
- Suspected or known complications of diabetes
- Exhibits behavior indicating a potential danger to themselves or others
- Active tuberculosis or other serious contagious diseases
- Actively suicidal
- Any other medical condition which, in the opinion of the booking personnel, should be urgently referred for evaluation by medically trained personnel

Incarcerated persons with these medical conditions are not suitable for admission to the facility until medically cleared by a qualified health care professional. This office requires medical clearance from an outside entity when such incarcerated persons are identified.

Medical clearance documentation shall include the medical diagnosis, treatment received at the emergency medical facility, any medications prescribed, any ongoing medical requirements, and any follow-up medical care that may be indicated before the arrestee is accepted for booking.

The Captain is responsible for notifying local police agencies and medical facilities of the jail admission refusal policy and the required clearance documentation.

Based upon the information obtained during the screening process, the medical classification disposition of the incarcerated person shall be one of the following:

- General population or other appropriate cell assignment
- General population or other appropriate cell assignment and timely referral to appropriate health care services
- Immediate referral to health care services prior to housing

711.5 HEALTH APPRAISAL

Generally, a comprehensive health appraisal should occur within 14 days of booking (see the Health Appraisals Policy). However, when it is appropriate and based on an incarcerated person's health condition, an early health appraisal should be recommended. An incarcerated person may also be cleared for housing in general population with a prompt referral to the appropriate health care services when it is in accordance with the incarcerated person's overall classification. Upon the identification of an incarcerated person who may be in a behavioral crisis, a physician's opinion will be secured within 24 hours, or next sick call, whichever is earliest (15 CCR 1052).

711.5.1 MEMBERS CONDUCTING HEALTH APPRAISALS

Medical screening should be completed by licensed health personnel or trained facility staff, with documentation of staff training regarding site-specific forms with appropriate disposition based on responses to questions and observations made at the time of screening (15 CCR 1207).

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711.5.2 TELEHEALTH

Telehealth may be incorporated into procedures used to identify and evaluate incarcerated persons who may be in a behavioral crisis (15 CCR 1052).

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Mental Health Services

712.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that all incarcerated persons have access to mental health services and that incarcerated persons identified as needing these services are referred appropriately.

712.1.1 DEFINITION

Definitions related to this policy include:

Mental health services - A variety of psycho-social and pharmacological therapies, either individual or group, including biological, psychological, and social therapies to alleviate symptoms, attain appropriate functioning and prevent relapse.

712.2 POLICY

It is the policy of this office that a range of mental health services shall be available for any incarcerated person who requires them (15 CCR 1206(g); 15 CCR 1207; 15 CCR 1209).

712.3 MENTAL HEALTH SERVICES

The Captain should collaborate with the local public and private organizations that offer mental health services, treatment, and care to those incarcerated persons in need of such services.

In coordination with the health authority, the Responsible Physician, and the Captain, such services shall include but are not limited to (15 CCR 1209):

- Identification and referral of incarcerated persons with mental health needs.
- Mental health treatment programs provided by qualified staff, including the use of telehealth.
- Crisis intervention.
- Basic mental health service provided to incarcerated persons as clinically indicated.
- Medication support services.
- Suicide prevention.
- Referral, transportation, and admission to licensed mental health facilities for incarcerated persons whose psychiatric needs exceed the treatment or housing capability of the facility (Penal Code § 4011.6; Penal Code § 4011.8).
- Provision of health services sufficiently coordinated such that care is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed.
- Obtaining and documenting informed consent.
- Release planning services.

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712.4 BASIC MENTAL HEALTH SERVICES

Incarcerated persons may be referred to a qualified health care professional through a variety of methods, which include the medical screening process, the mental health appraisal process, and self-referral or staff referral. Qualified health care professionals should respond to all referrals in a timely manner and initiate the appropriate treatment services.

(a) If the incarcerated person has received previous mental health treatment, the incarcerated person should be asked to complete a release of information form so that treatment records can be obtained.

(b) Incarcerated persons who have been determined to be in need of ongoing mental health services after their release from this facility should be provided with information about community mental health treatment resources. Arrangements for more comprehensive mental health care may be made, if appropriate.

(c) Incarcerated persons who are identified as having developmental disabilities should be evaluated for special housing needs. The qualified health care professional should work in cooperation with classification personnel to establish the best, reasonably available housing option.

(d) Incarcerated persons who are suspected or known to have a developmental disability should receive a mental health appraisal by the qualified health care professional or health-trained custody staff as soon as reasonably practicable but no later than 24 hours after booking. Contact will be made with the regional center within 24 hours, excluding holidays and weekends, when an incarcerated person is suspected or confirmed to have a developmental disability. Incarcerated persons who have a developmental disability should be referred, where appropriate and available, for placement in non-correctional facilities or in units specifically designated for housing a person with a developmental disability (15 CCR 1057).

(e) Incarcerated persons enrolled in mental health treatment, including psychiatric medication management, should be provided information regarding the risks and benefits to treatment. Informed consent documents should be signed by the incarcerated person to establish the incarcerated person's consent to treatment. The signed forms should be placed in the incarcerated person's health record and retained in accordance with established records retention schedules.

(f) A treatment plan should be established for all incarcerated persons enrolled in mental health services.

1. Psychiatric and special needs treatment plans shall be reviewed every 180 days, at a minimum. Incarcerated persons taking psychotropic medication should be seen by a psychiatrist at least every 90 days. Incarcerated persons classified as requiring mental health special needs should be seen at least monthly by a qualified health care professional.

2. Incarcerated persons enrolled in other ongoing forms of mental health treatment should have treatment plan updates completed every six months, at a minimum.

3. Incarcerated persons who present to the qualified health care professional as having notable difficulty adjusting to the correctional environment, but who are not diagnosed with a serious mental illness, should be evaluated for the

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appropriateness of mental health treatment. Consideration should be given to the qualified health care professional and the facility staff working together to address the issues that may be affecting the incarcerated person's ability to adjust to incarceration.

(g) The qualified health care professional should utilize a site-specific suicide prevention program to ensure the safety of incarcerated persons who present with a risk of self-harm.

1. Qualified health care professionals should be assigned to daily rounds in the separation unit to determine the mental health status of incarcerated persons housed there.
2. Separated incarcerated persons may be referred by the jail staff to qualified health care professionals for follow-up if concerns arise regarding their ability to function in disciplinary detention.

(h) If the qualified health care professional has concerns about the level of mental health services that are required to manage an incarcerated person housed in the facility, the health authority shall be notified and the Responsible Physician shall be the decision-maker regarding the health care needs of the incarcerated person.

1. The Responsible Physician may consult with a psychiatrist, specialist, or other health care service in determining whether the incarcerated person should be transferred to a facility that is better equipped to handle the incarcerated person's psychiatric needs.
2. The Responsible Physician should notify the Captain of the request to transfer the incarcerated person for medical treatment.
3. The case review and disposition of the patient should be documented in the incarcerated person's health record and retained in accordance with established records retention schedules.

Incarcerated persons determined to be in need of substance abuse treatment services should be informed of the facility programs available and shall be provided information about community substance abuse treatment resources.

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Mental Health Screening and Evaluation

713.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process by which all incarcerated persons receive an initial mental health screening by qualified mental health staff or health-trained custody staff using an instrument developed by qualified health care professionals. The initial mental health screening takes place at the time of booking, and is for the safety of the incarcerated person and the general population. It helps the custody staff to make appropriate classification and housing decisions and to ensure that the treatment and intervention needs of the person are met.

713.2 POLICY

It is the policy of this office that all individuals booked into the facility shall receive an initial mental health screening by a qualified mental health professional, qualified mental health staff, or health-trained custody staff. A more comprehensive medical appraisal shall be conducted within the first 14 days of incarceration to confirm the initial findings and to ensure that, if needed, an appropriate treatment plan that meets the individual needs of the incarcerated person is in place (15 CCR 1052; 15 CCR 1209(a)(1)).

713.3 MENTAL HEALTH SCREENING

The initial screening is designed to identify whether mental health conditions exist that require immediate or ongoing intervention. The screening shall be performed prior to the incarcerated person being placed in general housing and should include:

(a) Inquiry into whether the incarcerated person is or has:
    1. Thoughts or history of suicidal behavior.
    2. Been prescribed or is taking psychotropic medication or antidepressants.
    3. Been treated for mental health issues.
    4. A history of psychiatric treatment.
    5. A history of treatment for substance abuse or been treated for substance abuse.

(b) Any observations of:
    1. Appearance and behavior.
    2. Abuse, injury, or trauma.
    3. Symptoms of aggression, depression, psychosis.

(c) A determination of whether the incarcerated person is cleared for or referred to:
    1. General housing.
    2. General housing with mental health referral.
    3. Mental health emergency treatment.

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This information shall be recorded on the receiving screening form. It will become part of the incarcerated person's health record and be retained in accordance with established records retention schedules.

713.4 MENTAL HEALTH APPRAISAL

All new incarcerated persons shall receive a mental health appraisal by a qualified mental health professional within 14 days, unless documentation exists that an appraisal has been completed within the previous 90 days. Mental health appraisals should include but not necessarily be limited to the following assessments:

- Mental health status
- Suicide potential
- Violence potential
- Previous psychiatric treatment
- Any history of treatment with psychotropic medication or antidepressants
- Substance abuse or treatment for substance abuse
- Educational history
- Sexual abuse victimization (28 CFR 115.81)
- Predatory behavior or perpetrated sexual abuse (28 CFR 115.81)

713.5 MENTAL HEALTH REFERRALS

Qualified mental health staff should administer a complete and thorough evaluation of incarcerated persons referred for treatment as soon as practicable but no later than 14 days from the referral. The evaluation should include:

- Review of the incarcerated person's screening and appraisal information.
- Observations of the incarcerated person's behavior.
- Information gathered from interviews and testing to determine the incarcerated person's mental health condition, intellect, personality, problems, and ability to deal with a custody environment.
- Collection of the Incarcerated person's mental health history.

Following the evaluation, a plan of treatment and maintenance, which may include a complete psychological evaluation, should be developed to meet the incarcerated person's needs.

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Special Needs Medical Treatment

714.1 PURPOSE AND SCOPE

This purpose of this policy is the proper treatment and management of incarcerated persons with chronic diseases and special needs. This is accomplished by utilizing nationally recognized, generally accepted clinical guidelines and establishing communication between qualified health care professionals and custodial personnel.

714.1.1 DEFINITIONS

Definitions related to this policy include:

Chronic disease - An illness or condition that affects an individual's well-being for an extended interval, usually at least six months, and generally is not curable but can be managed for optimum functioning within any limitations the condition creates in the individual.

Chronic disease program - The incarcerated person has regular clinic visits during which a qualified health care professional monitors the medical condition and adjusts treatment as necessary. The program also includes patient education for symptom management.

714.2 POLICY

It is the policy of this office that all individuals identified as having chronic diseases or special needs are enrolled in a chronic disease program to decrease the frequency and severity of the symptoms, prevent disease progression and complication, and foster improved function.

When a qualified health care professional recognizes that an incarcerated person requires accommodation due to a special need, correctional personnel should be notified in writing. Consultation between the qualified health care professional and custodial personnel should occur regarding the condition and capabilities of persons with known special needs prior to a housing, work or program assignment, transfer to another facility, or the imposition of disciplinary action.

Qualified health care professionals shall furnish special needs information regarding incarcerated persons to custodial personnel in order for them to accurately classify and house persons in the facility. It is the responsibility of the Captain or the authorized designee to ensure that persons with special needs are receiving the proper care and that their needs are effectively communicated to custodial staff for appropriate accommodation (15 CCR 1206(g)).

714.3 CLINICAL PRACTICE GUIDELINES

The Responsible Physician or the authorized designee is responsible for establishing and annually reviewing clinical protocols to ensure consistency with the National Clinical Practice Guidelines.

The clinical protocols for the management of chronic disease and special needs include but are not limited to the following:

- Asthma
- Communicable diseases

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- Incarcerated persons with developmental disabilities
- Diabetes
- Dialysis
- Frail or elderly incarcerated persons
- High blood cholesterol
- HIV
- Hypertension
- Mental illness
- Mobility impairments
- Pregnancy
- Seizure disorder
- Suicidal ideation
- Terminally ill
- Tuberculosis

714.4 DOCUMENTATION

Documentation in an incarcerated person's medical record should include information regarding the chronic disease protocols deployed, the person responsible for the various protocols, the extent to which the chronic disease protocols are being followed, and should include but not be limited to:

- The frequency of follow-up for medical evaluation.
- How the treatment plan was adjusted when clinically indicated.
- The type and frequency of diagnostic testing and prescribed therapeutic regimens.
- The prescribed instructions for diet, exercise, adaptation to the correctional environment, and medication.
- Clinical justification of any deviation from the established protocol.

A master list of all chronic disease and special needs patients should be maintained by the Responsible Physician or the authorized designee.

714.5 CHRONIC CARE PROGRAM

(a) Newly incarcerated persons shall receive a medical screening. This screening includes the documentation of any acute or chronic health problems or injuries, special needs, and any medications or treatments the incarcerated person is currently receiving.

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1. If the person has been incarcerated previously, their health records should be reviewed.
2. A special needs communication form should be completed and sent to the classification unit, the Shift Supervisor, and the housing officer to ensure the person is properly housed.
3. Current medications being taken by the incarcerated person should be verified and continued as deemed appropriate by the Responsible Physician.
4. A health assessment shall be completed within 14 days of incarceration and a physical examination conducted within six months of incarceration.
5. The status of a special needs incarcerated person should be evaluated, at minimum, every 90 days to determine the need for the continued designation.

(b) The Captain or the authorized designee and the Responsible Physician or the authorized designee should consult with one another prior to taking action regarding any special needs incarcerated person with regard to housing, program or work assignments, disciplinary measures, or transfers to other facilities.

1. When immediate action is required and prior consultation is not reasonably practicable, that consultation should occur as soon as practicable but no later than 72 hours post-action.

(c) Individual treatment plans are used to guide treatment for episodes of illness. The format for treatment planning may vary, but should include, at a minimum:

1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
2. The type and frequency of diagnostic testing and therapeutic regimens.
3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment, and medication.

(d) Reasonable effort should be made to obtain health information and records from previous health care services, with the consent of the incarcerated person, when the person has a medical problem that was being treated prior to incarceration.

(e) Upon transfer to another correctional facility, a summary of the person's current condition, medications, and treatment plan will be forwarded to the receiving facility in a sealed envelope to maintain incarcerated person privacy.

(f) Requests for health information from community health care services must be submitted with the person's written consent. If the incarcerated person does not consent, the community health care service may be advised that the person is an incarcerated person and the health information may not be provided without the person's written consent.

(g) Critical specialty medical procedures or treatment, such as dialysis, which cannot be provided at the Tehama County Sheriff's Office do not require a court order unless the care is expected to prevent the incarcerated person from returning within 48 hours (Penal Code § 4011.5).

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(h) When incarcerated persons are sent out of this facility for emergency or specialty treatment, written information regarding the person's current medical status and treatment should accompany the incarcerated person. Upon return to the facility, treatment recommendations from outside health care services should be reviewed by the Responsible Physician or the authorized designee for any changes in the custodial environment or in-house treatment plan.

(i) Incarcerated persons identified as developmentally disabled shall be considered for discharge planning services.

1. The local center for the developmentally disabled will be contacted within 24 hours of incarceration of a person with developmental disabilities.
2. Referrals will be made to the jail's discharge planning specialist. If no such position exists, the need for transition planning should be noted on the treatment plan.

(j) With the incarcerated person's written consent, the health services staff should:

1. Share necessary information with outside health care services.
2. Arrange for follow-up appointments.
3. Arrange for transfer of health summaries and relevant parts of the health record to community providers or others assisting in planning or providing for services upon release.

(k) Contacts with community providers should be documented via an administrative note in the patient's health record.

(l) Patients with serious mental health issues, including those receiving psychotropic medication, will be informed about community options for continuing treatment and provided with follow-up appointments when possible.

(m) Medications should be provided as appropriate.

(n) The Responsible Physician is responsible for ensuring that local site-specific procedures facilitate discharge planning.

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Communicable Diseases

715.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for facility staff to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

(a) Managing the risks associated with bloodborne pathogens (BBP), aerosol transmissible diseases (ATD), and other potentially infectious substances.

(b) Providing appropriate treatment for ill incarcerated persons while minimizing the risk of the spread of disease.

(c) Making decisions concerning the selection, use, maintenance, limitations, storage, and disposal of personal protective equipment (PPE).

(d) Ensuring proper reporting to local, state, and federal agencies.

(e) Establishing procedures for the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment, and follow-up care for new incarcerated persons, and for incarcerated persons or employees who have contracted a communicable disease from an ill person.

(f) Providing appropriate treatment, counseling, and confidentiality should an employee become exposed to a communicable disease.

(g) Protecting the privacy rights of all personnel who may be exposed to or contract a communicable disease during the course of their duties.

715.1.1 DEFINITIONS

Definitions related to this policy include:

Aerosol transmissible disease (ATD) - A disease or pathogen for which droplet (whooping cough, influenza, streptococcus) or airborne (measles, chickenpox, tuberculosis) precautions are required.

Aerosol transmissible disease (ATD) exposure - Any event in which all of the following has occurred:

- An employee has been exposed to an individual who has or is suspected to have an ATD, or the employee is working in an area or with equipment that is reasonably expected to contain aerosol transmissible pathogens associated with an ATD.
- The exposure occurred without the benefit of applicable exposure controls required by this section.
- It reasonably appears from the circumstances of the exposure that transmission of disease is likely sufficient to require medical evaluation.

Airborne precautions - Include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for AIIRs, for

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infectious agents such as measles, chickenpox, or tuberculosis in addition to medical personnel wearing masks or respirators.

Bloodborne pathogens (BBP) - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include but are not limited to hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV).

Bloodborne pathogen exposure - Includes but is not limited to the contact of blood or other potentially infectious materials with the eye, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, abrasions, or any contact with blood or body fluids that is synonymous with bloodborne pathogen exposure as defined by the federal Centers for Disease Control and Prevention (CDC).

Ectoparasitic infections - Parasites that live on the skin, such as lice (pediculosis) and scabies (sarcoptic mange). Both infections are communicable and may lead to secondary infections.

HBV - Hepatitis B

HIV - Human Immunodeficiency Virus

Medical isolation - Housing in a separate room with a separate toilet, hand-washing facility, soap and single-service towels, and with appropriate accommodations for showering.

NIOSH - National Institute for Occupational Safety and Health

Nosocomial - Acquired during hospitalization. Nosocomial infections are infections that present 48 to 72 hours after admission to a hospital.

OSHA - Occupational Safety and Health Administration

Personal protective equipment (PPE) - Respiratory equipment, garments, gloves, and other barrier materials designed to reduce employee exposure to hazards.

Source control measures - The use of procedures, engineering controls, and other devices or materials to minimize the spread of airborne particles and droplets from an individual who has or exhibits signs or symptoms of having an ATD.

Standard precautions - Infection control practices used to prevent the transmission of disease that can be acquired by contact with blood, bodily fluids, non-intact skin (including rashes), and mucous membranes. Applies to all incarcerated persons receiving care, regardless of diagnosis or presumed infection status.

Universal precautions - A set of precautions designed to prevent transmission of HIV, HBV, and other bloodborne pathogens when providing first aid or health care.

715.2 POLICY

It is the policy of this office to maintain an effective program that focuses on the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment, follow-up and proper reporting to local, state and federal agencies of communicable

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diseases. The program is designed to ensure that a safe and healthy environment is created and maintained for all occupants of the facility (15 CCR 1051; 15 CCR 1206.5; 15 CCR 1206(i)).

715.2.1 EXPOSURE CONTROL OFFICER

The Captain shall designate an Exposure Control Officer (ECO) who shall be responsible for:

(a) Establishing written procedures and a training program related to BBPs.

(b) Establishing written procedures and a training program related to ATDs.

(c) Working with the Captain to develop and administer any additional related policies and practices necessary to support the effective implementation of an Exposure Control Plan (ECP), including specific symptoms that require separation of an incarcerated person until a medical evaluation is completed (15 CCR 1051).

(d) Acting as a liaison during OSHA inspections and conducting program audits to maintain a current ECP.

(e) Maintaining a current list of facility staff requiring training, developing, and implementing a training program, maintaining class rosters and quizzes, and periodically reviewing the training program.

(f) Reviewing and updating the ECP annually, on or before January 1 of each year.

Supervisors are responsible for exposure control in their respective areas. They shall work directly with the ECO and the affected employees to ensure that the proper procedures are followed.

715.2.2 PROCEDURES

The ECO shall be responsible for establishing, implementing, and maintaining effective written procedures for the following:

(a) Incorporating the recommendations contained in the CDC's "Respiratory Hygiene/ Cough Etiquette in Healthcare Settings."

(b) Screening and referring cases and suspected cases of ATD to appropriate facilities within five hours of identification.

(c) Creating a multidisciplinary team, including the Responsible Physician, and security and administrative representatives, who will meet at least quarterly to review and discuss communicable disease issues and activities. The ECO shall retain minutes of these meetings in accordance with established records retention schedules. The ECO also shall coordinate with the local public health entity on appropriate policy and procedure.

(d) Conducting an assessment on the incidence and prevalence of tuberculosis (TB) within the facility's population and the surrounding community. If the statistics indicate a risk, the ECO shall develop a written plan that addresses the management of TB, from testing to follow-up care.

(e) Communicating with employees, other employers, and the local health officer regarding the suspected or diagnosed infectious disease status of referred incarcerated persons, including notification of exposed employees.

(f) Reducing the risk of ATDs through the ECP and reviewing the plan at least annually.

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(g) Reducing the risk of exposure to BBPs (HIV, hepatitis).

(h) Providing a system of medical services for employees who may become exposed to communicable diseases during the course of their employment.

(i) Ensuring that all employees who have occupational exposure to communicable diseases participate in a training program at the time of their initial assignment, at least annually thereafter, and any time there is a change in working conditions.

(j) Making all exposure and treatment plans available for employees, employee representatives, and NIOSH review.

(k) Establishing procedures to ensure that members request exposure notification from health facilities after potential exposure to a person who may have a communicable disease who has been transported to a health facility and that the employee is notified of any exposure as required by Health and Safety Code § 1797.188.

(l) Informing members of the provisions of Health and Safety Code § 1797.188 (exposure to communicable diseases and notification).

(m) Acting as the designated officer liaison with health care facilities regarding communicable disease or condition exposure notification. The designated officer should coordinate with other office members to fulfill the role when not available. The designated officer shall ensure that the name, title, and telephone number of the designated officer is posted on the office website (Health and Safety Code § 1797.188).

715.3 COMMUNICABLE DISEASE PROGRAM COMPONENTS

715.3.1 SURVEILLANCE

Surveillance takes place throughout the period of the incarcerated person's confinement and is done in a variety of encounters and inspections. These include but are not limited to the following:

(a) **Medical screening** - Each newly booked incarcerated person shall be evaluated for health care needs and signs and symptoms of infectious disease. The receiving screening includes questions regarding known symptoms of TB, HIV, sexually transmitted diseases (STDs), and HBV. The individual completing the medical screening should observe the incarcerated person for obvious signs of infection (15 CCR 1206.5(a)).

(b) **Health assessment** - Incarcerated persons shall have a health assessment within the first 14 days of incarceration. The health assessment process includes screening for symptoms of communicable disease. Incarcerated persons will have a Purified Protein Derivative (PPD) test or a chest X-ray for TB and a blood test for STDs. Voluntary HIV testing is provided based on identified risk.

(c) **Periodic health assessments** - Annual testing for TB is performed on all incarcerated persons who are in the facility for one year or more.

(d) **Sick call and referrals** - At any time during incarceration, an incarcerated person may request to be evaluated for an infectious disease through the sick call process. Health and correctional staff can request that an incarcerated person be evaluated if they notice any signs of potentially infectious disease.

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(e) **Contact investigation** - When an incarcerated person housed in the general population develops symptoms of an infectious disease, the Responsible Physician should work cooperatively with the Captain or the authorized designee and the public health department to provide appropriate screening and testing of potentially exposed persons.

(f) **Environmental health and safety inspections** - The health and safety of the facility environment shall be inspected by the local public health entity and reported to the Captain at least quarterly in a written report. Conditions identified as adversely affecting the health and safety of the incarcerated persons and/or employees or visitors shall be promptly addressed and corrected.

715.3.2 IDENTIFICATION

Any incarcerated person suspected of having a communicable disease will be evaluated by a qualified health care professional as soon as reasonably practicable. Incarcerated persons suspected of having communicable diseases will be appropriately isolated until disease confirmation and the period of communicability is determined. Long-term housing consideration will be based upon the classification status as well as the behavior, medical needs, and safety of incarcerated persons and staff. These incarcerated persons shall be examined by a qualified health care professional within 24 hours. The instructions of the qualified health care professional regarding care of the patient and sanitizing of eating utensils, clothing, and bedding shall be carefully followed (15 CCR 1206.5(a); 15 CCR 1206.5(b)(6)).

715.3.3 TREATMENT

Qualified health care professionals shall provide care as directed by the Responsible Physician and consistent with scientific evidence-based medicine (15 CCR 1206.5(a)).

(a) The Responsible Physician and the Captain shall collaborate on treatment planning with the public health department, as appropriate.

(b) Complete documentation of the signs, symptoms, diagnostic results, treatment, and outcome of care provided to incarcerated persons who are suspected or confirmed as having a communicable disease will be entered into the incarcerated person's health record.

715.3.4 COMMUNICATION

The Responsible Physician shall ensure the following notifications are made whenever a communicable disease is identified (15 CCR 1206.5(b)(3); 15 CCR 1206.5(b)(8)):

(a) Notification to the public health department of all reportable diseases and conditions shall be made as soon as practicable. This is done by completing appropriate forms, and if necessary, contacting the public health department directly for situations of multiple spread occurrences.

(b) The Responsible Physician and the Captain shall be kept informed of any incidence of communicable disease.

(c) The Captain shall be apprised of any medical situation that raises the risk of disease level for incarcerated persons, correctional officers, or any other staff members.

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715.3.5 CONTINUOUS QUALITY IMPROVEMENT

A continuous quality improvement (CQI) committee shall be formed consisting of the Responsible Physician, the Captain or the authorized designee, and a representative from the public health entity. The purpose of the committee is to monitor infection control issues and evaluate infection control processes to ensure effectiveness.

Monthly statistics should be collected by health care services and assembled into a report presented by the Responsible Physician or the authorized designee, detailing surveillance activities, disease identification, and cases treated. The committee should meet quarterly and should discuss topics specific to infection control and communicable disease. Minutes of the meetings should be retained in accordance with established records retention schedules.

715.3.6 EMPLOYEE TRAINING

The Responsible Physician or the authorized designee shall provide education to all correctional staff who have contact with infected incarcerated persons during the initial employee orientation and annually thereafter. The Training Manager shall schedule this training and shall retain all associated records in accordance with established records retention schedules.

715.3.7 DATA COLLECTION AND REPORTING

The health authority shall be responsible for ensuring the systematic collection and analysis of data to assist in the identification of problems, epidemics, or clusters of nosocomial infections. All reportable illnesses as defined by the public health department shall be reported as required (15 CCR 1206.5(b)).

715.3.8 STANDARD PRECAUTIONS

Standard precautions shall be used by health care practitioners to minimize the risk of exposure to blood and bodily fluids of infected patients. The health authority shall be responsible for establishing basic guidelines including but not limited to (15 CCR 1206.5(b)(4)):

- Washing hands or using hand sanitizer before and after all patient or specimen contact.
- Handling all blood and bodily fluids such as saliva, urine, semen, and vaginal secretions as if they are known to be infectious. Where it is not possible to distinguish between body fluid types, all body fluids are to be assumed infectious.
- Wearing gloves for potential contact with blood and other bodily fluids.
- Placing used syringes immediately in a nearby, impermeable container. Do not recap or manipulate any needle in any way.
- Wearing protective eyewear and a mask if splatter with blood or other body fluids is possible.
- Handling all linen soiled with blood and/or bodily secretions as infectious.
- Processing all laboratory specimens as infectious.
- As appropriate, wearing a mask for TB and other ATDs.

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715.3.9 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category.

(a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles, and chicken pox.

1. An incarcerated person requiring airborne precautions should be assigned to a designated respiratory isolation room with special ventilation requirements. The door to this room must be closed at all possible times. If an incarcerated person must move from the isolation room to another area of the facility, the incarcerated person should wear a mask during transport. Anyone entering the isolation room to provide care to the incarcerated person must wear a respirator.

(b) Droplet precautions are designed to prevent the spread of organisms that travel on particles much larger than the droplet nuclei. These particles do not spend much time suspended in the air, and usually do not travel beyond a few feet of the incarcerated person. These particles are produced when an incarcerated person coughs, talks, or sneezes. Examples of disease requiring droplet precautions are meningococcal meningitis, influenza, mumps, and German measles (rubella).

1. All staff should wear masks within 3 feet of the incarcerated person. Incarcerated person movement should be restricted to the minimum necessary for effective facility operations. The incarcerated person should wear a mask during transport.

(c) Contact precautions are designed to prevent the spread of organisms from an infected incarcerated person through direct (touching the incarcerated person) or indirect (touching surfaces or objects the incarcerated person touched) contact. Examples of incarcerated persons who might be placed in contact precautions are those infected with the following:

1. Antibiotic-resistant bacteria
2. Hepatitis A
3. Scabies
4. Impetigo
5. Lice

The following guide shall be used to determine the appropriate precautions that are necessary to reduce the risk of infection transmission while incarcerated persons are being transported. Incarcerated persons shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

Precautions for Incarcerated Person Contact and Transportation

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	GLOVES	SURGICAL MASKS	N95 MASKS	ISOLATION GOWNS
Contact				
Incarcerated Person	No	No	No	No
Personnel	Yes	No	No	Yes
Droplet				
Incarcerated Person	No	Yes	No	No
Personnel	No	Yes	No	Yes
Airborne				
Incarcerated Person	No	Yes	No	No
Personnel	No	No	Yes	No

715.3.10 ENVIRONMENTAL HEALTH AND SAFETY

The Responsible Physician or the authorized designee shall conduct a monthly inspection of areas where health services are provided to verify the following:

- The equipment is inspected and maintained to the manufacturer’s recommendations.
- The area is clean and sanitary.
- The appropriate measures are being taken to ensure the unit is occupationally and environmentally safe.

715.3.11 REGULATED WASTE

The Office in coordination with the health authority, will provide for the management of biohazardous materials and waste and the establishment of a protocol for the decontamination of equipment used in medical and dental treatment. Medical and dental equipment decontamination shall comply with all applicable local, state and federal regulations. Precautions may include, but are not limited to:

(a) Discarding biohazardous waste in red plastic bags marked with the word BIOHAZARD and displaying the international symbol for biohazardous material. Contaminated disposable PPE shall be discarded in these receptacles.

(b) Whenever a large amount of fluid blood is present, an absorbent powder should be used to gelatinize the fluid, which should assist in clean up. Standard precautions shall be used when removing the product, that should then be placed in a red biohazard bag.

(c) Used biohazard bags shall be stored in covered, rigid waste receptacles in designated locations pending weekly removal by a biohazard waste removal contractor.

(d) Records documenting biohazardous waste removal, spore count logs and cleaning logs shall be retained in accordance with established records retention schedules.

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715.4 ECTOPARASITE CONTROL

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the incarcerated person manifests signs and symptoms of lice or scabies (15 CCR 1212).

(a) Any incarcerated person who indicates parasitical infection upon entering the facility shall be treated by a qualified health care professional.

(b) Any incarcerated person suspected of having lice/scabies may be referred to sick call by a correctional officer.

(c) An incarcerated person may access sick call if the person believes there is a problem with lice/scabies.

(d) A qualified health care professional shall evaluate any incarcerated person with a lice/scabies complaint. If there are positive findings, the incarcerated person shall be treated for the infestation accordingly.

1. The lice and scabies treatment guidelines will be followed by the qualified health care professional, if a physician's order for the medication administration is obtained.

    (a) The prescribing physician shall be notified if the incarcerated person is pregnant, as certain medications are contraindicated for pregnant persons. An alternative topical application must be prescribed in these situations.

    (b) Documentation in the medical record should include the patient's symptoms, observations regarding the condition, patient education, and prescribed treatment.

2. The incarcerated person's clothing and linen shall be removed from the person's cell placed in a plastic bag and sent to the laundry. These items are considered contaminated and must be disinfected by:

    (a) Machine washing (hot cycle), machine drying (hot cycle), dry cleaning or ironing, or

    (b) Storage in a plastic bag for non-washable items for 10-14 days (head lice), seven days (pubic lice). This method is not recommended for body lice.

    (c) Isolation is not necessary as long as clothing and bedding are properly disinfected and incarcerated persons do not share items.

        1. An incarcerated person having poor hygiene should be housed in a single cell until 24 hours after beginning treatment.

        2. Gloves are to be used for direct contact until the incarcerated person has been treated and the clothing/bedding have been removed for disinfecting.

3. Cell mates, sexual partners, and any personnel having direct hands-on contact with an infected incarcerated person should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

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715.5 EMPLOYEE EXPOSURE CONTROL

All facility staff who may come in contact with another person's blood or bodily fluids shall follow these procedures and guidelines. For the purposes of this policy, contact with blood or bodily fluids is synonymous with BBP exposure.

All employees shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated. Disposable gloves shall be worn, if reasonably possible, before making physical contact with any incarcerated person and when handling the personal belongings of an incarcerated person.

Should gloves come in contact with blood or other bodily fluids, the gloves shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books, personal items in general) while wearing disposable gloves in a potentially contaminated environment. All procedures involving blood or other potentially infectious materials shall be done in a way to minimize splashing, spraying, or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm, and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

715.5.1 IMMUNIZATIONS

All facility staff members who may be exposed to, or have contact with, a communicable disease shall be offered appropriate treatment immunization. The ability of staff to provide health care services is predicated on a safe and secure working environment where employees feel safe to do their work, and that assures public safety.

Staff shall also receive a TB test prior to job assignment and voluntary annual testing thereafter, at no cost to the employee.

The HBV immunization shall be available to all employees who have direct incarcerated person contact and who test negative for HBV antibodies. The immunization is voluntary and provided at no cost to the employee. Employees who decline the offer of immunization and/or test shall be required to sign a waiver. Employees receiving immunization and testing shall be required to sign a consent form. Employees may reverse their decision to decline at any time by signing a consent form.

715.5.2 PERSONAL PROTECTIVE EQUIPMENT (PPE)

The PPE is the last line of defense against communicable disease. Therefore, the following equipment is provided to all personnel to assist in the protection against such exposures:

- Disposable latex gloves
- Safety glasses or goggles
- Rescue mask with a one-way valve
- Alcohol (or similar substance) to flush skin

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The PPE should be inspected at the start of each shift and replaced immediately after each use and when it becomes damaged.

715.5.3 DECONTAMINATION OF PERSONAL PROTECTIVE EQUIPMENT

After using any reusable PPE, it shall be washed or disinfected and stored appropriately. If it is not reusable (e.g., disposable gloves), it shall be discarded in a biohazard waste container.

Any PPE that becomes punctured, torn, or loses its integrity shall be removed as soon as reasonably feasible. The employee shall wash up and replace the PPE if the job has not been terminated. If the situation resulted in a contaminated non-intact skin event, the affected area shall be decontaminated as described below.

A contaminated reusable PPE that must be transported prior to cleaning shall be placed into a biohazard waste bag. Gloves shall be worn while handling the biohazard waste bag and during placement into the biohazard waste container. The gloves shall be included with the waste.

715.5.4 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES

Personnel shall wash their hands as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used, paying particular attention to the fingernails.

If an employee's intact skin contacts someone else's blood or body fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of the employee's body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin, and mucous membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms, or other locations not designated as a cleaning or decontamination area.

715.5.5 DECONTAMINATION OF CLOTHING

Contaminated clothing such as uniforms and undergarments shall be removed as soon as reasonably feasible and rinsed in cold water to prevent the setting of bloodstains. If the clothing may be washed in soap and hot water, do so as soon as reasonably possible.

If the clothing must be dry-cleaned, place it into a biohazard waste bag and give it to the ECO. The ECO will secure a dry cleaner that is capable of cleaning contaminated clothing, and shall inform the dry cleaner of the potential contamination. The cost of dry cleaning shall be paid according to labor contract agreements.

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Contaminated leather boots shall be brushed and scrubbed with detergent and hot water. If the contaminant soaked through the boot, the boot shall be discarded and replaced. The cost of replacement shall be paid according to labor contract agreements.

715.5.6 DECONTAMINATION OF VEHICLES

Contaminated vehicles and components such as the seats, radios and doors, shall be washed with soap and warm water and disinfected with an approved germicide as soon as reasonably feasible.

715.5.7 DECONTAMINATION OF THE CLEANING AREA

The ECO shall designate a location in the facility that will serve as the area for cleaning/ decontamination. This area is to be used to keep equipment clean and sanitary and for employees to wash any potential contamination from their bodies. This area is to be thoroughly cleaned after each use and to be maintained in a clean and sanitary order at all times between each use. The application of cosmetics, smoking of cigarettes and consumption of food and drink are prohibited in this area at all times.

715.6 SHARPS AND ITEMS THAT CUT OR PUNCTURE

All personnel shall avoid using or holding sharps (needles) unless they are assisting medical personnel or collecting them for evidence. Unless required for reasons related to evidence preservation, employees are not to recap sharps. If recapping is necessary, a one-handed method shall be employed to avoid a finger prick. Disposal, when possible, shall be into a puncture-proof biohazard container.

All sharps and items that cut or puncture (e.g., broken glass, razors and knives) shall be treated cautiously to avoid cutting, stabbing or puncturing one’s self or any other person. In addition, if a sharp object contains known or suspected blood or other body fluids, that item is to be treated as a contaminated item. If the item is not evidence, touching it with the hands shall be avoided. Rather, use a device such as tongs or a broom and a dustpan to clean up debris. If the material must be touched, protective gloves shall be worn.

715.7 POST-EXPOSURE REPORTING AND FOLLOW-UP REQUIREMENTS

In actual or suspected employee exposure incidents, proper documentation and follow-up action must occur to limit potential liabilities and to ensure the best protection and care for the employees.

715.7.1 EMPLOYEE RESPONSIBILITY TO REPORT EXPOSURE

To provide appropriate and timely treatment should exposure occur, all employees shall verbally report the exposure to their immediate supervisor and complete a written exposure report as soon as possible following the exposure or suspected exposure. That report shall be submitted to the employee’s immediate supervisor. Employees should document in the exposure report whether they would like the person who was the source of the exposure to be tested for communicable diseases (15 CCR 1206.5(b)(8)).

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715.7.2 SUPERVISOR REPORTING REQUIREMENTS

The supervisor on-duty shall investigate every exposure that occurs as soon as possible following the incident, while gathering the following information:

(a) Name and employee identification number of the employee exposed

(b) Date and time of incident

(c) Location of incident

(d) What potentially infectious materials were involved

(e) Source of material or person

(f) Current location of material or person

(g) Work being done during exposure

(h) How the incident occurred or was caused

(i) PPE in use at the time of the incident

(j) Actions taken post-event (e.g., clean-up, notifications)

The supervisor shall advise the employee of the laws and regulations concerning disclosure of the identity and infectious status of a source, and of information contained in this policy regarding source testing.

If the ECO is unavailable to seek testing of the person who was the source of the exposure, it is the responsibility of the exposed employee’s supervisor to ensure testing is sought according to the guidelines in this policy.

715.7.3 MEDICAL CONSULTATION, EVALUATION, AND TREATMENT

Any employee who was exposed or who suspects the employee was exposed to HIV or to hepatitis B or C should be seen by a physician or qualified health care professional as soon as reasonably possible.

The doctor or qualified health care professional should be given the supervisor's report and the employee's medical records relevant to the visit and examination. The blood of the exposed employee shall be tested.

The qualified health care professional will provide the ECO and/or the Office's risk manager with a written opinion/evaluation of the exposed employee's medical condition. This opinion should only contain the following information:

- If a post-exposure treatment is indicated for the employee.
- If the employee received a post-exposure treatment.
- Confirmation that the employee received the evaluation results.
- Confirmation that the employee was informed of any medical condition that could result from the exposure incident and whether further treatment or evaluation will be required.

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- Whether communicable disease testing from the source is warranted, and if so, which diseases the testing should include.

All other findings or diagnosis shall remain confidential and are not to be included in the written report.

715.7.4 COUNSELING

The Office shall provide the exposed employee (and the employee's family if necessary) the opportunity for counseling and consultation.

715.7.5 CONFIDENTIALITY OF REPORTS

Most of the information involved in this process must remain confidential. The ECO shall ensure that all records and reports are kept in the strictest confidence. The ECO shall be responsible for maintaining records containing the employee’s treatment status and the results of examinations, medical testing and follow-up procedures.

The Office's risk manager shall be responsible for keeping the name and Social Security number of the employee and copies of any information provided to the consulting health care professional on file.

This information is confidential and shall not be disclosed to anyone without the employee’s written consent (except as required by law). Test results from persons who may have been the source of an exposure are to be kept confidential as well (15 CCR 1206.5(b)(5)).

715.7.6 SOURCE TESTING

Testing of a person who was the source of an exposure to a communicable disease should be sought when it is desired by the exposed employee or when it is otherwise appropriate.

There are five methods to obtain such testing. It is the responsibility of the ECO to ensure the proper testing and reporting occurs. These methods are:

(a) Obtaining voluntary consent from any person who may be the source of an exposure to test for any communicable disease.

(b) Filing a report with the county health officer when an employee is exposed to the bodily fluids of an arrestee. The county health officer may pursue testing for HIV or hepatitis B or C.

(c) Seeking consent for testing or applying for a court order for HIV, hepatitis B, and hepatitis C testing.

(d) Seeking a court order when the person who may be the source of an exposure will not consent to testing and the exposure does not fall under a statutory scheme for testing. This covers testing for any communicable disease as deemed appropriate by a qualified health care professional and documented in the request for the court order.

(e) Under certain circumstances, a court may issue a search warrant for testing an adult when an employee of the Tehama County Sheriff's Office qualifies as a crime victim.

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715.7.7 EXPOSURE FROM A NON-INCARCERATED PERSON

Upon notification of an employee's exposure to a non-incarcerated person (e.g., visitor, attorney, volunteer, vendor) the ECO should attempt to determine if the person who was the source of the exposure will voluntarily consent to testing. If consent is provided, the following steps should be taken:

(a) A qualified health care professional should notify the person to be tested of the exposure and make a good faith effort to obtain voluntary informed consent from the person or the person's authorized legal representative to perform a test for HIV, hepatitis B, hepatitis C, and other communicable diseases the qualified health care professional deems appropriate.

(b) The voluntary informed consent obtained by the qualified health care professional must be in writing and include consent for three specimens of blood. The ECO should document the consent as a supplement to the Exposure Control Report.

(c) The results of the tests should be made available to the source and the exposed employee.

If consent is not obtained, the ECO should promptly consult with the County Counsel and consider requesting that a court order be sought for appropriate testing.

715.7.8 EXPOSURE FROM AN INCARCERATED PERSON

If the ECO receives notification from an employee of a potential exposure from an incarcerated person, the ECO should take the following steps:

(a) Seek consent from the person who was the source of the exposure and seek a court order, if consent is refused.

(b) Take reasonable steps to immediately contact the county health officer and provide preliminary information regarding the circumstances of the exposure and the status of the involved individuals to determine whether the county health officer will order testing.

(c) Remain in contact with the county health officer to determine whether testing of the incarcerated person will occur and whether the testing satisfies the medical needs of the employee.

(d) The results of the tests should be made available to the incarcerated person and the exposed employee.

Since there is potential for overlap between the two statutory schemes, the ECO is responsible for coordinating the testing with the county health officer to prevent unnecessary or duplicate testing.

If the exposed employee is not covered by either statutory scheme, the ECO should seek consent or a court order in the same manner as for a non-incarcerated person.

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Aids to Impairment

716.1 PURPOSE AND SCOPE

This policy acknowledges the high priority of incarcerated person health and recognizes that some incarcerated persons will require adaptive devices to assist them with daily living activities on a temporary or permanent basis.

The Tehama County Sheriff's Office has established this policy for physicians and dentists to review and evaluate the need for adaptive devices, while considering facility security concerns regarding the use of such items.

When a physician or dentist determines that the medical condition of an incarcerated person indicates that an adaptive device is clinically appropriate, the parameters of this policy will determine if authorization for the use of such items during incarceration should be granted, and if any equipment modifications are indicated for safety or security purposes.

716.1.1 DEFINITIONS

Definitions related to this policy include:

Adaptive device - Any orthotic, prosthetic, or aid to impairment that is designed to assist an incarcerated person with the activities of daily living or that is clinically appropriate for health, as determined by the Responsible Physician or dentist.

Aids to impairment - Includes but is not limited to eyeglasses, hearing aids, pacemakers, canes, crutches, walkers, and wheelchairs.

Orthoses - Specialized mechanical devices such as braces, shoe inserts, or hand splints that are used to support or supplement weakened or abnormal joints, limbs, and/or soft tissue.

Prostheses - Artificial devices designed and used to replace missing body parts, such as limbs, teeth, or eyes.

716.2 POLICY

It is the policy of the Office that, in accordance with security and safety concerns, medical and dental orthoses or prostheses and other adaptive devices should be permitted or supplied in a timely manner when the health of the incarcerated person would otherwise be adversely affected or when such devices are necessary to reasonably accommodate a disability recognized under the American with Disabilities Act (ADA) (42 USC § 12101 et seq.), as determined by the Responsible Physician or dentist (15 CCR 1206(d); 15 CCR 1207).

716.3 FACILITY-OWNED MEDICAL EQUIPMENT

All adaptive devices belonging to the Office shall be marked and numbered, identifying them as office property.

(a) A medical equipment inventory form shall be completed by the intake correctional officer for all medical equipment issued to the incarcerated person, regardless of who owns the property.

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(b) Upon the release of an incarcerated person, the releasing correctional officer shall review the medical equipment issued to the person and contact the medical clinic for instructions regarding any office-owned adaptive device.

716.4 MEDICAL OR DENTAL ORTHOSES, PROSTHESES, OR ADAPTIVE DEVICES

The following applies to incarcerated persons with any orthopedic or prosthetic devices (Penal Code § 2656):

(a) An incarcerated person shall not be deprived of the possession or use of any orthopedic, orthodontic, or prosthetic device that has been prescribed or recommended and fitted by a physician or dentist (see the following exception).

(b) Any such device that may constitute an immediate risk of bodily harm to any person in the facility or that threatens the security of the facility should be brought to the attention of the Captain. If the Captain has probable cause to believe such a device constitutes an immediate risk of bodily harm to any person in the facility or threatens the security of the facility, the Captain may remove the device and place it in the person's property.

(c) The Captain shall return the device to the incarcerated person if circumstances change and the cause for removal no longer exists.

(d) The Captain shall have the incarcerated person examined by a physician within 24 hours after a device is removed.

(e) The Captain should review the facts with the ADA Coordinator and shall address the issue in conjunction with the Incarcerated Persons with Disabilities Policy.

(f) The physician shall inform the incarcerated person and the Captain if the removal is or will be injurious to the health or safety of the person. When the Captain is so informed but still does not return the device, the Captain shall inform the physician and the person of the reasons and promptly provide the person with a form, as specified in Penal Code § 2656, by which the person may petition the Superior Court for return of the appliance. The Captain shall promptly file the form with the Superior Court after it is signed by the incarcerated person. The Captain should consider the following alternatives to removal of the device:

1. Reclassifying the incarcerated person to another housing unit or administratively separating the person from the general population.
2. With physician or dentist approval, modify the adaptive device to meet the medical needs of the incarcerated person and the safety and security needs of the facility.

Once an adaptive device has been approved for use, the qualified health care professional shall enter the authorization into the incarcerated person's health file. If the person requires special housing, the qualified health care professional shall document this in writing and notify custody or classification personnel appropriately. The qualified health care professional shall document the general condition of the prosthesis and have the person sign in the medical record that they received the prosthesis.

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Any prostheses that are brought to the facility by family members or others after the person has been incarcerated shall be subject to a security check. The facility shall accept no responsibility for loss or damage to any adaptive device.

716.5 REQUESTS FOR MEDICAL AND DENTAL PROSTHESES

All requests for new or replacement medical or dental prostheses shall be individually evaluated by the Responsible Physician or dentist and reviewed for approval by the Captain. Considerations for approval shall be based upon:

- Medical needs of the incarcerated person.
- The anticipated length of incarceration.
- The safety and security of the facility.

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Detoxification and Withdrawal

717.1 PURPOSE AND SCOPE

Significant percentages of incarcerated persons have a history of alcohol and/or drug abuse. Newly incarcerated individuals may enter the facility while under the influence of a substance or they may develop symptoms of alcohol or drug withdrawal. This policy is intended to ensure that the staff is able to recognize the symptoms of intoxication and withdrawal from alcohol or drugs, and that those persons who are intoxicated or experiencing withdrawal are provided appropriate medical treatment.

This policy also identifies protocols to be used by qualified health care professionals. These protocols are appropriate for incarcerated persons who are under the influence of alcohol or drugs or who are experiencing withdrawal from any type of substance abuse.

717.1.1 DEFINITIONS

Definitions related to this policy include:

Alcohol withdrawal - A medical condition characterized by physiological changes that occur when alcohol intake is discontinued in an individual who is addicted to alcohol.

Detoxification - The process by which an individual is gradually withdrawn from drugs by the administration of decreasing doses of the drug on which the person is physiologically dependent, or a drug that is cross-tolerant to the dependent drug, or a drug that medical research has demonstrated to be effective in detoxifying the individual from the dependent drug.

717.2 POLICY

Withdrawal from alcohol or drugs can be a life-threatening medical condition requiring professional medical intervention. It is the policy of this office to provide proper medical care to incarcerated persons who suffer from drug or alcohol overdose or withdrawal.

To lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility, staff shall respond promptly to medical symptoms presented by incarcerated persons.

The Responsible Physician shall develop written medical protocols on detoxification symptoms necessitating immediate transfer of the incarcerated persons to a hospital or other medical facility, and procedures to follow if care within the facility should be undertaken (15 CCR 1213).

Incarcerated persons who are booked into the facility who are participating in a narcotic treatment program shall, with the approval of the director of the program, be entitled to continue in the program until conviction (Health and Safety Code § 11222).

717.3 STAFF RESPONSIBILITY

Staff should remain alert to signs of drug and alcohol overdose and withdrawal. These symptoms include but are not limited to sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing, and generalized aches and pains. Any staff member who suspects

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that an incarcerated person may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the Shift Supervisor, who shall ensure that a qualified health care professional is promptly notified.

717.4 MEDICAL STAFF RESPONSIBILITY

The qualified health care professional will evaluate the incarcerated person using approved protocols in order to determine the most appropriate care plan, which will be based on the patient's history, current physical status, and treatment needs. Any patient who cannot be safely treated in the facility will be referred to an appropriate treatment facility off-site.

717.5 PROCEDURE

Incarcerated persons who are observed experiencing severe, life-threatening intoxication (overdose) or withdrawal symptoms will be promptly seen by a physician or referred to an off-site emergency facility for treatment. Detoxification shall be conducted under medical supervision at the facility or in a hospital or community detoxification center under appropriate security conditions.

If the qualified health care professional determines that an incarcerated person is at risk for progression to a more severe level of withdrawal, the person will be appropriately housed in an area where they can be kept under constant observation by qualified health care professionals or trained correctional staff.

717.6 WITHDRAWAL AND DETOXIFICATION PROTOCOLS

Protocols are available to the qualified health care professionals to guide the care and treatment of individuals who are intoxicated or experiencing drug and/or alcohol withdrawal. These protocols, which have been developed and approved by the Responsible Physician, fall within nationally accepted guidelines and are reviewed annually.

When dealing with persons who are in a custody situation, qualified health care professionals shall utilize detoxification protocols in accordance with local, state, and federal laws.

No direct supervision is required at the time of identifying and initiating care. Overall supervision is provided by the Responsible Physician. Qualified health care professionals shall evaluate and provide care to patients utilizing written procedures and/or physician orders.

717.7 ALCOHOL WITHDRAWAL SYMPTOMS CHART

The following chart describes typical symptoms of mild, moderate, and severe withdrawal. It is to be used as a guide for determining when to refer incarcerated persons to a qualified health care professional. Not all symptoms are always present.

	MILD	**MODERATE**	**SEVERE** (Delirium Tremens)
ANXIETY	Mild restlessness and anxiety	Obvious motor restlessness	Extreme restlessness and agitation with appearance of intense fear is common

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Detoxification and Withdrawal

APPETITE	Impaired appetite	Marked anorexia	Often rejects all food and fluid except alcohol
BLOOD PRESSURE	Normal or slightly elevated systolic	Usually elevated systolic	Elevated systolic and diastolic
CONFUSION	Oriented, no confusion	Variable confusion	Marked confusion and disorientation
CONVULSIONS	No	May occur	Severe convulsions are common
HALLUCINATIONS	No hallucinations	Often vague, transient visual and auditory hallucinations and delusions, often with insight, often occurring only at night	Visual and occasional auditory hallucinations, usually of fearful or threatening content. Misidentification of persons and frightening delusions relating to hallucinatory experiences
MOTOR CONTROL	Inner "shaky"	Visible tremulousness	Gross uncontrollable shaking
NAUSEA	Nausea	Nausea and vomiting	Dry heaves and vomiting
PULSE	Tachycardia	Pulse 100-120	Pulse 120-140
SLEEP		Marked insomnia and nightmares	Total wakefulness
SWEATING	Restless sleep or insomnia	Obvious	Extreme

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Clinical Performance Enhancement

719.1 PURPOSE AND SCOPE

This office recognizes the importance of ensuring that qualified health care professionals are competent in their clinical skills and that the clinical performance enhancement review addresses areas in need of improvement.

719.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical performance enhancement review - The process of having a qualified health care professional's work reviewed by another professional (peer review) of at least equal training in the same general discipline (e.g., review of the facility's physicians by the Responsible Physician).

Independent review - The assessment of a qualified health care professional's compliance with discipline-specific and community standards. The review is an analysis of a practitioner's clinical practice. This review may be conducted by someone who may or may not be directly employed by the institution. However, if the review was prompted by an incarcerated person complaint, the reviewing practitioner must not have been previously involved in the care of that incarcerated person.

719.2 POLICY

It is the policy of this office to conduct a biannual peer review of all qualified health care professionals. The clinical performance enhancement review process is neither an annual performance review nor a clinical case conference process. It is a professional review focused on the qualified health care professional’s clinical skills. Its purpose is to enhance competence and address areas in need of improvement.

An immediate peer review may be authorized by the Responsible Physician if serious problems of practice arise with a specific qualified health care professional.

719.3 COMPONENTS OF THE CLINICAL PERFORMANCE ENHANCEMENT

The clinical performance enhancement review process is to be conducted biannually on all qualified health care professionals. The result of these reviews shall be kept confidential. Documentation from the review shall include:

- Name of the individual being reviewed.
- Date of the review.
- Name and credentials of the reviewer.
- Confirmation that the review was shared with the qualified health care professional.
- Summary of findings and corrective action, if any.

If a clinical performance enhancement review identifies a serious concern, the Responsible Physician shall implement an independent review by someone who is not directly employed by

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this office. The result of this review shall be shared with the appropriate health care service by the Responsible Physician, and a plan of correction shall be implemented.

The Responsible Physician will keep a log of clinical performance enhancement reviews of all qualified health care professionals to ensure compliance with this policy.

719.4 HEALTH CARE COMPLAINTS

The Captain, in cooperation with the Responsible Physician, shall be responsible for developing and implementing a process by which incarcerated persons may submit complaints about the health care services they have received. There shall also be a means of collecting and analyzing the observations of other qualified health care professionals, correctional staff, or other nonmedical staff regarding the delivery of health care services.

The Responsible Physician shall convene a panel of independent physicians to review the practice of the physician about whom complaints or observations have been made. The Responsible Physician shall take appropriate action at the recommendation of the panel.

719.5 RECORDS

All clinical performance enhancement review reports and complaint investigations shall be considered confidential. The contents of such files shall not be revealed to other than the involved employee or authorized personnel, except pursuant to lawful process or as otherwise authorized or required by statute.

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Clinical Decisions

720.1 PURPOSE AND SCOPE

This policy recognizes that a coordinated effort between the Responsible Physician and the Captain is needed to ensure an adequate health care system. It emphasizes the importance of clinical decisions being the sole responsibility of the qualified health care professional.

720.1.1 DEFINITIONS

Definitions related to this policy include:

Clinical decisions - The process of formulating a differential diagnosis with information gathered from an incarcerated person's medical history and physical and mental examinations, developing a list of possible causes, and ordering tests to help refine the list or identify a specific disease.

Differential diagnosis - A systematic method of identifying unknowns or diagnosing a specific disease using a set of symptoms and testing as a process of elimination.

720.2 POLICY

Clinical decisions and actions regarding incarcerated person health care are the sole responsibility of qualified health care professionals and should not be countermanded by others. The Responsible Physician shall be responsible for arranging for appropriate health resources and for determining what services are needed. The Captain or the authorized designee shall be responsible for providing the custodial support to ensure a safe and secure environment for the delivery of the services and its accessibility to the incarcerated persons (15 CCR 1200(a); 15 CCR 1206(k)).

720.3 MEDICAL AUTONOMY

Clinical decisions shall be made only after a thorough evaluation of the patient’s complaint and physical or mental condition. The implementation of clinical decisions is to be completed in an effective and safe manner that does not violate the security regulations of the facility.

720.4 PROBLEM RESOLUTION

Any issues arising because of the clinical decision process shall be reviewed under the provisions of the Continuous Quality Improvement Policy using medical records, grievances, staff complaints and any other relevant data.

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Health-Trained Custody Staff

721.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for incarcerated persons to access 24-hour health care services in the event that a qualified health care professional is not on-site.

721.2 POLICY

It is the policy of this office that a designated health-trained staff member shall be responsible for coordinating the delivery of health care services in the facility any time that qualified health care professionals are not available on-site (15 CCR 1028). Additionally, in facilities that do not have full-time qualified health care professionals, the Captain shall appoint a staff member to act as a liaison to coordinate health care delivery in the facility under the direction of the Responsible Physician.

721.3 DUTIES OF THE HEALTH-TRAINED STAFF

The Captain or the authorized designee, in coordination with the Responsible Physician, shall be responsible for developing a job description for health-trained staff positions. Designated health-trained staff shall be responsible for:

- Reviewing the screening forms completed during the booking process for any follow-up care needed.
- Managing triage of health care requests.
- Preparing incarcerated persons and their medical records for sick call.
- Assisting with the implementation of orders regarding diets, housing, and work assignments.

721.4 TRAINING

The Jail Commander, Training Manager and the Responsible Physician shall be jointly responsible for developing a training curriculum for the health-trained staff positions and for the delivery of that training, which shall include:

- Instruction on proper action in the case of a medical emergency.
- Documentation requirements.
- Appropriate triage of health care requests and follow-up.
- Confidentiality of health information.

721.5 UNREASONABLE BARRIERS

No member of the Tehama County Sheriff's Office correctional facility shall create unreasonable barriers to an incarcerated person's access to health care services. The following are examples of conduct that are likely to create unreasonable barriers and are prohibited:

(a) Punishing incarcerated persons for seeking care for their serious health needs.

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(b) Deterring incarcerated persons from seeking care for their serious health needs by scheduling sick call at unreasonable times.

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Licensure, Certification, and Registration Requirements

722.1 PURPOSE AND SCOPE

The purpose of this policy is to recognize that incarcerated persons are entitled to health care services that are provided by qualified health care professionals working within the scope of their respective licensure, certification, registration, and training. This policy also establishes a credentials verification process.

722.2 POLICY

It is the policy of this office that all qualified health care professionals who provide health care services to incarcerated persons meet the same standards as those working in the community, including required licenses, certifications, and restrictions, including those defining the recognized scope of practice specific to the profession (15 CCR 1203). Job descriptions shall include minimum qualifications and specific duties and responsibilities, and shall be approved by the Responsible Physician.

The current credentials and job descriptions for all qualified health care professionals are on file at the facility and retained in accordance with established records retention schedules.

Any health care provided to incarcerated persons at the facility that is not provided by a physician is provided in accordance with a standing order or direct order issued by personnel qualified under governing laws to give such orders (15 CCR 1203; 15 CCR 1204).

722.3 CREDENTIALING AND FILE MAINTENANCE

A completed file of current licenses, certifications, registration, reference checks and applications shall be maintained by the Office Personnel Department and by the Responsible Physician or the authorized designee at this facility.

(a) The Responsible Physician or the authorized designee should obtain confirmation of current licensure, certification and registration prior to making any offer of employment.

(b) Inquiries into any sanctions or disciplinary actions of state boards, employers and the U.S. Department of Health and Human Services' National Practitioner Data Bank should be conducted prior to making any offer of employment.

(c) Individuals should be required to pass a job related pre-employment background investigation. Employment references may be obtained via mail or over the telephone with documentation.

(d) Each employee should be held responsible for providing renewal verification of licenses, certificates and registration prior to the expiration date.

(e) Any group or individual providing health care services must complete the credentialing process that is appropriate for their profession and must provide the facility a copy

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of current licensure and, when appropriate, a Drug Enforcement Administration certificate to prescribe controlled substances.

(f) To be eligible for hire, all clinical health care personnel must possess and maintain a current CPR certification and provide documentation to the Responsible Physician or the authorized designee.

722.4 STUDENTS AND/OR INTERNS

If the health care services provided to an incarcerated person are performed by any intern, resident, or student who is authorized to provide specific health care services as part of a formal medical training program, the individuals in training will work under the control and supervision of a qualified health care professional. Assigned tasks shall be commensurate with the intern, student, or resident's level of training.

There shall be a written agreement between the facility and the entity sponsoring the training program that covers the scope of work, duration of the agreement, and any legal or liability issues.

Any student, intern, or resident working in the facility shall participate in a facility orientation that includes but is not limited to topics such as fire safety, facility security, items considered contraband, and incarcerated person culture.

All students, interns, or residents shall be required to agree in writing to abide by all facility policies, including those relating to hostages, facility security, and the confidentiality of information.

All training provided, written agreements, and/or contracts shall be maintained in the intern, resident, or student's file by the Responsible Physician or the authorized designee in accordance with established records retention schedules.

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Incarcerated Person Assistants

723.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines and establish parameters for the appropriate use of incarcerated persons as assistants in the provision of health care services.

723.2 POLICY

It is the policy of this office that all incarcerated person assistants shall be under direct supervision and used in a manner that does not give them control or authority over other incarcerated persons, access to confidential medical information, or authority to make treatment decisions or provide patient care. Incarcerated person assistants shall not be used as a substitute for qualified health care professionals.

723.3 INCARCERATED PERSON ASSISTANTS

Incarcerated persons who have received appropriate training may perform limited duties involving assistance to other incarcerated persons, however, only while under the direct supervision of qualified health care professionals. The duties that incarcerated person assistants may perform include the following:

- Peer support and education
- Emotional support activities for incarcerated persons who are ill
- Assisting disabled incarcerated persons with daily living activities such as providing escort assistance or assistance with bathing and dressing
- When qualified and properly trained and when participating in a formal suicide prevention plan, incarcerated person assistants may serve as a companion to other incarcerated persons who are at risk of suicide

723.4 PROHIBITED DUTIES

Incarcerated person assistants shall not be used for any direct patient care activities, diagnostic or treatment decisions, dispensing of medications, scheduling health care appointments, or any form of patient care normally provided by a qualified health care professional.

723.5 TRAINING

Incarcerated person assistants assigned to health care services shall receive education and training specific to their anticipated duties to ensure that they understand and can perform their duties in a safe and lawful manner.

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Suicide Prevention and Intervention

724.1 PURPOSE AND SCOPE

This policy establishes the suicide prevention and intervention program to identify, monitor and, when necessary, provide for emergency response and treatment of incarcerated persons who present a suicide risk while incarcerated at the office detention facilities.

This policy is intended to reduce the risk of self-inflicted injury or death by providing tools to the staff that will allow a timely and organized emergency response to suicide, suicide attempts, or an incarcerated person's unspoken indications that suicide is being considered. The three key components of this plan are evaluation, training, and screening with intervention.

724.2 POLICY

It is the policy of this office to minimize the incidence of suicide by establishing and maintaining a comprehensive suicide prevention and intervention program designed to identify incarcerated persons who are at risk of suicide and to intervene appropriately whenever possible. The program shall be developed by the Captain or the authorized designee and the Responsible Physician, approved by the local public health entity, and reviewed annually by the Captain. A copy of this policy shall be maintained in each unit of the facility where it can be easily accessed by all staff members (15 CCR 1029(a)(8); 15 CCR 1030).

724.3 SUICIDE PREVENTION TEAM

The Captain in cooperation with the Responsible Physician shall establish a suicide prevention team. The team will evaluate and approve the suicide prevention and intervention program annually. The suicide prevention team will consist of qualified health care professionals and the Captain or the authorized designee. The yearly evaluation will include a review of all current policies to ensure they are relevant, realistic, and consistent with the mission of the program. The program and policies will be updated as needed (15 CCR 1030).

The suicide prevention team shall also ensure that the facility is evaluated annually to identify any physical plant characteristics or operational procedures that might be modified to reduce the risk of suicide. This should be accomplished by conducting a review of suicides and suicide attempts, physical inspection, review of various facility inspection reports, and by participating in incarcerated person/management team meetings. If physical modifications are recommended, the team shall ensure the Captain is promptly notified.

It shall also be the responsibility of the suicide prevention team to coordinate with the Training Manager to ensure that suicide prevention training is provided in compliance with applicable statutes and standards.

724.4 STAFF TRAINING

All facility staff members who are responsible for supervising incarcerated persons shall receive initial and annual training on suicide risk identification, prevention, and intervention, to include, at minimum (15 CCR 1030):

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- The provisions of this policy.
- Identification of the warning signs and indicators of potential suicide, including training on suicide risk factors.
- Identification of the demographic and cultural parameters of suicidal behavior, including incidence and variations in precipitating factors.
- Responding to suicidal and depressed incarcerated persons.
- Communication between corrections staff, court staff, and health care personnel.
- Using referral procedures.
- Housing observation and suicide watch-level procedures.
- Follow-up monitoring of incarcerated persons who attempt suicide.
- Communication between members and arresting/transporting correctional officers.
- A plan for mental health consultation following return from court as needed.

Recommendations for modification to suicide training should be directed to the Captain, who shall review the recommendations and approve, if appropriate.

724.5 SCREENING AND INTERVENTION

All incarcerated persons shall undergo medical and mental health screening during the intake process (15 CCR 1030). A portion of the intake medical screening is devoted to assessing incarcerated persons at risk for suicide. Upon an incarcerated person entering the facility, the person should be assessed by custody staff for the ability to answer medical and mental health screening questions.

Any incarcerated person who appears to be unable to answer the initial medical screening questions shall be examined by a qualified health care professional at a designated hospital and receive medical clearance before acceptance into the jail. Incarcerated persons who refuse to answer these questions shall be placed under observation until the screening can be completed, or until sufficient information is obtained to allow the staff to make appropriate decisions concerning housing and care.

Staff members shall promptly refer any incarcerated person who is at risk for suicide to classification, health services, and mental health services. The incarcerated person shall remain under direct and constant observation in a safe setting until designated staff makes appropriate health care and housing decisions (15 CCR 1030).

Special situations may arise where a screening and intervention is appropriate for an incarcerated person when the person is placed in restrictive housing, following a hearing, and after a transfer or change in classification (15 CCR 1030).

724.6 SUICIDE WATCH

Incarcerated persons should only be housed on suicide watch with the approval of a qualified health care professional and the Shift Supervisor. If a qualified health care professional is not

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present in the jail, the Shift Supervisor may make the decision to place an incarcerated person on suicide watch but should notify a qualified health care professional as soon as practicable. incarcerated persons placed on suicide watch shall be closely monitored and housed in a cell that has been designed to be suicide resistant. Prior to housing the incarcerated person, the staff should carefully inspect the cell for objects that may pose a threat to the person's safety.

Qualified health care professionals are primarily responsible for the treatment of incarcerated persons on suicide watch. Correctional officers and general employees are responsible for the physical safety of incarcerated persons. All staff members should coordinate their efforts to ensure that incarcerated persons do not have the means or the opportunity to injure themselves.

An observation log shall be maintained for each incarcerated person on suicide watch. A staff member shall be designated to make a direct visual observation of the incarcerated person twice every 30 minutes at approximately 15-minute intervals. A Shift Supervisor and a qualified health care professional, if available, must observe the incarcerated person at least once every five hours. Each staff member who is required to observe the incarcerated person shall make notations in the observation log documenting the time of observation and a brief description of the person's behavior.

An incarcerated person classified as actively suicidal must be continuously monitored by direct visual observation of a correctional officer. While monitoring may be supplemented by video monitoring, it may never be a substitute for direct visual monitoring.

The status of suicidal incarcerated persons should be readily identifiable in a manner discernible by staff. When standard-issue clothing presents a security or medical risk to the incarcerated person or others, the incarcerated person shall be supplied with a security garment that is designed to promote the person's safety and not cause unnecessary humiliation and degradation. Use of the security garment shall be documented in the incarcerated person's health record. Suicidal persons shall not be permitted to retain undergarments or any other item that can be fashioned into an implement for hanging (e.g., plastic bags, shoelaces, sheets). Incarcerated persons shall not be permitted to keep personal property while housed on suicide watch and shall not be permitted to possess razors or other sharp objects, such as pencils, items with staples, or any other item that may be used to cause a self-inflicted injury. Physical restraints should only be used as a last resort measure. The decision to use or discontinue use of restraints should be made in consultation with qualified health care professionals.

Incarcerated persons who are not actively suicidal but who have expressed suicidal thoughts or have a recent history of self-injurious behavior should be observed by staff at irregular intervals, not to exceed every 15 minutes.

724.6.1 INTERVENTION

Any suicide attempt is a medical emergency. Staff should take action to facilitate emergency medical care and preserve and collect evidence as necessary. A qualified health care professional should be summoned immediately any time the staff suspects a suicide attempt is imminent. Staff should take reasonable and appropriate precautions to mitigate the ability of the incarcerated

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persons to injure themselves, and should consider establishing and maintaining a non-threatening conversation with the person while awaiting assistance. If a qualified health care professional is not immediately available, the incarcerated person should be placed in an appropriate and safe location until such time as qualified health care professionals or the Responsible Physician is available.

Following a suicide attempt, staff should initiate a medical emergency response and initiate and continue appropriate life-saving measures until relieved by qualified health care professionals. The arriving medical staff should perform the appropriate medical evaluation and intervention. The Responsible Physician or the authorized designee should be notified in situations when referral and transportation to the emergency room of a local hospital is required (15 CCR 1030).

724.6.2 NOTIFICATION

In the event of an attempted or completed suicide, the Captain should be promptly notified. The Captain should notify the Sheriff.

The location where a suicide or attempted suicide has occurred should be treated as a crime scene after the incarcerated person has been removed from the cell or after emergency medical care is rendered. The area should be secured and access-controlled to preserve evidence until the appropriate investigation can be completed.

All suicides or attempted suicides shall be documented in an incident report. Any injury must be documented in an incarcerated person injury report (15 CCR 1030).

All in-custody deaths, including those resulting from suicide, should be investigated and documented in accordance with the Reporting In-Custody Deaths Policy (15 CCR 1030).

724.7 FOLLOW-UP

Qualified health care professionals should evaluate any incarcerated person placed in suicide watch within 24 hours of placement or at the next available physician's visit, whichever is earliest. After evaluation, qualified health care professionals should make a recommendation whether to keep the incarcerated person on suicide watch. Only a qualified health care professional may remove an incarcerated person from suicide watch.

All changes in incarcerated person status should be reported to the qualified health care professional to ensure the person receives appropriate care. The incarcerated person's health record should be updated to reflect all contacts, treatment, and any other relevant information, and the records maintained in accordance with established records retention schedules.

Although the goal of this program is to significantly reduce the risk of in-custody deaths, the ongoing care of suicidal incarcerated persons after release must also be considered. Incarcerated persons who are at risk for suicide should work with local or area mental health resources and their families after release. A correctional officer should complete the necessary application, documenting the reasons why the incarcerated person is believed to be suicidal. The completed application should accompany the released incarcerated person to the designated facility.

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724.7.1 DEBRIEFING

Any suicide attempt or death of an incarcerated person or on-site staff member requires a staff debriefing. Information will be communicated to the oncoming Shift Supervisor and staff to apprise them of the incident and the actions taken with regard to the incident. Such debriefing will be appropriately documented and shall be reviewed by administration, security, and the Responsible Physician.

724.8 TRANSPORTATION

Incarcerated persons at risk for suicide pose additional challenges during transport and while being held in court holding facilities. The transportation staff should take reasonable steps to closely monitor at-risk incarcerated persons whenever they are transported or held in any cell that is not designated as a suicide-watch cell. All additional security and monitoring measures implemented by the staff should be documented in the incarcerated person's record. The transporting correctional officer should ensure that the suicide threat or other danger is communicated to personnel at the receiving facility.

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Nursing Assessment Protocols

726.1 PURPOSE AND SCOPE

The purpose of this policy is to establish standards for evaluating and treating incarcerated persons with medical issues that are easily and effectively treated or triaged by nursing personnel who have been properly trained in the use of nursing assessment protocols.

726.1.1 DEFINITIONS

Definitions related to this policy include:

Nursing assessment protocols - Written instructions or guidelines that specify the steps to be taken in evaluating an incarcerated person's health status and providing medical treatment. Protocols may include first-aid procedures for the identification and care of ailments that ordinarily would be treated with over-the-counter (OTC) medication or through self-care. These protocols also may address more serious symptoms, such as chest pain, shortness of breath, or intoxication. The protocols provide a sequence of steps to evaluate and stabilize an incarcerated person until a qualified health care professional is contacted and orders for further care are received.

726.2 POLICY

It is the policy of this office that medical care performed by personnel other than a physician shall be performed pursuant to a written protocol or order of the Responsible Physician.

726.3 PROTOCOL DEVELOPMENT AND AUTHORIZATION

The facility's Responsible Physician or the authorized designee shall develop, review, and authorize all nursing protocols used for the treatment of incarcerated persons, and shall develop, deliver, or procure appropriate training for the nurses on their use. Each nursing assessment protocol will have a signed declaration indicating it has been reviewed and approved by the nursing administrator and the Responsible Physician.

The protocols developed shall be appropriate for the training and experience of the health care services staff members who will deliver the services. Each protocol shall comply with the standards of practice for the level of care the health care services staff members are authorized to provide. The protocols shall only include the use of OTC medications.

The Responsible Physician shall review the nursing assessment annually, revising as necessary and dating and signing approved protocols (15 CCR 1204).

726.4 TRAINING

Nurses will be trained and approved in the nursing assessment protocols prior to their use. The training shall be documented and should include:

(a) Evidence that new nurses have been trained.

(b) Demonstration of knowledge and skills.

(c) Evidence of annual review of skills.

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(d) Evidence of retraining when protocols are introduced or revised.

726.5 AUTHORIZED USE OF PROTOCOLS

Nursing staff may use a nursing assessment protocol only after they have been trained and authorized by the Responsible Physician. Nursing assessment protocols shall only be used after a nurse fully evaluates the incarcerated person's complaint and the incarcerated person's condition meets the appropriate criteria.

Incarcerated persons may only be treated using a nursing protocol for the same condition on two consecutive visits. If the incarcerated person requests service for the same condition a third time, the incarcerated person should be referred to a physician's assistant, nurse practitioner, registered nurse, or physician.

The assessment protocols only include the use of OTC medication. When OTCs are administered per the protocol, they do not require the signature of a physician. However, the order and the administration of the medication shall be documented on the medication administration record.

A registered nurse (RN) is considered the minimum certification level required to independently initiate medical treatment. The RN must be present to physically assess the incarcerated person; an assessment cannot be done via telephone or electronically.

Licensed vocational nurses (LVNs) are generally prohibited from independently initiating any standardized protocol. Under very specific circumstances (e.g., early detoxification, a history of a seizure disorder), it may be acceptable for an LVN to initiate a standing order following a telephone consultation with a physician, physician's assistant, psychiatrist, dentist, or other person who meets the minimum certification level to initiate such orders. Under these circumstances, it is essential that the incarcerated person be personally evaluated within 24 hours by a physician's assistant, nurse practitioner, registered nurse, or physician.

Nursing assessment protocols shall not include the administration of any prescription medication, with the exception of protocols addressing an emergency or a life-threatening situation. Treatment with prescription medication may only be initiated upon a written or verbal order from a physician, physician's assistant, psychiatrist, dentist, or other person who is licensed to dispense medication in the state, either independently or under the supervision of a physician.

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Infirmary Care

727.1 PURPOSE AND SCOPE

This policy recognizes that some incarcerated persons will need care for an illness or diagnosis that requires daily monitoring, daily medication and/or therapy, or assistance with daily activities at a level that requires skilled nursing intervention. Such persons are best served in an area expressly designed and operated for providing medical care in close proximity to qualified health care professionals.

727.1.1 DEFINITIONS

Definitions related to this policy include:

Infirmary - An area specifically designed and operated for providing medical care to incarcerated persons who need skilled nursing care for a period of 24 hours or more. It is expressly intended for persons who do not need hospitalization or placement in a licensed nursing facility, but whose care cannot be managed safely in an outpatient setting. It is not the area itself but the scope of care provided that makes the bed an infirmary bed.

Infirmary care - Care provided to patients with an illness or diagnosis that requires daily monitoring, medication and/or therapy, or assistance with daily activities at a level requiring skilled nursing intervention.

Within sight or sound of a qualified health care professional - The patient can gain the professional's attention through visual or auditory signals.

727.2 POLICY

It is the policy of this office that infirmary care is provided when appropriate to meet the serious medical needs of incarcerated persons. The Responsible Physician shall be responsible for developing and maintaining an infirmary manual, that shall be available in the infirmary. The infirmary manual shall include but is not limited to:

- Nursing care procedures.
- A definition of the scope of infirmary care services available.
- Provisions for a physician to be on-call or available 24 hours a day.
- Guidelines regarding the availability of health care personnel, who shall be on-duty 24 hours a day when incarcerated persons are present and shall have access to a physician or registered nurse.
- Provisions ensuring that all incarcerated persons are within sight or sound of a staff member.
- Provisions for an infirmary record that is separate from the complete medical record of the incarcerated person.
- Requirements for compliance with applicable state statues and local licensing.

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Admission to and discharge from the infirmary shall be controlled by medical orders or protocols issued by a qualified health care professional after a clinical evaluation and the establishment of a treatment plan.

727.3 DOCUMENTATION REQUIREMENTS FOR INFIRMARY PATIENTS

A complete inpatient health record shall be kept for each incarcerated person housed in the infirmary and should include:

- The admitting order that includes the admitting diagnosis, medications, diet, activity restrictions, diagnostic tests required, and frequency of vital sign monitoring and other follow-up.
- Complete documentation of the care and treatment given.
- The medication administration record.
- A discharge plan and discharge notes.

727.4 INFIRMARY REQUIREMENTS

Incarcerated persons in the infirmary shall have access to operable washbasins with hot and cold running water at a minimum ratio of one basin for every 12 incarcerated persons, unless state or local building or health codes specify differently. Sufficient bathing facilities shall be provided in the infirmary to allow incarcerated persons to bathe daily. At least one bathing facility shall be configured and equipped to accommodate incarcerated persons who have physical impairments or who need assistance to bathe. Water for bathing is thermostatically controlled to temperatures ranging from 100 to 120 degrees.

Incarcerated persons in the infirmary shall have access to toilets and hand-washing facilities 24 hours a day and can use the toilet without staff assistance. Toilets are provided at a minimum ratio of one for every 12 persons in the male infirmary and one for every eight persons in the female infirmary. Urinals may be substituted for up to one-half of the toilets in the male infirmary. All housing units with three or more persons shall have a minimum of two toilets.

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Medical Equipment and Supply Control

728.1 PURPOSE AND SCOPE

This policy outlines the control and inventory process to be utilized in accounting for all medical equipment and supplies. Medical equipment and supplies can pose a hazard for both the incarcerated person population and the staff. Unauthorized possession of medical equipment and supplies constitutes possession of contraband. Unauthorized use of medical equipment and supplies violates incarcerated person rules detailed in the incarcerated person handbook. Since it is necessary to have a well-stocked medical space within the secure perimeter of the facility, there must be a plan to ensure that equipment and medical supplies are accounted for and tightly controlled.

728.2 POLICY

It is the policy of this office that all medical equipment, including sharps, dental instruments, needles and other items must be tightly controlled so they cannot be used as weapons or to facilitate the injection of drugs or other substances. Additionally, these tools and supplies must be controlled to prevent exposure to biohazards.

728.3 STAFF RESPONSIBILITIES

It is the responsibility of the Captain to ensure that the incarcerated person handbook clearly defines the unauthorized possession and/or use of medical equipment and supplies as a rule violation that may result in discipline.

The Responsible Physician or the authorized designee shall create and maintain an inventory log for all medical equipment and supplies. This log will be utilized by medical personnel who work within the facility to track and control medical equipment and supplies. When not in use, all medical equipment and supplies shall be stored in a secure manner to prevent unauthorized access.

At the beginning of each shift, the qualified health care professional shall inventory the medical supplies and equipment within their control. Any time a disposable item is used, the log shall reflect its use and disposal. At the end of each shift, the qualified health care professional will conduct another inventory using the supply and equipment log, and reconcile any disposable supplies used during their shift.

If there is a discrepancy that indicates that medical supplies or equipment are missing, the Shift Supervisor shall be immediately notified. The Shift Supervisor shall initiate a search for the missing supplies and/or equipment. The Shift Supervisor shall document the incident and any actions taken and provide the Captain with a complete report.

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Continuation of Care

729.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a proactive health system in the facility that fosters the continuation of health care needs that, if discontinued, would have a negative effect on the health of the incarcerated person. The sole objective is to maintain or improve the health of the incarcerated persons. This policy is intended to ensure that incarcerated persons receive health services in keeping with current community standards as ordered by qualified health care professionals.

729.2 POLICY

It is the policy of this office that all incarcerated persons shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The incarcerated person's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release (15 CCR 1206.5(a); 15 CCR 1210).

729.3 CONTINUATION OF CARE

The Captain is responsible for coordinating with the Responsible Physician to ensure that all incarcerated persons receive appropriate health care, including but not limited to:

(a) Newly booked incarcerated persons shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries, and medications or treatments the incarcerated person is currently receiving.

1. Any prior jail health records, including those from other facilities, should be reviewed.
2. Current medications will be verified and continued as deemed appropriate by the Responsible Physician or the authorized designee.

(b) A health assessment is completed on or before the 14th day of continuous incarceration.

(c) Continuation of birth control measures, upon request by the incarcerated person, as prescribed by a physician, nurse practitioner, certified nurse midwife, or physician assistant (Penal Code § 4023.5).

(d) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:

1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
2. The type and frequency of diagnostic testing and therapeutic regimens.
3. When appropriate, instructions about diet, exercise, medication, and adaptation to the correctional environment.
4. Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the incarcerated person.

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(e) Reasonable effort should be made to obtain information and records relating to previous health care professionals, with the consent of the incarcerated person, if the incarcerated person is currently under medical care.

(f) Upon transfer to another facility, a medical discharge summary of the incarcerated person's current condition, medications, and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.

(g) Response to requests for health information from medical facilities and health care professionals, with the incarcerated person's written consent.

(h) When incarcerated persons are sent out of the facility for emergency or specialty medical treatment, written information regarding the incarcerated person's reason for transfer, pertinent medical problems, and list of current medications should be sent with the incarcerated person and may be given to those providing care upon request. The name and telephone number of a contact person the medical facility can call should be included with the patient's health information. Upon the incarcerated person's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications, and other treatment.

(i) Upon release from the facility, incarcerated persons should be given written instructions for the continuation of care, including but not limited to:

1. The name and contact information of health care facilities for follow-up appointments.
2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.

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Continuous Quality Improvement

730.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a Continuous Quality Improvement (CQI) process of health care review in an effort to identify improvement needs in policies, processes or staff actions, and to develop and implement better health care strategies to improve the processes and outcomes of the health care services delivered at this facility.

730.2 POLICY

It is the policy of this office that an internal review and CQI process for incarcerated person health care delivery and outcomes is developed and maintained, measurable goals and objectives are established and reviewed annually, and that the process itself is periodically reviewed and updated as needed. The process should be supervised by the Responsible Physician. The data evaluated should result in more effective access to services, an improved quality of care, and a better utilization of resources.

730.3 CQI TECHNIQUES AND MONITORING

The CQI process may be applied to any aspect of health care delivery and health service outcomes, including, but not limited to, monitoring and reviewing the following:

- Quality of the medical charts, by the Responsible Physician or the authorized designee
- Investigations of complaints and grievances
- Corrective action plans and plan outcomes
- Deaths in custody, suicide attempts, sentinel events, and incident and management of serious communicable disease outbreaks
- Plans for employee education and training, using investigation findings
- Records of internal review activities
- Quarterly reports to the Responsible Physician and Captain
- Legal requirements for confidentiality of medical records
- Credentialing (assessing and confirming qualifications), privileging (authorization to provide services), and training of employees and the associated peer review processes
- Condition and effectiveness of the care environment
- Adequacy and quality of supplies and equipment
- Quality of care provided to individual patients
- Accuracy and efficiency of pharmacy services and medication administration
- Ease of access to care

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- Risk minimization tactics
- Data describing the types, quality and quantity of care provided
- Accreditation compliance

730.4 CQI COMMITTEE MEETINGS

The jail CQI committee should meet quarterly under the direction of both the committee chair and the Responsible Physician. The CQI meetings may be conducted at the same time as quarterly administrative meetings, but CQI minutes must be produced and maintained separately from any other minutes.

The CQI minutes are not subject to disclosure outside of the CQI program, including requests from local, regional and national entities. Other interested parties with a need to know are only entitled to the disclosure of information that includes:

(a) Problems that may have been identified.

(b) Solutions that have been agreed upon.

(c) Persons responsible for implementing the corrective action.

(d) The time frame for implementing the corrective actions.

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Informed Consent and Right to Refuse Medical Care

731.1 PURPOSE AND SCOPE

This policy recognizes that incarcerated persons have a right to make informed decisions regarding their health care. It establishes the conditions under which informed consent should be obtained prior to treatment, when medical care may proceed without consent, the documentation process for the refusal of medical care, and the retention of refusal forms.

731.1.1 DEFINITIONS

Definitions related to this policy include:

Informed consent - The written agreement by an incarcerated person to a treatment, examination, or procedure. Consent is sought after the incarcerated person has received the material facts about the nature, consequences, and risks of the proposed treatment, the examination or procedure, the alternatives to the treatment, and the prognosis if the proposed treatment is not undertaken, in a language understood by the person.

731.2 POLICY

It is the policy of this office that generally, all health care examinations, treatments, and procedures shall be conducted with the informed consent of the incarcerated person. Exceptions include emergencies, life-threatening conditions, and a court order (15 CCR 1214).

731.3 INFORMED CONSENT

The qualified health care professional initiating treatment shall inform the incarcerated person of the nature of the treatment and its possible side effects and risks, as well as the risks associated with not having the treatment.

For invasive procedures or any treatment where there is some risk to the incarcerated person, informed consent is documented on a written form containing the signatures of the person and a health services staff witness.

A signed informed consent shall be obtained and witnessed by the prescribing psychiatrist for the initiation of psychotropic medication.

Appropriate arrangements shall be made to provide language translation services as needed before an incarcerated person signs any informed consent form.

For minors and conservatees, the informed consent of a parent, guardian, or legal custodian applies where required by law. Absent informed consent in non-emergency situations, a court order is required before involuntary treatment can be administered to an incarcerated person.

731.4 REFUSAL OF TREATMENT

When an incarcerated person refuses medical, mental health, or dental treatment or medication, they shall be counseled regarding the necessity of the treatment/medication and

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the consequences of refusal. The incarcerated person shall then be requested to sign a form acknowledging that the person refused an examination and/or treatment.

The form shall be filled out completely by the qualified health care professional and include the incarcerated person's name, booking number, treatment/medication refused, the risks or consequences of refusal, and the person's mental status. The form must be signed by the incarcerated person and a witness.

In the event that the incarcerated person refuses to sign, a notation to this effect shall be documented on the incarcerated person signature line. This shall require a signed acknowledgement by two witnesses.

Documentation regarding the incarcerated person's mental status shall be noted in the medical record, along with a brief note describing the intervention of the qualified health care professional.

The completed form is to be placed in the incarcerated person's medical record.

It is the responsibility of the qualified health care professional to refer all refusal forms to the Responsible Physician.

Any time there is a concern about the decision-making capacity of the incarcerated person, an evaluation shall be conducted, particularly if the refusal is for critical or acute care.

Any time an incarcerated person refuses to take their medication, attend sick call, or attend a scheduled medical appointment, a signed refusal must be obtained by the qualified health care professional.

The refusal form shall be a permanent part of the incarcerated person's medical record.

The incarcerated person may revoke their refusal at any time.

731.4.1 STERILIZATION

This office shall not perform any sterilization procedure on an incarcerated person, without the person's consent, unless the procedure is necessary to save the person's life. A sterilization procedure may be performed with the incarcerated person's consent under the following conditions (Penal Code § 3440(b)):

(a) Less invasive measures are not available, have been refused by the incarcerated person, or have been deemed unsuccessful.

(b) A second physician, approved to provide medical services for the facility but not employed by the county, confirms the need for the procedure.

(c) The incarcerated person has been advised of the impact and side effects of the procedure, and that refusal will not affect the person's ability to receive future medical treatment.

If a sterilization procedure is performed, this office shall provide psychological consultation before and after the procedure, as well as the appropriate medical follow-up (Penal Code § 3440(c)).

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The Records Supervisor shall also submit data annually to the Board of State and Community Corrections regarding the race, age, medical justification, and method of sterilization for any sterilization procedure performed (Penal Code § 3440(d)).

731.4.2 INVOLUNTARY ADMINISTRATION OF PSYCHOTROPIC MEDICATION

Psychotropic medication may only be administered involuntarily to an incarcerated person in emergency circumstances or as otherwise allowed by law and only with a physician's order. The medication administered shall only be what is required to treat the emergency condition and administered for only as long as the emergency continues to exist. Any such treatment shall be consistent with the standard of care. A court order shall be sought or legal consent shall be obtained if the Responsible Physician anticipates further dosage will be necessary or beneficial (Penal Code § 2603; 15 CCR 1217).

In cases of non-emergencies, certain conditions must be met as described in Penal Code § 2603(c) prior to the involuntary administration of the psychotropic medication, including a documented attempt to locate an available bed in a noncarceral treatment facility in lieu of seeking to administer involuntary medication (Penal Code § 2603).

The reason medication was involuntarily administered should be documented in the incarcerated person's health care record.

731.5 RECORDS

The Captain or the authorized designee shall work with the Responsible Physician to develop medical care consent and refusal forms and a system for retaining records in the incarcerated person's health file in accordance with established records retention schedules.

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Management of Health Records

732.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a uniform manner of maintaining the active health records of incarcerated persons for easy accessibility during clinical treatment, and the storage methods for inactive health records. This policy also addresses practices that will ensure the confidentiality of health record information by separating it from custody records.

732.1.1 DEFINITIONS

Definitions related to this policy include:

Protected health information - Information that relates to the incarcerated person's past, present, or future physical or mental health or condition, the provision of medical care to the incarcerated person, or the past, present, or future payment for the provision of health care to the incarcerated person (45 CFR 160.103).

732.2 POLICY

It is the policy of this office to maintain the confidentiality of incarcerated persons' protected health information. Incarcerated person health records will be maintained separately from custody records and under secure conditions, in compliance with all local, state, and federal requirements.

The Responsible Physician or the authorized designee will establish standardized facility procedures for recording information in the file and for the control and access to incarcerated person health records. Incarcerated workers shall not have any access to incarcerated person health records.

732.3 INITIATING A HEALTH RECORD

Following the initial medical screening process, the qualified health care professional shall initiate a health record for each incarcerated person. The Responsible Physician shall be responsible for developing and implementing procedures for standardized record formatting (15 CCR 1205 et seq.).

732.4 CONFIDENTIALITY OF AN INCARCERATED PERSON'S HEALTH RECORDS

Information regarding an incarcerated person's health status is confidential. Active health records shall be maintained separately from custody records. Access to an incarcerated person's health record shall be in accordance with state and federal law (Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law 104-191 and the implementing regulations) (15 CCR 1205).

The incarcerated person's protected health information may be disclosed, with the incarcerated person's written authorization, to any person so designated. A fully completed authorization for release and/or a disclosure of protected health information form shall be required prior to disclosure based upon informed consent (15 CCR 1205).

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The incarcerated person's protected health information may be disclosed by the qualified health care professional without the incarcerated person's authorization under certain circumstances and when approved by the Responsible Physician or the authorized designee. Those circumstances include:

(a) To known qualified health care professionals who are members of the health care team responsible for the incarcerated person's care.

(b) To custody staff regarding incarcerated persons as reasonably necessary to protect the safety, security, and good order of the facility. Examples may include information that the incarcerated person may be:

1. Suicidal.
2. Homicidal.
3. A clear custodial risk.
4. A clear danger of injury to self or others.
5. Gravely disabled.
6. Receiving psychotropic medications.
7. A communicable disease risk.
8. In need of special housing.

(c) To the local public health officer when an incarcerated person is part of a communicable disease investigation.

(d) Pursuant to a court order or valid subpoena duces tecum, accompanied by satisfactory assurance that the incarcerated person has been given notice and an opportunity to file an objection or efforts have been made to secure a protective order as required under HIPAA (45 CFR 164.512).

(e) To a law enforcement officer for purposes of a criminal investigation, to avert a serious threat to the health or safety of any person or to fulfill mandatory reporting requirements.

(f) To a law enforcement officer when the incarcerated person has died as a result of criminal conduct.

The incarcerated person's limited protected health information may also be disclosed to a law enforcement officer for purposes of identifying or locating a suspect or when the incarcerated person is a victim of a crime. When reasonably possible, the approval of the Captain should be obtained prior to disclosure.

Attorneys requesting health record information regarding an incarcerated person shall be advised that an authorization for release and/or a disclosure of medical information form or an attorney release form signed by the incarcerated person is required.

Family members may be informed of the incarcerated person's custody status and whether the incarcerated person is receiving medical care. Family members requesting additional information must provide a proper authorization for release and/or a disclosure of medical information form.

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The Captain, in consultation with the Responsible Physician, shall designate personnel who will be responsible for reviewing all requests for access to medical records and who will propose related policies and procedures and other activities designed to facilitate proper documentation of health care and access to records.

732.4.1 ADDITIONAL STATE PRIVACY PROTECTIONS

The health services administrator and Responsible Physician or the authorized designee shall ensure that privacy protections comply with state law requirements regarding privacy and confidentiality applicable to the specific type of medical records requested, including:

(a) Records associated with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) (Health and Safety Code § 121025).

(b) Records of patients in alcohol or substance use disorder treatment programs (Health and Safety Code § 11845.5).

732.5 HEALTH RECORD CONTENTS

(a) To standardize record keeping and to identify responsibilities, the following should apply to incarcerated person health records (15 CCR 1205):

1. The qualified health care professional or the authorized designee should be responsible for ensuring that all required information and forms are included in the medical records. There should also be a periodic informal review as described in the Continuous Quality Improvement Policy.
2. The qualified health care professional or the authorized designee should be responsible for ensuring incoming written findings and recommendations are returned with the incarcerated person from any offsite visit and filed in the incarcerated person's medical record.

(b) Incarcerated persons' health records shall minimally contain but are not limited to:

1. Identifying information (e.g., incarcerated person name, identification number, date of birth, gender) on each sheet in the file.
2. Completed incarcerated person medical/mental health screening forms and evaluation reports.
3. Health appraisal information and data forms.
4. Complaints of illness or injury.
5. A problem summary, containing medical and mental health diagnoses and treatments as well as known allergies.
6. Immunization records.
7. Progress notes of all significant findings, diagnoses, treatments, and dispositions.
8. Orders from a qualified health care professional for prescribed and administered medications and medication records in conformance with 15 CCR 1216.
9. X-ray and laboratory reports and diagnostic studies.

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10. A record of the date, time, and place of each clinical encounter with incarcerated persons.
11. Health service reports.
12. Individualized treatment plans when available or required.
13. Consent and refusal forms.
14. Release of information authorization forms (including HIPAA forms).
15. Results of specialty consultations and off-site referrals.
16. Special needs treatment plans, if applicable.
17. Names of personnel who treat, prescribe, and/or administer/deliver prescription medication.

732.6 ACTIVE INCARCERATED PERSONS HEALTH RECORDS

Active incarcerated person health records will be accessible to qualified health care professionals as necessary for the provision of medical treatment and other uses allowed by law, or the Captain or the authorized designee under exigent circumstances, to protect the safety, security, and good order of the facility.

All entries in the incarcerated person's health record will have the place, date, time, signature and title of each individual providing care and should be legible.

Documentation in the incarcerated person's health record is done in the subjective, objective, assessment, and plan (SOAP) format. An incarcerated person's health record is initiated at the first health encounter following the initial medical screening.

If an incarcerated person has been previously incarcerated, the previous health record should be reactivated. If a new record has been initiated and a previous record exists, medical records personnel should merge the two records in order to compile a complete history, unless mandated statutory retention schedules have provided for the destruction of one file and there is a need to create a new file.

New information shall be entered on the health record at the completion of each encounter.

All the incarcerated person's health records shall be returned to the file prior to the end of each watch.

732.7 INACTIVE MEDICAL RECORDS

When an incarcerated person is released from custody, medical records personnel should remove the incarcerated person's health record from the active file.

The health record should be reviewed for completeness. Any loose documents should be filed according to the established health record format.

The health record should be securely stored in the area designated for inactive incarcerated person health records, in accordance with established records retention schedules but no less

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than 10 years from the date of the last clinical encounter. Adult records and juvenile records may have different jurisdictional retention requirements.

Inactive incarcerated person medical records may be stored off-site. Health record information from inactive files may be transmitted to specific and designated physicians or medical facilities upon the written request or authorization of the incarcerated person.

732.8 ELECTRONIC MEDICAL RECORDS

If medical records are maintained in an electronic format, the system should be structured with redundancies to ensure the records will survive any system failure.

732.9 HIPAA COMPLIANCE

The Captain, in consultation with the Responsible Physician, shall ensure that a health record protection and disclosure compliance plan conforming to the requirements of HIPAA is prepared and maintained. The plan should detail all necessary procedures for security and review of the access and disclosure of protected health information.

At minimum, the plan will include:

- Assignment of a HIPAA compliance officer who is trained in HIPAA compliance and will be responsible for maintaining procedures for and enforcing HIPAA requirements, including receiving and documenting complaints about breaches of privacy.
- Ongoing training on HIPAA requirements, depending on the level of access the member has to protected health information.
- Administrative, physical, and technical safeguards to protect the privacy of protected health information.
- Procedures for the permitted or required use or disclosure of protected health information and the mitigation of harm caused by improper use or disclosure.
- Protocol to ensure privacy policies and procedures, any privacy practices notices, disposition of any complaints, and other actions, activities, and designations required to be documented, are maintained for at least six years after the date of creation or last effective date, whichever is later.

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Incarcerated Person Health Care Communication

733.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain effective communication between the treating qualified health care professionals and custody personnel. This communication is essential at all levels of the organization to ensure the health and safety of all occupants of the facility.

733.2 POLICY

It is the policy of this office that effective communication shall occur between the Captain and the treating qualified health care professionals regarding any significant health issues of an incarcerated person. All health issues should be considered during classification and housing decisions in order to preserve the health and safety of the occupants of this facility.

When a qualified health care professional recognizes that an incarcerated person will require accommodation due to a medical or mental health condition, custody personnel shall be promptly notified in writing.

The Captain shall be responsible for establishing measurable goals relating to processes that enhance good communication between the qualified health care professionals and the custody staff. The Captain should also establish, in writing, the desired performance objectives relating to practices that support good communication between the qualified health care professionals and the custody staff. The Captain should review the documents annually for any necessary revisions or updates in support of continuous improvement in the delivery of health care services.

733.3 MANAGING SPECIAL NEEDS INCARCERATED PERSONS

Upon an incarcerated person's arrival at the facility, the qualified health care professional, in conjunction with the custody staff, should determine if the incarcerated person has any special needs.

(a) If staff determines that an incarcerated person has special needs, a communication form or other appropriate documentation relating to special needs should be completed and sent to classification personnel, the Shift Supervisor, and the housing officer. This is to ensure that the person is assigned to a housing unit that is equipped to meet their special needs.

(b) The qualified health care professional should arrange for the appropriate follow-up evaluation.

(c) The health care of special needs incarcerated persons should be continuous and ongoing. At minimum, the person should be seen by the Responsible Physician or a qualified health care professional at least once every 90 days to evaluate the person's continued designation as a special needs incarcerated person.

(d) Incarcerated persons who have been determined by qualified health care professionals to require a special needs classification should be seen at least once monthly by a qualified health care professional.

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(e) Prior to transfer to another facility, a medical transfer summary should be completed detailing any special requirements that should be considered while the incarcerated person is in transit and upon their arrival at the destination. Discharge planning should be included, as appropriate.

(f) A treatment plan should be developed for each incarcerated person and should include, at a minimum:

1. The frequency of follow-up for medical evaluation and anticipated adjustments of the treatment modality.
2. The type and frequency of diagnostic testing and therapeutic regimens.
3. When appropriate, instructions about diet, exercise, adaptation to the correctional environment, and using prescribed medications.

(g) When clinically indicated, the qualified health care professionals and the custody personnel should consult regarding the condition and capabilities of incarcerated persons with known medical and/or psychiatric illnesses or developmental disabilities prior to any of the following:

1. Housing assignment
2. Program or job assignment
3. Admissions to and transfers from or between institutions
4. Disciplinary measures for mentally ill patients

(h) Qualified health care professionals and custody personnel should communicate about incarcerated persons who require special accommodation. These include but are not limited to incarcerated persons who are:

1. Chronically ill.
2. Undergoing dialysis.
3. In an adult facility as an adolescent.
4. Infected with a communicable disease.
5. Physically disabled.
6. Pregnant.
7. Frail or elderly.
8. Terminally ill.
9. Mentally ill or suicidal.
10. Developmentally disabled.

733.4 NOTIFICATION TO SUPERVISORS

In the event that there is no mutual agreement regarding an individual or group of incarcerated persons who require special accommodation for medical or mental health conditions, supervisors in the respective chain of command within the health care and custody staff should address these issues.

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733.5 NOTIFICATION TO THE SHERIFF FOR MEDICAL RELEASE

Supervisors, through the chain of command, should advise the Sheriff when a terminally ill incarcerated person may be appropriate for early release or medical probation under Government Code § 26605.6 because the incarcerated person would not reasonably pose a threat to public safety and the person has a life expectancy of six months or less, or the person requires 24-hour care or acute long-term inpatient rehabilitation services.

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Forensic Evidence

734.1 PURPOSE AND SCOPE

The purpose of this policy is to maintain credibility between the incarcerated persons and the facility's qualified health care professionals by establishing clear guidelines restricting facility health care professionals from participating in the collection of forensic evidence for disciplinary or legal proceedings.

734.1.1 DEFINITION

Definitions related to this policy include:

Forensic evidence - Physical or psychological data collected from an incarcerated person that may be used against the incarcerated person in disciplinary or legal proceedings.

734.2 POLICY

Qualified health care professionals of this facility are generally prohibited from participating in the collection of forensic evidence or performing psychological evaluations for disciplinary or legal proceedings.

Qualified health care professionals of this facility should not be involved in the collection of forensic evidence except when complying with state laws requiring the collection of blood samples from incarcerated persons, provided the incarcerated person has consented to the procedure and staff are not involved in any punitive action against the incarcerated person.

Qualified health care professionals of this facility may collect blood or urine for testing for alcohol or drugs when it is done for medical purposes and under a physician's order. Qualified health care professionals of this facility may conduct incarcerated person-specific, court-ordered laboratory tests and examinations or radiology procedures with the consent of the incarcerated person.

Qualified health care professionals of this facility are prohibited from being involved in the following procedures:

(a) Body cavity searches

(b) Psychological evaluations for use in adversarial proceedings

(c) Blood draws for lab studies ordered by the court, without incarcerated person consent

(d) Any medical procedure, except emergency lifesaving measures, that does not have the incarcerated person's written consent

It shall be the responsibility of the Sheriff or the authorized designee to arrange for appropriately trained professionals to collect forensic evidence for disciplinary or legal proceedings.

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Oral Care

735.1 PURPOSE AND SCOPE

The intent of this policy is to ensure that incarcerated persons have access to dental care and treatment for serious dental needs. While the focus of this policy is primarily on urgent and emergent dental care, as with medical or mental health care, dental care is available based upon patient need.

735.1.1 DEFINITIONS

Definitions related to this policy include:

Infection control practices - Are defined by the American Dental Association (ADA) and the Centers for Disease Control and Prevention (CDC) as including sterilizing instruments, disinfecting equipment, and properly disposing of hazardous waste.

Oral care - Includes instruction in oral hygiene, examinations, and treatment of dental problems. Instruction in oral hygiene minimally includes information on plaque control and the proper brushing of teeth.

Oral examination - Includes taking or reviewing the patient's oral history, an extra-oral head and neck examination, charting of teeth, and examination of the hard and soft tissue of the oral cavity with a mouth mirror, explorer, and adequate illumination.

Oral screening - Includes visual observation of the teeth and gums, and notation of any obvious or gross abnormalities requiring immediate referral to a dentist.

Oral treatment - Includes the full range of services that in the supervising dentist's judgment are necessary for proper mastication and for maintaining the incarcerated person's health status.

735.2 POLICY

It is the policy of this office that oral care is provided under the direction of a dentist licensed in this state and that care is timely and includes immediate access for urgent or painful conditions. There are established priorities for care when, in the dentist's judgment, the incarcerated person's health would otherwise be adversely affected (15 CCR 1215).

735.3 ACCESS TO DENTAL SERVICES

Emergency and medically required dental care is provided to each incarcerated person upon request. Dental services are not limited to extractions. It is the goal of dental services to alleviate pain and suffering, ensure that incarcerated persons do not lose teeth merely as a consequence of incarceration and to provide appropriate dental service whenever medically required to maintain nutrition (15 CCR 1215).

Access to dental services should be as follows:

(a) All incarcerated persons wishing to see the dentist for a non-emergency issue shall complete a sick call form. Requests should be triaged according to the nature and severity of the problem and should be seen by a dentist according to assigned priority.

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Incarcerated persons requesting dental services on weekends or after hours will initially be evaluated by a qualified health care professional and referred appropriately.

(b) If an incarcerated person suffers obvious trauma or other dental emergency, the qualified health care professional may arrange for immediate access to a dentist or may transfer the incarcerated person to an emergency room for treatment.

(c) Incarcerated persons who are furloughed or sentenced to work release or another form of community release may see their own dentist pursuant to approval of scheduling arrangements with facility medical and custody staff. The incarcerated person will be financially responsible for any payment. The Office is under no obligation to the incarcerated person to this appointment.

(d) Records documenting all dental treatment should be maintained in the incarcerated person's medical record file and retained in accordance with established records retention schedules. Examination results should be recorded on a uniform dental record using a numbered system.

(e) Medications prescribed by a dentist should be administered in accordance with pharmacy procedures and documented in the incarcerated person's medical record.

(f) Necessary dental services identified by a dentist that are not available on-site should be provided by referral to community resources as deemed necessary by the facility dentist.

735.4 DENTAL CARE OPTIONS

Incarcerated persons should be offered a dental screening by a qualified health care professional or a dentist within 14 days of incarceration, unless such a screening was completed within the past six months. This dental screening should include an evaluation of the current dental status and instruction on oral hygiene and preventive oral education.

Incarcerated persons should be offered a dental examination, supported by diagnostic X-rays if necessary, by a dentist within 12 months of incarceration.

Incarcerated persons who are scheduled to be incarcerated for less than 12 months should have access to the treatment of dental pain, fillings, extractions of non-restorable teeth, cleaning and treatment of symptomatic areas, and repair of partials and dentures.

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Pharmaceutical Operations

736.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the procedures and protocols under which the facility must manage a pharmaceutical operation in order to comply with federal, state and local laws that govern prescribing and administering medication.

736.1.1 DEFINITIONS

Definitions related to this policy include:

Administration - The act of giving a single dose of a prescribed drug or biological substance to an incarcerated person. Administration is limited to qualified health care professionals and health-trained custody staff members in accordance with state law.

Controlled substances - Medications classified by the Drug Enforcement Administration (DEA) as Schedule II-IV (21 USC § 812).

Delivery - The act of providing a properly labeled prescription container (e.g., a dated container that includes the name of the individual for whom the drug is prescribed, the name of the medication, dose, and instructions for taking the medication, the name of the prescribing physician, and expiration dates). Under these circumstances, a single dose at a time can be delivered to the incarcerated person, according to the written instructions, by any qualified health care professional or health-trained custody staff member.

Dispensing - Those acts of processing a drug for delivery or administration to an incarcerated person pursuant to the order of a qualified health care professional. Dispensing consists of:

- Comparing directions on the label with the directions on the prescription or order to determine accuracy.
- Selection of the drug from stock to fill the order.
- Counting, measuring, compounding, or preparing the drug.
- Placing the drug in the proper container and affixing the appropriate prescription label to the container.
- Adding any required notations to the written prescription.

Dispensing does not include the acts of distributing, delivery, or administration of the drug. The function of dispensing is limited to pharmacists and qualified health care professionals.

Distributing - The movement of a drug, in the originally labeled manufacturer's container or in a labeled pre-packaged container, from the pharmacy to a health care services area.

Dose - The amount of a drug to be administered at one time.

Drug - An article recognized in the United States Pharmacopoeia and National Formulary (USP-NF), the Homeopathic Pharmacopoeia of the United States, or any supplement that is intended for

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use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans. A substance, other than food, intended to affect the structure or any function of the human body.

Pharmaceutical operations - The functions and activities encompassing the procurement, dispensing, distribution, storage, and control of all pharmaceuticals used within the jail, the monitoring of incarcerated person drug therapy, and the provision of incarcerated person/patient drug information.

736.2 POLICY

It is the policy of this office that pharmaceutical operations meet all federal, state, and local legal requirements and be sufficient to meet the needs of the facility population (15 CCR 1216).

736.3 PHARMACEUTICAL OPERATIONS

(a) The Responsible Physician, in conjunction with the pharmacist, shall establish a list of all prescription and non-prescription medications available for incarcerated person use.

1. Drugs approved for use in the facility should promote safe, optimum, and cost-efficient drug therapy.
2. The list should be periodically updated.

(b) The Responsible Physician, in conjunction with the pharmacist, shall ensure appropriate medication storage, handling and inventory control.

(c) The Responsible Physician shall inspect the pharmaceutical operation quarterly and regularly review charts on medication utilization.

(d) The Responsible Physician shall be responsible for establishing and maintaining a system for storing and accounting for controlled substances. A count of syringes, needles, and controlled substances shall be taken and verified as correct and documented at the change of each shift by two qualified health care professionals. An incorrect count shall be reported immediately to the Shift Supervisor. Medications shall be stored under proper conditions of security, separation, and environmental control at all storage locations.

1. Medication shall be accessible only to legally authorized persons.
2. Medication and device cabinets (stationary or mobile) shall be closed and locked when not in use.
3. Controlled substances shall be stored and handled in accordance with DEA regulations.
4. Medication requiring refrigeration shall be stored separately either in a refrigerator that is locked or in a refrigerator that is in a locked room and is used exclusively for medication and medication adjuncts. The inside temperature of this refrigerator shall be maintained between 36 and 46 degrees. The inside temperature shall be monitored and recorded daily on a refrigerator temperature log.

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5. Antiseptics and other medications for external use shall be stored separately from internal and injectable medications.

(e) Medication shall be kept in pharmacist-packaged or the original manufacturer's labeled containers. Medication shall only be removed from these containers to prepare a dose for administration. Drugs dispensed to incarcerated persons who are off grounds or are being discharged from the facility shall be packaged in accordance with the provisions of federal packaging laws (15 USC § 1471 et seq.) and any other applicable state and federal law.

(f) Medication shall be properly labeled with the label firmly affixed to the prescription package. Each label shall indicate the name, address, and telephone number of the dispensing pharmacy, in addition to:

1. The medication name, strength, quantity, manufacturer, manufacturer's lot number or internal control number, and expiration date.

2. Directions for use, dispensing date, and drug order expiration date. Accessory or cautionary labels shall be applied as appropriate.

3. In cases where a multiple dose package is too small to accommodate the prescription label, the label may be placed on an outer container into which the multiple dose packages are placed.

(g) Medication that is outdated, visibly deteriorated, unlabeled, inadequately labeled, discontinued, or obsolete shall be stored in a separate secure storage area and disposed of in accordance with the following requirements:

1. Controlled substances shall be disposed of in accordance with the state and federal regulations (15 CCR 1216(b)(8)).

2. Unused, outdated, or discontinued doses or excess inventories of non-controlled drugs that have not been in the possession of the incarcerated person shall be returned to the pharmacy for disposition.

3. Returned, non-controlled substances that have been in the possession of the incarcerated person, unclaimed personal medication collected at intake, or individual doses of medication removed from the original pharmacy packaging shall be destroyed at the facility by health services staff and placed in the medical waste disposal system.

4. Pharmaceutical waste shall be separated from other types of medical waste for handling and disposal purposes, and will be discarded in designated containers distinctly identified for medical waste.

(h) All medication preparation, storage and administration areas shall be clean, organized, illuminated, ventilated, and maintained at an appropriate temperature range. Any mobile medication cart that is not being used in the administration of medication to incarcerated persons shall be stored in a locked room that meets similar requirements.

(i) Current drug reference information, such as a Physician's Desk Reference (PDR) or an approved website, shall be available to staff.

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(j) An annual report on the status of the pharmaceutical operation will be prepared by the pharmacist and provided to the Responsible Physician and the Captain.

736.4 PRESCRIBING MEDICATIONS

All medications shall be prescribed in a safe and effective manner for clinically appropriate reasons and documented in the individual patient medical record. Records shall be retained in accordance with established records retention schedules (15 CCR 1216; 15 CCR 1217).

(a) Any medication prescribed by a qualified health care professional shall specify the drug name, strength, dose, route, frequency, discontinuation date, and indication for use if the medication is intended to be used as needed. Medication shall not be prescribed for an indefinite period. The qualified health care professional shall review medication regimens at specified time intervals. An order to continue or discontinue any medication shall be documented in the medical record, which will supersede any earlier orders for that medication. A physician's signature should be required on all verbal orders within 72 hours of the order.

(b) Any medication prescription that is not complete or is questionable shall not be prepared until clarification is received from the qualified health care professional. Staff shall make an effort to obtain prescription clarification in a timely manner.

(c) Medication shall only be ordered upon approval of the Responsible Physician. Medication shall be prescribed and ordered from the facility list of approved medications unless the Responsible Physician approves otherwise.

(d) Some incarcerated persons may be permitted to possess and self-administer some medications when monitored and controlled, in accordance with this policy.

(e) Apparent adverse drug reactions shall be recorded in the incarcerated person's health record by the qualified health care professional.

(f) The qualified health care professional shall notify the Shift Supervisor of all known medication errors in a timely manner. Medication error reports shall be completed on all known medication errors.

736.5 PER DOSE MEDICATION ADMINISTRATION

Psychotropic medication, controlled substances, tuberculosis (TB) medication, seizure medication, and those listed as directly observed therapy (DOT) shall be administered to incarcerated persons on a per dose basis. Health-trained custody staff members may administer medication on the order of the Responsible Physician or a qualified health care professional (15 CCR 1216(b)).

(a) Each medication ordered on a per dose basis for individual incarcerated persons shall be kept in the medication room of the facility.

(b) Medication dispensing envelopes bearing the incarcerated person's name, booking number, housing location, and the medication and its dosing schedule shall be generated for each incarcerated person receiving per dose medication. These shall be administered from the individually packaged supply and delivered to the patient at each scheduled medication time.

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(c) The qualified health care professional or health-trained custody staff member will confirm the incarcerated person's identity prior to administering the medication by comparing the name/booking number on the dispensing envelope with the incarcerated person's identification badge/armband.

1. Incarcerated persons should have a fluid container and adequate fluid to take the medication being administered.
2. The qualified health care professional or health-trained custody staff member should observe the incarcerated person taking the medication to prevent "cheeking" or "palming."
3. The qualified health care professional or health-trained custody staff member should inspect the incarcerated person's mouth after the incarcerated person swallows the medication to ensure it was completely ingested. If the incarcerated person appears to be "cheeking" the medication, a chart entry will be made and a notation entered on the medication envelope, as well as the back of the Medication Administration Record (MAR). Custody staff shall be immediately notified of the suspected "cheeking" and shall follow-up with the appropriate security, corrective, and/or disciplinary action.

(d) The qualified health care professional or health-trained custody staff member shall record each medication administered by initialing the appropriate date and time. The qualified health care professional or health-trained custody staff member shall authenticate the initials by placing the staff member's initials, signature, or name stamp in the designated area on the lower portion of the MAR. Pre-charting is not allowed.

1. In the event that medication cannot be administered (for example, the incarcerated person is in court or the medication is not in stock), a note explaining the situation and planned action shall be made on the back of the MAR or on a progress note.

(e) The qualified health care professional or health-trained custody staff member shall have incarcerated persons who refuse their medication sign a refusal form at the medication round. If the incarcerated person willfully refuses to sign the refusal form, the qualified health care professional or health-trained custody staff member shall advise custody staff, who should attempt to resolve the situation through voluntary compliance, by reminding the incarcerated person that a refusal to sign may lead to disciplinary action. The qualified health care professional or health-trained custody staff member shall also:

1. Note the refusal on the medication log including the date and time.
2. Review the medication logs for prior refusals.
3. Document patterns of refused medications on the incarcerated person's medical record.
4. Make a reasonable effort to convince the incarcerated person to voluntarily continue with the medication as prescribed.
5. Report continued refusals to the Responsible Physician and have the incarcerated person complete and sign a medication refusal form.

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(f) No incarcerated person should be deprived of prescribed medication as a means of punishment.

736.6 SELF-ADMINISTRATION OF MEDICATION

Upon approval of the Responsible Physician or qualified health care professional, incarcerated persons may be allowed to self-administer prescribed medication other than psychotropic medication, seizure medication, controlled drugs, TB medication, any medication that is required to be DOT, or has the recognized potential for abuse (15 CCR 1216).

The qualified health care professional ordering medication should educate the incarcerated person regarding potential side effects and the proper use of the medication (15 CCR 1216(d)).

(a) Medication may be ordered through a pre-booking examination or medical clearance obtained at a hospital or other clinic, an emergency room visit, or evaluation by an on-site qualified health care professional.

(b) Any questions the incarcerated person may have concerning the person's medication should be addressed at this time.

(c) The incarcerated person shall be instructed to carry medication at all times or to secure it in designated areas within the housing unit.

(d) All self-administered medications are to be documented on the MAR.

(e) Upon receipt of the medication, the qualified health care professional or health-trained custody staff member should issue the medication as follows:

1. The qualified health care professional or health-trained custody staff member issuing the medication should confirm correct identity by comparing the name/ booking number of the self-administer package to the incarcerated person's identification badge/armband.

2. When issuing self-administered medication, documentation on the MAR should include the number of pills issued and the qualified health care professional's or health-trained custody staff member's initials.

(f) The continuous quality improvement coordinator should monitor incarcerated person compliance by randomly interviewing incarcerated persons about the name, purpose, dose, schedule, and possible side effects of their prescription medication and will inspect the incarcerated persons' self-administered medication and review their medical records. Any violation of the rules will be reported to the custody liaison.

(g) Any self-administered medication may be changed to per-dose at the discretion of the medical staff if the incarcerated person is not responsible enough to self-administer the medication or has a history of frequent rule violations. Documentation in the medical record should accompany any decision to change the medication to per-dose. Custody and health care staff should continuously monitor and communicate with each other regarding incarcerated persons complying with the conditions and rules for self-administered medication.

(h) Incarcerated persons who arrive at the facility with prescribed medication should be administered per dose for any new medications or refills until the new medication or refill is received from the pharmacy.

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736.7 NON-PRESCRIPTION MEDICATION

Any over-the-counter non-prescription medication available to incarcerated persons for purchase in the facility commissary shall be approved by the Captain and the Responsible Physician and reviewed annually (15 CCR 1216(c)).

The Captain and the Responsible Physician should establish a limit on the amount of non-prescription medication an incarcerated person may purchase and have in the person's possession at any time. Incarcerated persons with medication in an amount above the proscribed limit may be subject to disciplinary actions.

736.8 TRAINING

All health-trained custody staff members authorized to deliver, administer, and provide medication assistance shall be trained prior to engaging in any tasks related to delivery or administration of medication.

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Release Planning

737.1 PURPOSE AND SCOPE

This office recognizes that incarcerated persons may require information and assistance with health care follow-up upon release from custody. The purpose of this policy is to establish guidelines to assist staff with providing resources for the continuity of an incarcerated person's health care after their release from custody.

737.1.1 DEFINITION

Definitions related to this policy include:

Release planning - The process of providing sufficient resources for the continuity of health care to an incarcerated person before their release to the community.

737.2 POLICY

The qualified health care professional should work with correctional staff to ensure that incarcerated persons who have been in custody for 30 or more days and have pending release dates, as well as serious health, dental, or mental health needs, are provided with medication and health care resources sufficient for the incarcerated person to seek health care services once released.

The Captain or the authorized designee shall be responsible for ensuring that release preparation curriculum and materials are developed and maintained for this purpose, and that community resource information is kept current. Release planning should include:

(a) Resources for community-based organizations that provide health care services, housing, funding streams, employment, and vocational rehabilitation.

(b) Lists of community health professionals.

(c) Discussions with the incarcerated person that emphasize the importance of appropriate follow-up care.

(d) Specific appointments and medications that are arranged for the incarcerated person at the time of release.

737.3 PREPARATION FOR RELEASE

Upon notification of the imminent release of an incarcerated person who has been identified as having serious medical or mental health needs, release planning shall include the following:

(a) A medical screening shall be conducted to assess the incarcerated person's immediate medical needs, and arrangements should be made for community follow-up where needed, including sufficient medication.

(b) With the incarcerated person's written consent, the qualified health care professional should:

1. Share necessary information with health care services.
2. Arrange for follow-up appointments.

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3. Arrange for the transfer of health summaries and relevant parts of the health record to community health care services or others who are assisting in planning for or providing services upon the incarcerated person's release.

(c) Contact with community health care services shall be documented via an administrative note in the incarcerated person's health record.

(d) Incarcerated persons with serious mental health issues, including those receiving psychotropic medication, shall be informed about community options for continuing treatment and provided with follow-up appointments, when reasonably possible.

(e) Medication will be provided as appropriate.

737.4 RELEASE PLANNING RECORDS

All records of community referrals, transfer forms, logs, documentation of release planning, lists of medication provided, records release authorization forms, and any other relevant documents shall be maintained in the incarcerated person's health file and retained in accordance with established records retention schedules.

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Privacy of Care

738.1 PURPOSE AND SCOPE

This policy recognizes that incarcerated persons have a right to privacy and confidentiality regarding their health-related issues. It also recognizes incarcerated persons' right to health care services that are provided in such a manner as to ensure that privacy and confidentiality, and encourage incarcerated persons' use and trust of the facility's health care system.

738.1.1 DEFINITION

Definitions related to this policy include:

Clinical encounters - Interactions between incarcerated persons and health care professionals involving a treatment and/or an exchange of confidential health information.

738.2 POLICY

It is the policy of this office that, to instill confidence in the health care system by the incarcerated person population, all discussions of health-related issues and clinical encounters, absent an emergency situation, will be conducted in a setting that respects the incarcerated person's privacy and encourages the incarcerated person's continued use of health care services.

738.3 CLINICAL EVALUATIONS

Emergency evaluations and rendering of first aid should be conducted at the site of the emergency, if reasonably practicable, with transfer to the medical clinic or emergency room as soon as the incarcerated person is stabilized.

Incarcerated persons shall have a same-gender escort for encounters with an opposite-gender qualified health care professional or health-trained staff member, as appropriate.

Custody personnel should only be present to provide security if the incarcerated person poses a risk to the safety of the qualified health care professional or others.

738.4 REPORTING INAPPROPRIATE ACCESS OF MEDICAL INFORMATION

The Captain and Responsible Physician shall establish a process for staff, incarcerated persons, or any other persons to report the improper access or use of medical records.

738.5 TRAINING

All corrections personnel, interpreters, and qualified health care professionals who are assigned to a position that enables them to observe or hear qualified health care professional/incarcerated person encounters shall receive appropriate training on the importance of maintaining confidentiality when dealing with incarcerated person health care. The Training Manager shall be responsible for scheduling such training and for maintaining training records that show the employee attended, in accordance with established records retention schedules.

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Chapter 8 - Environmental Health

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Sanitation Inspections

800.1 PURPOSE AND SCOPE

The Tehama County Sheriff's Office has established a plan to promote and comply with the environmental safety and sanitation requirements established by applicable laws, ordinances and regulations. This policy establishes a plan of housekeeping tasks and inspections required to identify and correct unsanitary or unsafe conditions or work practices in this facility.

800.2 RESPONSIBILITIES

The Captain will ensure that the safety and sanitation plan addresses, at a minimum, the following (15 CCR 1280):

(a) Schedules of functions (e.g., daily, weekly, monthly or seasonal cleaning, maintenance, pest control, safety surveys)

(b) Self-inspection checklists to identify problems and to ensure cleanliness of the facility.

(c) Procedures, schedules, and responsibilities for coordinating annual inspections by the county health department, including how deficiencies on the inspection report are to be corrected in a timely manner.

(d) A list of approved equipment, cleaning compounds, chemicals, and related materials used in the facility, and instructions on how to operate, dilute, or apply the material in a safe manner.

(e) Record-keeping of self-inspection procedures, forms, and actions taken to correct deficiencies.

(f) Training requirements for custody staff and incarcerated workers on accident prevention and avoidance of hazards with regard to facility maintenance.

Consideration should be given to general job descriptions and/or limitations relating to personnel or incarcerated persons assigned to carrying out the plan. Specialized tasks, such as changing air filters and cleaning ducts or facility pest control, are more appropriately handled by the Office or by contract with private firms.

Incarcerated persons engaged in sanitation duties shall do so only under the direct supervision of qualified custody staff. When incarcerated work crews are used, additional controls should be implemented to account for all equipment and cleaning materials.

All staff shall report any unsanitary or unsafe conditions to a supervisor. Staff shall report repairs needed to the physical plant and to equipment by submitting a work order to a supervisor. Shift Supervisors will conduct cleaning inspections on a daily basis. The Captain or the authorized designee will conduct weekly safety and sanitation inspections of the facility.

800.3 WORK ORDERS

All reports of unsafe or unsanitary conditions, as well as repairs needed to the physical plant and equipment, shall be documented in a work order. The Jail Commander will designate a staff person to receive these work orders and take appropriate action to ensure the repairs are made or

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action is taken. All work and action taken will also be documented. Requests for budget resources above and beyond already budgeted maintenance items shall be reported to the Jail Commander.

800.4 SAFETY DATA SHEETS

Materials and substances used in the operation and maintenance of the facility may qualify as hazardous material. Hazardous material is required to have a companion Safety Data Sheet (SDS) that is provided by the manufacturer or distributor of the material. The SDS provides vital information on individual hazardous materials and substances, including instructions on safe handling, storage, disposal, prohibited interactions and other details relative to the specific material.

The Jail Commander shall be responsible for ensuring that a written hazard communication plan is developed, implemented and maintained at each workplace. Each area of the facility in which any hazardous material is stored or used shall maintain an SDS file in an identified location that includes (29 CFR 1910.1200(e)(1)):

(a) A list of all areas where hazardous materials are stored.

(b) A physical plant diagram and legend identifying the storage areas of the hazardous materials.

(c) A log for identification of new or revised SDS materials.

(d) A log for documentation of training by users of the hazardous materials.

800.4.1 SDS USE, SAFETY, AND TRAINING

All supervisors and users of SDS information must review the latest issuance from the manufacturers of the relevant substances. Staff and incarcerated persons shall have ready and continuous access to the SDS for the substance they are using while working. In addition, the following shall be completed (29 CFR 1910.1200(e)):

(a) Supervisors shall conduct training for all staff and incarcerated persons on using the SDS for the safe use, handling, and disposal of hazardous material in areas they supervise.

(b) Upon completion of the training, staff and incarcerated persons shall sign the acknowledgement form kept with each SDS in their work area.

(c) Staff and incarcerated persons using the SDS shall review the information as necessary to be aware of any updates and to remain familiar with the safe use, handling, and disposal of any hazardous material.

800.4.2 SDS DOCUMENTATION MAINTENANCE

Changes in SDS information occur often and without general notice. Any person accepting a delivery, addition or replacement of any hazardous material shall review the accompanying SDS. If additions or changes have occurred, the revised SDS shall be incorporated into the file and a notation shall be made in the SDS revision log.

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Supervisors shall review SDS information in their work areas semiannually to determine if the information is current and that appropriate training has been completed. Upon review, a copy of the SDS file and all logs shall be forwarded to the Maintenance Supervisor or the authorized designee.

800.4.3 SDS RECORDS MASTER INDEX

The Maintenance Supervisor or the authorized designee will compile a master index of all hazardous materials in the facility, including locations, along with a master file of SDS information. They will maintain this information in the safety office (or equivalent), with a copy to the local fire department. Documentation of the semiannual reviews will be maintained in the SDS master file. The master index should also include a comprehensive, current list of emergency phone numbers (e.g., fire department, poison control center) (29 CFR 1910.1200(g)(8)).

800.4.4 CLEANING PRODUCT RIGHT TO KNOW ACT

In addition to SDS information, printable information regarding ingredients of certain products used by staff and incarcerated persons shall be readily accessible and maintained in the same manner as an SDS (Labor Code § 6398.5; Health and Safety Code § 108952(f); Health and Safety Code § 108954.5(c)).

800.5 POLICY

It is the policy of the Office to maintain a safe and sanitary facility. To accomplish this goal, the Office will maintain a written plan that contains schedules and procedures for conducting weekly and monthly sanitation inspections of the facility.

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Hazardous Waste and Sewage Disposal

801.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a system for disposing of hazardous waste. The Office recognizes that the effectiveness of a disposal system depends not only on the written policies, procedures, and precautions, but on adequate supervision and the responsible behavior of the staff and incarcerated persons. It is the responsibility of everyone in the facility to follow hazardous waste disposal instructions, utilizing prescribed precautions and using safety equipment properly.

801.1.1 DEFINITION

Definitions related to this policy include:

Hazardous waste - Material that poses a threat or risk to public health or safety or is harmful to the environment (e.g., batteries, paints, solvents, engine oils and fluids, cleaning products).

801.2 RESPONSIBILITIES

The Captain or the authorized designee shall be responsible for:

(a) Contracting with a hazardous waste disposal service.

(b) Developing and implementing a storage and disposal plan that has been reviewed and approved by a regulatory agency.

(c) Including hazardous waste issues on internal health and sanitation inspection checklists.

(d) Including hazardous waste issues in the incarcerated person handbook and ensuring that incarcerated persons receive instruction on proper handling and disposal during incarcerated person orientation.

(e) Developing and implementing procedures for the safe handling and storage of hazardous materials until such time as the contractor removes the items from the facility.

(f) Ensuring the staff is trained in the proper identification of hazardous waste and the appropriate handling, storage, and disposal of such items.

801.3 SAFETY EQUIPMENT

The Captain and the county emergency manager shall ensure that appropriate safety equipment is available. All supervisors shall be knowledgeable in how to access the safety equipment at all times. The county may coordinate with local fire departments or contracted vendors to obtain the necessary safety equipment.

801.4 TRAINING

The Training Manager shall be responsible for ensuring that all facility personnel receive appropriate training in the use of appropriate safety equipment and the identification, handling and disposal of hazardous waste. Training records shall be maintained, including the course roster, curriculum, instructor name and credentials, and testing instruments.

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801.5 SUPERVISOR RESPONSIBILITY

Supervisors are responsible for monitoring any hazardous waste containment issue, ensuring that employees have the appropriate safety equipment, that any exposed persons receive immediate medical treatment, and that the appropriate measures are taken to lessen the exposure of others. Supervisors shall ensure that incident reports are completed and forwarded to the Captain in the event of an exposure to staff, incarcerated persons, or visitors.

801.6 POLICY

It is the policy of this office that any sewage and hazardous waste generated at the facility shall be handled, stored, and disposed of safely and in accordance with all applicable federal and state regulations and in consultation with the local public health entity.

801.7 SEWAGE DISPOSAL

All sewage and liquid waste matter must be disposed of into a public system of sewerage or, if public sewerage is not available, into a private system of sewage disposal in accordance with the requirements of the local public health entity.

The institution's use of the private system must be discontinued, and the private system must be properly abandoned when public sewerage becomes available.

801.8 HAZARDOUS WASTE

Hazardous waste generated in the facility shall be properly disposed of in designated containers and stored until removed by the contractor. At a minimum, staff shall use universal standard precautions when in contact with hazardous materials.

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Housekeeping and Maintenance

802.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines to ensure that the facility is kept clean and in good repair in accordance with accepted federal, state and county standards.

802.2 RESPONSIBILITIES

The Captain shall establish a plan for housekeeping and maintenance of the facility. The plan should include but is not limited to (15 CCR 1280):

(a) Schedules that determine the frequency of cleaning activities on a daily, weekly, or monthly timetable, by area of the facility.

(b) Supervision of the staff and incarcerated persons to ensure proper implementation of the procedures and to ensure that no incarcerated person supervises or assigns work to another incarcerated person.

(c) Development and implementation of an overall sanitation plan (e.g., cleaning, maintenance, inspection, staff training, incarcerated person supervision).

(d) Development of inspection forms.

(e) All incarcerated person responsibilities, which should be included in the incarcerated person handbook.

(f) A process to ensure that deficiencies identified during inspections are satisfactorily corrected and documented.

(g) Detailed processes for the procurement, storage, and inventory of cleaning supplies and equipment.

(h) A process for the preventive maintenance of equipment and systems throughout the facility.

(i) Staff supervision of the provision and use of cleaning tools and supplies.

To the extent possible, cleaning and janitorial supplies shall be nontoxic to humans. Any poisonous, caustic, or otherwise harmful substances used for cleaning shall be clearly labeled and kept in a locked storage area.

802.3 SANITATION SCHEDULE

A daily, weekly, and monthly cleaning schedule will be established by the housing unit supervisor. The facility staff should implement a site-specific plan for cleaning and maintenance of each area of the jail (e.g., housing, food preparation, laundry, loading dock/trash storage, barber shop, warehouse, common areas). The following recommendations include but are not limited to specific areas and items:

(a) Daily cleaning:

1. Sweep and then wet mop the entire jail floor
2. Clean all cell block areas

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3. Empty all trash receptacles
4. Clean all toilets and sinks
5. Clean all showers

(b) Weekly cleaning:

1. Dust bars and window ledges
2. Clean air conditioning/heating grates
3. Clean mattresses (mattresses are also to be cleaned prior to being issued to a new incarcerated person)
4. Pour water down floor drains to test for flow

(c) Monthly cleaning:

1. Walls
2. Ceilings
3. Bunk pans

802.4 TRAINING

All custodial staff and incarcerated workers assigned cleaning duties shall receive instruction commensurate with their tasks, including proper cleaning techniques, the safe use of cleaning chemicals, and areas of responsibility.

802.5 INSPECTION CHECKLIST

The Captain or the authorized designee should develop an inspection checklist that includes the cleaning and maintenance items that will be checked by supervisors on a daily, weekly and monthly basis throughout the facility.

The inspection checklist will closely correspond to the established cleaning and maintenance schedule.

Inspection checklists shall be forwarded to the Captain or the authorized designee for annual review, filing and retention as required by the established records retention schedule.

802.6 POLICY

It is the policy of this office to maintain a sanitation and preventive maintenance schedule to keep the facility clean and in good repair.

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Physical Plant Compliance with Codes

803.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the timeline, process and responsibilities for facility maintenance, inspections and equipment testing in compliance with all applicable federal, state and local building codes.

803.2 POLICY

It is the policy of this office that all construction of the physical plant (renovations, additions, new construction) will be reviewed and inspected in compliance with all applicable federal, state and local building codes. All equipment and mechanical systems will be routinely inspected, tested and maintained in accordance with applicable laws and regulations.

803.3 COMPLIANCE WITH CODES AND STATUTES

Plumbing, sewage disposal, solid waste disposal and plant maintenance conditions will comply with rules and regulations imposed by state regulatory entities governing such practices.

803.4 RESPONSIBILITIES

The Captain shall be responsible for establishing and monitoring the facility maintenance schedule, the inspection schedules of the Shift Supervisors and correctional officers, and ensuring that any deficiencies discovered are corrected in a timely manner.

Copies of the local jurisdiction’s applicable health and sanitation codes shall be kept in the facility by the Captain or the authorized designee. The Captain or the authorized designee is responsible for developing internal health and sanitation inspection checklists, for maintaining valid licensing and sanitation certificates and inspection reports, and for proof of corrective actions.

803.5 PROCEDURE

All safety equipment (e.g., emergency lighting, generators, and an uninterruptible power source (UPS)) shall be tested at least quarterly. Power generators and UPS equipment should be inspected weekly and load-tested quarterly or according to the manufacturer's instructions. All completed inspection forms shall be kept on file for review by the appropriate office committees or external agencies.

Any remodeling or new construction shall have prior approval of the local fire, building, and health authorities. Any required plans and permits will be procured prior to the commencement of any changes to the facility.

The following areas of the facility shall be inspected and evaluated for functionality, wear, and rodent or pest infestation. The list is not meant to be all-inclusive:

- Admissions
- Food services
- Incarcerated person housing

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- Laundry
- Barbershop
- Loading dock/trash storage
- Warehouse
- Water systems and plumbing
- Emergency generators
- Fire safety equipment
- The entire physical structure of the facility, including roof, walls, exterior doors, mechanical systems, and lighting

803.6 PLUMBING - FLOOR DRAINS

Floor drains must be flushed weekly and all traps must contain water to prevent the escape of sewer gas. Grids and grates must be present.

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Water Supply

804.1 PURPOSE AND SCOPE

The Tehama County Sheriff's Office recognizes the importance of providing the facility with safe, potable water. The purpose of this policy is to establish guidelines for testing the facility's water to ensure that the water is safe to consume.

804.2 POLICY

In compliance with standards set by law, this facility will ensure the continued supply of safe potable water for use by incarcerated persons, staff, and visitors through rigorous annual testing of water supplies (42 USC § 300f et seq.).

804.3 PROCEDURE

The Captain shall ensure that the facility's potable water source is tested by an independent public or private testing service at least once each year. Water quality will be certified to be in compliance with all state and local regulations. Corrective measures shall be promptly taken if the test results fall below acceptable regulatory standards.

In the event that water testing reveals any significant hazards to the incarcerated persons or staff at the facility, the Sheriff, Captain, and the Office health authority shall take immediate action to mitigate the problem.

The testing results, valid certificates of the sampling entity, and the testing laboratory shall be kept in accordance with established records retention schedules.

Where the facility's water supply is obtained from a private source, the source shall be properly located, constructed, and operated to protect it from contamination and pollution, and the water shall meet all current standards set by the applicable state and/or local authority regarding bacteriological, chemical, and physical tests for purity.

For facilities not served by a public or regulated private water supply, the water should be tested daily by the local authority within the facility's jurisdiction.

804.4 EMERGENCY PLAN

The Jail Commander and the Office health authority shall develop a plan for the supply of potable water for drinking and cooking in the event that a man-made or natural disaster interrupts the regular water supply. The plan shall address methods for providing clean potable water for a minimum of three days, and should have contingency plans for emergencies lasting longer than three days. The plan should also include contingencies for the use of non-potable water to flush toilets and remove effluent from the facility.

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Vermin and Pest Control

805.1 PURPOSE AND SCOPE

The purpose of this policy is to establish inspection, identification and eradication processes designed to keep vermin and pests controlled in accordance with the requirements established by all applicable laws, ordinances and regulations of the local public health entity.

805.2 POLICY

It is the policy of this office that vermin and pests be controlled within the facility. The Captain or the authorized designee shall be responsible for developing and implementing this policy, in cooperation with the Responsible Physician and the local public health entity, for the sanitation and control of vermin and pests, and to establish medical protocols for treating incarcerated person clothing, personal effects, and living areas, with specific guidelines for treating an infested incarcerated person (15 CCR 1212; 15 CCR 1264).

805.3 PEST CONTROL SERVICES

The Jail Commander or the authorized designee shall be responsible for procuring the services of a licensed pest control professional to perform inspections of the facility at least monthly and to treat areas as required to ensure that vermin and pests are controlled.

805.4 PREVENTION AND CONTROL

Many infestations and infections are the result of a recently admitted incarcerated person who is vermin-infested or whose property is vermin-infested. Most infestations are spread by direct contact with an infected person or with infested clothing and bedding. Incarcerated persons with lice or mites should be treated with approved pediculicides as soon as the infestation is identified to avoid spreading it. To reduce the chance of further transmission, separate quarters for incarcerated persons undergoing treatment for lice should be used as described in the Communicable Diseases Policy.

Because the use of the treatment chemicals can cause allergic reactions and other negative effects, treatment should be done only when an infestation is identified and not as a matter of routine.

Clothing, bedding, and other property that is suspected of being infested shall either be removed from the facility or cleaned and treated by the following methods, as appropriate or as directed by the pest control provider or the Responsible Physician (15 CCR 1264):

- Washing in water at 140 degrees for 20 minutes
- Tumbling in a clothes dryer at 140 degrees for 20 minutes
- Dry cleaning
- Storing in sealed plastic bags for 30 days
- Treating with an insecticide specifically labeled for this purpose

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Head lice and their eggs are generally found on the head hairs. There may be some uncertainty about the effectiveness of some available pediculicides to kill the eggs of head lice. Therefore, some products recommend a second treatment seven to 10 days after the first. During the interim, before the second application, eggs of head lice could hatch and there is a possibility that lice could be transmitted to others.

Pubic lice and their eggs are generally found on the hairs of the pubic area and adjacent hairy parts of the body, although they can occur on almost any hairy part of the body, including the hair under the arm and on the eyelashes.

Pubic lice and their eggs are generally successfully treated by the available pediculicides. However, when the eyelashes are infested with pubic lice and their eggs, a physician should perform the treatment.

Successful treatment depends on careful inspection of the incarcerated person and proper application of the appropriate product. The area used to delouse incarcerated persons needs to be separate from the rest of the facility. All of the surfaces in the treatment area must be sanitized. There must be a shower as part of the delousing area.

The supervisor shall document the date of treatment, the area treated, the pest treated, and the treatment used.

805.5 LABELING AND SECURE STORAGE OF COMPOUNDS

Containers of pest exterminating compounds shall be conspicuously labeled for identification of contents. The containers shall be securely stored separately from food and kitchenware, and shall not be accessible by incarcerated persons.

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Inmate Safety

806.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a safety program to reduce incarcerated person injuries by analyzing causes of injuries and identifying and implementing corrective measures.

806.2 RESPONSIBILITIES

The Sheriff shall appoint a staff member who will be responsible for the development, implementation, and oversight of the safety program. This program will include but not be limited to (15 CCR 1280):

- A system to identify and evaluate hazards, including scheduled inspections to identify unsafe conditions.
- Analysis of incarcerated person injury reports to identify causes and recommend corrective actions.
- Establishment of methods and procedures to correct unsafe and/or unhealthful conditions and work practices in a timely manner.

806.3 INVESTIGATION OF REPORTED INCARCERATED PERSON INJURY

Whenever there is a report of an injury to an incarcerated person that is the result of accidental or intentional acts, other than an authorized use of force by custody staff, the Sheriff or the authorized designee will initiate an investigation to determine the cause of the injury and develop a plan of action whenever a deficiency is identified. Injuries resulting from use of force incidents will be investigated and reported in accordance with the Use of Force Policy.

806.4 INVESTIGATION REPORTS

The Shift Supervisor shall ensure that reports relating to an incarcerated person's injury are completed and should include the following:

- Incident reports
- Investigative reports
- Health record entries
- Any other relevant documents

806.5 ANNUAL REVIEWS

The Sheriff or the authorized designee shall conduct an annual review of all injuries involving incarcerated persons for the purpose of identifying problem areas and documenting a plan of action to abate circumstances relating to incarcerated person injuries.

The plan of action should include but not be limited to:

- The area where the deficiencies have been identified.
- Strategies to abate the deficiency.

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- Resources needed to correct a deficiency.
- The person or persons responsible for taking corrective action and the target completion date.

The Sheriff shall consult with the Office risk manager to coordinate corrective action or to seek managerial/administrative guidance for implementing corrective action.

806.6 POLICY

It is the policy of the Tehama County Sheriff's Office to provide a safe environment for individuals confined at this facility, in accordance with all applicable laws, by establishing an effective safety program, investigating incarcerated person injuries, and taking corrective actions as necessary to reduce accidents and injury.

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Incarcerated Person Hygiene

807.1 PURPOSE AND SCOPE

This policy outlines the procedures that will be taken to ensure the personal hygiene of every incarcerated person in the Tehama County Sheriff's Office jail is maintained. The Tehama County Sheriff's Office recognizes the importance of each incarcerated person maintaining acceptable personal hygiene practices by providing adequate bathing facilities and hair care services, and the issuance and exchange of clothing, bedding, linens, towels, and other necessary personal hygiene items.

807.2 POLICY

It is the policy of the Tehama County Sheriff's Office facility to maintain a high standard of hygiene in compliance with the requirements established by all state laws, ordinances, and regulations (15 CCR 1069). Compliance with laws and regulations relating to good incarcerated person hygiene practice is closely linked with good sanitation practices. Therefore, the need to maintain a high level of hygiene is not only for the protection of all incarcerated persons, but for the safety of the correctional staff, volunteers, contractors, and visitors.

807.3 STORAGE SPACE

There should be adequate and appropriate storage space for incarcerated person bedding, linen, or clean clothing. The inventory of clothing, bedding, linen, and towels should exceed the maximum incarcerated person population so that a reserve is always available (15 CCR 1263).

The facility should have clothing, bedding, personal hygiene items, cleaning supplies, and any other items required for the daily operation of the facility, including the exchange or disposal of soiled or depleted items. The assigned staff shall ensure that the storage areas are properly maintained and stocked. The Captain should be notified if additional storage space is needed.

807.3.1 BEDDING ISSUE

Upon entering a living area of the Tehama County Sheriff's Office jail, every incarcerated person who is expected to remain overnight shall be issued bedding and linens including but not limited to (15 CCR 1270):

(a) Sufficient freshly laundered blankets to provide comfort under existing temperature conditions. Blankets shall be exchanged and laundered in accordance with facility operational laundry rules.

(b) One clean, firm, nontoxic, fire-retardant mattress (16 CFR 1633.1 et seq.).

1. Mattresses will be serviceable and enclosed in an easily cleanable, nonabsorbent material and conform to the size of the bunk. Mattresses will be cleaned and disinfected when an incarcerated person is released or upon reissue.

2. Mattresses shall meet the most recent requirements of the State Fire Marshal, the Bureau of Home Furnishings' test standard for penal mattresses, and any other legal standards at the time of purchase (15 CCR 1272).

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3. Mattresses shall be free of holes and tears. Mattresses with holes, tears, or that lack sufficient padding shall be replaced upon request with mattresses that meet the requirements of 15 CCR 1270 (15 CCR 1271).

(c) Two sheets or one sheet and a clean mattress cover.

1. Two blankets or a sleep bag may be issued in place of one mattress cover or one sheet at the request of the incarcerated person.

(d) One clean washcloth, hand towel, and bath towel.

(e) One pillow and pillowcase.

Linen exchange, including towels, shall occur at least weekly and shall be documented in the daily activity log (15 CCR 1271). The Shift Supervisor shall review the daily activity log at least once per shift.

The Captain or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that bedding issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

807.3.2 CLOTHING ISSUE

An incarcerated person admitted to the facility for 72 hours or more and assigned to a living unit shall be issued a set of facility clothing. The issue of clothing appropriate to the climate for incarcerated persons shall include but is not limited to: (15 CCR 1260):

- Clean socks.
- Clean outer garments.
- Clean undergarments (e.g., shorts, undershirt, bra and two pairs of panties).
- Footwear.

Incarcerated persons who are issued a change of clothing upon admission to the facility may have their personal clothing returned after laundering, at the discretion of the Captain.

All issued and exchanged clothing shall be clean and free of holes or tears, reasonably fitted, durable, and easily laundered and repaired. Undergarments shall be clean, free of holes or tears, and substantially free of stains. Individuals shall be able to select the garment type more compatible with their gender identity and gender expression (15 CCR 1260).

Clothing shall be exchanged twice each week, at a minimum (15 CCR 1262). All exchanges shall be documented on the daily activity log. The Shift Supervisor or unit supervisor shall review the daily activity log at least once per shift.

Additional clothing may be issued as necessary for changing weather conditions or as seasonally appropriate. An incarcerated person's personal undergarments and footwear may be substituted for the institutional undergarments and footwear, provided there is a legitimate medical necessity for the items and they are approved by the medical staff.

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Each incarcerated person assigned to a special work area, such as food services, medical, farm, sanitation, mechanical, and other specified work, shall be clothed in accordance with the requirements of the job, including any appropriate protective clothing and equipment, which shall be exchanged as frequently as the work assignment requires. All issued clothing shall be clean, free of holes and tears (15 CCR 1261).

The Captain or the authorized designee shall conduct both scheduled and unannounced inspections of the facility to ensure that clothing issuance policies and procedures are carried out in accordance with the applicable laws and regulations.

The Captain or the authorized designee shall ensure that the facility maintains a sufficient inventory of extra clothing to ensure each incarcerated person shall have neat and clean clothing appropriate to the season.

An incarcerated person's excess personal clothing shall be mailed, picked up by, or transported to a designated family member or stored in containers designed for such purpose. All incarcerated person personal property shall be properly identified, inventoried, and secured. Incarcerated persons shall sign and receive a copy of the inventory record.

807.4 LAUNDRY SERVICES

Laundry services shall be managed so that daily clothing, linen and bedding needs are met.

807.5 INCARCERATED PERSON ACCOUNTABILITY

To ensure incarcerated person accountability, incarcerated persons are required to exchange item for item when clean clothing, bedding, and linen exchange occurs.

Prior to being placed in a housing unit, incarcerated persons shall be provided with an incarcerated person handbook listing this requirement.

807.6 PERSONAL HYGIENE OF INCARCERATED PERSONS

Personal hygiene items, hair care services, and facilities for showers will be provided in accordance with applicable laws and regulations. This is to maintain a standard of hygiene among incarcerated persons in compliance with the requirements established by state laws as part of a healthy living environment.

Each incarcerated person held more than 24 hours who does not have the following personal care items because of either indigency or the absence of an incarcerated person canteen shall be issued the following items (15 CCR 1265):

- Toothbrush
- Dentifrice
- Soap
- Comb
- Shaving implements

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- Sanitary pads, panty liners, and tampons at no cost and no maximum allowance (Penal Code § 4023.5)

The Captain or the authorized designee may modify this list to accommodate the use of liquid soap and shampoo dispensers. Personal hygiene items should be appropriate for the incarcerated person's gender. Additional hygiene items shall be provided to incarcerated persons upon request, as needed.

Personal care items shall be issued within the first 12 hours of a housing assignment. Incarcerated persons shall not be required to share personal care items or disposable razors (15 CCR 1265). Used razors are to be disposed into approved sharps containers. Other barbering equipment capable of breaking the skin must be disinfected between individual uses, as prescribed by the California Board of Barbering and Cosmetology to meet the requirements of 16 CCR 979 and 16 CCR 980 (15 CCR 1267(c)).

Incarcerated persons, except those who may not shave for reasons of identification in court, shall be allowed to shave daily (15 CCR 1267(b)). The Captain or the authorized designee may suspend this requirement for any incarcerated person who is considered a danger to others.

807.7 AVAILABILITY OF PLUMBING FIXTURES

Incarcerated persons confined to cells or sleeping areas shall have access to toilets and washbasins with hot and cold running water that is temperature controlled. Access shall be available at all hours of the day and night without staff assistance.

The minimum number of plumbing fixtures provided for incarcerated persons in housing units is:

- One sink/washbasin for every 10 incarcerated persons (24 CCR 1231.3.2(2)).
- One toilet to every 10 incarcerated persons (urinals may be substituted for up to one-third of the toilets in facilities for male incarcerated persons) (24 CCR 1231.3.1).

807.8 INCARCERATED PERSON SHOWERS

Incarcerated persons will be allowed to shower upon assignment to a housing unit and at least every other day thereafter, or more often if possible. Absent exigent circumstances, no person shall be prohibited from showering at least every other day following assignment to a housing unit. If showering is prohibited, it shall be approved by the Captain or the authorized designee, and the reasons for prohibition shall be documented (15 CCR 1266).

There should be one shower for every 20 incarcerated persons unless federal, state, or local building or health codes differ. Showering facilities for incarcerated persons housed at this facility shall be clean and properly maintained. Water temperature shall be periodically measured to ensure a range of 100 to 120 degrees for the safety of incarcerated persons and staff, and shall be recorded and maintained (24 CCR 1231.3.4).

Transgender and intersex incarcerated persons shall be given the opportunity to shower separately from other incarcerated persons (28 CFR 115.42).

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807.9 DELOUSING MATERIALS

Delousing materials and procedures shall be approved through consultation with the Responsible Physician or qualified health care professionals.

807.10 RESPONSIBILITIES

The Captain shall ensure the basic necessities related to personal care are provided to each incarcerated person upon entry into the general population. Appropriate additional personal care items may be available for purchase from the incarcerated person commissary.

807.11 ADDITIONAL PRIVACY REQUIREMENTS

Incarcerated persons shall be permitted to shower, perform bodily functions, and change clothing without non-medical staff of the opposite sex viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite sex shall announce their presence when entering an incarcerated person housing unit (28 CFR 115.15).

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Chapter 9 - Food Services

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Food Services

900.1 PURPOSE AND SCOPE

The Office recognizes the importance of providing nutritious food and services to inmates to promote good health, to reduce tension in the jail and ultimately support the safety and security of the jail. This policy provides guidelines on the preparation of food services items and dietary considerations for inmates housed in the facility.

900.2 POLICY

It is the policy of this office that food services shall provide inmates with a nutritionally balanced diet in accordance with federal, state and local laws, and with regulations for daily nutritional requirements (15 CCR 1241 et seq.).

The food services operation shall be sanitary and shall meet the acceptable standards of food procurement, planning, preparation, service, storage and sanitation in compliance with Food and Drug Administration (FDA) and United States Department of Agriculture (USDA) requirements and standards set forth in Health and Safety Code § 113700 et seq. (15 CCR 1245(a)).

900.3 FOOD SERVICES MANAGER

The food services manager shall be responsible for oversight of the day-to-day management and operation of the food services area, including:

- Developing, implementing and managing a budget for food services.
- Ensuring sufficient staff is assigned and scheduled to efficiently and safely carry out all functions of food services operations.
- Establishing, developing and coordinating appropriate training for staff and inmate workers.
- Developing a menu plan that meets all nutrition and portion requirements and can be produced within the available budget.
- Other duties and activities as determined by the Jail Commander.

900.4 MENU PLANNING

All menus shall be planned, dated and available for review at least one month in advance of their use (15 CCR 1242). Records of menus and of foods purchased shall be kept on file for one month. Menus shall provide a variety of foods and should consider food flavor, texture, temperature, appearance and palatability. Menus shall be approved by a registered dietitian or nutritionist before being served to ensure the recommended dietary allowance for basic nutrition meets the needs of the appropriate age group.

Any changes to the meal schedule, menu or practices should be carefully evaluated by the food services manager in consultation with the Jail Commander, dietician, medical staff and other professionals, and shall be recorded. All substitutions will be of equal or better nutritional value. If

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any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production sheet.

Menus as planned, including changes, shall be evaluated by a registered dietitian at least annually (15 CCR 1242). Facility menus shall be evaluated at least quarterly by the food services supervisory staff to ensure adherence to established daily servings.

Copies of menus, foods purchased, annual reviews and quarterly evaluations should be maintained by the food services manager in accordance with established records retention schedules.

900.5 FOOD SAFETY

Temperatures in all food storage areas should be checked and recorded at the beginning of each shift, but shall be checked and recorded at least once daily. Holding temperatures for cold and hot foods shall be checked and recorded every two hours. Hot food shall be reheated to 165 degrees if it falls below 135 degrees at any time.

All reach-in or walk-in refrigerators and cold storage must maintain food temperature below 41 degrees. All freezers, other than during the defrosting cycle, must maintain a temperature of 0 degrees or lower.

One sample for each meal served shall be dated and maintained under refrigeration for testing in the event of a food-borne illness outbreak. Sample meals shall be discarded at the end of three days if no food-borne illness is reported.

Food production shall be stopped immediately if there is any sewage backup in the preparation area or if there is no warm water available for washing hands. Food production shall not resume until these conditions have been corrected (15 CCR 1245(a)).

900.6 THERAPEUTIC DIETS

The food services manager shall be responsible for ensuring that all inmates who have been prescribed therapeutic diets by qualified health care professionals are provided with compliant meals. A therapeutic diet manual, which includes samples of medical diets, shall be maintained in the health services and food services areas for reference and information.

More complete information may be found in the Prescribed Therapeutic Diets Policy.

Women who are known to be pregnant or lactating shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

900.7 RELIGIOUS DIETS

The Food Services Manager, to the extent reasonably practicable, will provide special diets for inmates in compliance with the parameters of the Religious Programs Policy and the Religious Land Use and Institutionalized Persons Act (RLUIPA).

When religious diets are provided, they shall conform to the nutritional and caloric requirements for non-religious diets (15 CCR 1241).

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900.8 FOOD SERVICES REQUIREMENTS

All reasonable efforts shall be made to protect inmates from food-borne illness. Food services staff shall adhere to sanitation and food storage practices and there shall be proper medical screening and clearance of all food handlers in accordance with the Food Services Workers' Health, Safety and Supervision Policy (15 CCR 1230).

Food production and services will be under staff supervision. Food production, storage and food handling practices will follow the appropriate federal, state or local sanitation laws (15 CCR 1246).

900.9 MEAL SERVICE PROCEDURE

Inmate meals that are served in a dining room or day room should be provided in space that allows groups of inmates to dine together, with a minimum of 15 square feet of space per inmate. A dining area shall not contain toilets or showers in the same room without appropriate visual barriers.

Meals shall be served at least three times during each 24-hour period. At least one meal must include hot food. Any deviation from this requirement shall be subject to the review and approval of a registered dietitian to ensure that inmates receive meals that meet nutritional guidelines.

Inmates must be provided a minimum of 15 minutes dining time for each meal. There must be no more than 14 hours between a substantial evening meal and breakfast. A substantial evening meal is classified as a serving of three or more menu items at one time to include a high quality protein, such as meat, fish, eggs or cheese. The meal shall represent no less than 20 percent of the day's total nutrition requirements. If more than 14 hours pass between meals, approved snacks will be provided. If a nourishing snack is provided at bedtime, up to 16 hours may elapse between the substantial evening meal and breakfast. A nourishing snack is classified as a combination of two or more food items from two of the four food groups, such as cheese and crackers or fresh fruit and cottage cheese.

Inmates who miss, or may miss, a regularly scheduled meal must be provided with a beverage and a sandwich or substitute meal. Approved snacks should be served to inmates on medical diets in less than the 14-hour period if prescribed by the Responsible Physician or registered dietitian. Inmates on medical or therapeutic meals who miss their regularly scheduled meal will be provided with their prescribed meal (15 CCR 1240).

As the meal time approaches, facility staff should direct the inmates to get dressed and be ready for meals. Inmates should be assembled and a head count taken, to verify all inmates in the housing location are present. Staff should be alert to signs of injury or indications of altercations, and should investigate any such signs accordingly. Staff should remain alert to the potential for altercation during inmate movement and meals. Meals shall be served under the direct supervision of staff.

Staff should direct an orderly filing of inmates to the dining room or assigned seating in the day room. Staff should identify inmates who have prescribed therapeutic or authorized religious diets so those inmates receive their meals accordingly.

It shall be the responsibility of the correctional officers to maintain order and enforce rules prohibiting excessive noise and intimidation of other inmates to relinquish food during mealtime.

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The dining room shall have an area designated for inmates who have been prescribed a longer time to eat by qualified health care professionals, a dietitian or as deemed appropriate by a supervisor.

To the extent reasonably practical, an adequate number of food services staff and correctional personnel should supervise meal service in central dining areas. If reasonably possible, the supervisor should be present.

The Shift Supervisor should make every attempt to be present during meal services in central dining areas to assess the meal service process, the quality of food and any health or security issues.

In the interest of security, sanitation and vermin control, inmates shall not be allowed to take food from the dining area to their housing areas.

900.10 EMERGENCY MEAL SERVICE PLAN

The food services manager shall establish and maintain an emergency meal service plan for the facility (15 CCR 1243(k)).

Such a plan should ensure that there is at least a seven-day supply of food maintained in storage for inmates. In the event of an emergency that precludes the preparation of at least one hot meal per day, the Jail Commander may declare an "Emergency Suspension of Standards" pursuant to 15 CCR 1012 for the period of time the emergency exists.

During an emergency suspension, the food services manager shall assign a registered dietician to ensure that minimum nutritional and caloric requirements are met (15 CCR 1242). The Jail Commander shall notify the Board of State and Community Corrections (BSCC) in writing in the event the suspension lasts longer than three days. The emergency suspension of food service standards shall not continue more than 15 days without the approval of the chairperson of the BSCC (15 CCR 1012).

In the event that the inmate food supply drops below that which is needed to provide meals for two days, the Jail Commander or the authorized designee shall purchase food from wholesale or retail outlets to maintain at least a four-day supply during the emergency.

Depending on the severity and length of the emergency, the Sheriff should consider requesting assistance from allied agencies through mutual aid or the National Guard.

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Food Services Training

901.1 PURPOSE AND SCOPE

The purpose of this policy is to reduce the risk of potential injury to staff, contractors, and incarcerated workers in the food services areas by developing and implementing a comprehensive training program in the use of equipment and safety procedures.

901.2 POLICY

The Tehama County Sheriff's Office ensures a safe and sanitary environment is maintained for the storage and preparation of meals through the appropriate training of food services staff and incarcerated workers (15 CCR 1230; 15 CCR 1243(g); 15 CCR 1245(a)).

901.3 TRAINING

The food services manager, under the direction of the Captain, is responsible for ensuring that a training curriculum is developed and implemented in the use of equipment and safety procedures for all food services personnel, including staff, contractors, and incarcerated workers.

The training shall include, at minimum:

(a) Work safety practices and use of safety equipment.

(b) Sanitation in the facility's food services areas.

(c) Reducing risks associated with operating machinery.

(d) Proper use of chemicals in food services areas.

(e) Employing safe practices.

(f) Facility emergency procedures.

A statement describing the duties and proper time schedule should be developed for each job function in the facility's kitchen and food services operation. The food services manager, at the direction of the Captain, shall establish an employee/kitchen worker training course, and all staff or incarcerated workers shall be trained on how to assemble, operate, clean, and sanitize kitchen equipment.

Information about the operation, cleaning, and care of equipment, including manufacturer's literature, that is suitable for use as reference material shall be kept in the food services operation area. The reference material should be used in developing training on the use of the equipment and the maintenance and cleaning procedures.

Safety and sanitation shall be the primary consideration in equipment purchase and replacement. Placement and installation of equipment must be carefully planned to facilitate cleaning, sanitizing, service, and repairs. The equipment must also meet any applicable government codes.

901.4 TESTING

A test should be developed to determine and document that the food services worker understands the proper procedures demonstrated during training. Food services workers are required to pass

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the test in order to work in the food services area. Upon achievement of a passing score, the food services worker shall acknowledge receipt of the training in writing. The signed document shall be forwarded to the Training Manager and retained in the worker's training file. Contracted service providers should be required to provide documentation and certification of their employees. Only trained personnel are authorized to use food services equipment.

901.5 BRIEFING TRAINING

The food services manager should consider daily briefing training as a method of staff development. Regular and repetitive trainings of short duration (8 to 10 minutes) at the beginning of each shift are an effective and cost efficient way to maintain the competency of staff. A lesson plan and record of attendance should be incorporated into the briefing training. Records of all training, including training for contract workers, should be forwarded to the Training Manager and maintained in the worker’s training files in accordance with established records retention schedules.

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Dietary Guidelines

902.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that the nutritional needs of the incarcerated person are met and that overall health is promoted through the use of balanced nutritious diets.

902.2 POLICY

It is the policy of this office that diets provided by this facility will meet or exceed the guidelines established in the current publications of the Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the California Food Guide (CFG) and the U.S. Department of Agriculture’s Dietary Guidelines for Americans (DGA).

902.3 REVIEW OF DIETARY ALLOWANCES

The food services manager is responsible for developing the facility's menus and shall ensure that all menus served by food services comply with the nutritional and caloric requirements found in the 2019 DRI, and the 2020-2025 DGA guidelines (15 CCR 1241). Any deviation from these guidelines shall be reviewed by the Sheriff and/or the Captain and the Responsible Physician.

The food services manager or the authorized designee shall ensure that the facility's menus and dietary allowances are evaluated annually by a registered dietitian, and that any changes meet the DRI and DGA guidelines. A registered dietitian must approve menus before they are used (15 CCR 1242).

Menus should be evaluated at least quarterly by the food services manager or the authorized designee.

902.4 MENU CYCLE PLANNING

The food services manager or the authorized designee should plan the menus one month in advance of their use.

Any changes to the menu must be recorded and kept until the next annual inspection (15 CCR 1242). Any menu substitutions must use better or similar items.

Menus should include the following minimum food group allowances per day (15 CCR 1241):

(a) Dairy Group: Three servings of pasteurized fat-free or low-fat milk fortified with Vitamins A and D or food providing at least 250 mg. of calcium and equivalent to 8 ounces of fluid milk. One serving can be from a fortified food containing at least 150 mg. of calcium. Persons who are known to be pregnant or lactating should receive four servings of milk or milk products.

(b) Vegetable-Fruit Group: Five servings of fruits and vegetables. At least one daily serving, or seven servings per week, shall be from each of the following three categories:

1. One serving of a fresh fruit or vegetable.

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2. One serving of a Vitamin A source, fruit or vegetable, containing at least 200 micrograms retinol equivalents or more.

3. One serving of a Vitamin C source containing at least 30 mg. or more.

(c) Grain Group: A minimum of six servings of grains, three of which must be made with whole grains.

(d) Protein Group: Three servings of lean meat, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter, or textured vegetable protein, equivalent to 14 grams or more of protein. The daily requirements shall be equal to three servings for a total of 42 grams per day or 294 per week. In addition, a fourth serving from the legumes category shall be served three days a week.

(e) A daily or weekly average of the food group's requirement is acceptable.

(f) Saturated dietary fat should not exceed 10 percent of the total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable. Facility diets shall consider the recommendations and intentions of the 2015-2020 DGA of reducing overall sugar and sodium levels.

Additional servings of dairy, vegetable-fruit, and grain groups must be provided in amounts to meet caloric requirements when the minimum servings outlined in the requirements above are not sufficient to meet the caloric requirements of an incarcerated person.

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Food Services Workers' Health, Safety, and Supervision

903.1 PURPOSE AND SCOPE

The purpose of this policy is to establish basic personal health, hygiene, sanitation, and safety requirements to be followed by all food services workers and to ensure the proper supervision of food services staff and incarcerated workers.

903.2 POLICY

The Tehama County Sheriff's Office will ensure that meals are nutritionally balanced, safe, and prepared and served in accordance with applicable health and safety laws. All incarcerated person food services workers will be properly supervised by custody staff to ensure safety and security at all times (15 CCR 1243(h)).

903.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for developing and implementing procedures to ensure that all meals are prepared, delivered, and served only under direct supervision by staff.

Work assignments shall be developed to ensure that sufficient food services staff is available to supervise incarcerated person food services workers. The food services manager should coordinate with the corrections supervisor to ensure that sufficient correctional staff is available to supervise incarcerated person meal service.

The food preparation area must remain clean and sanitary at all times. The food services manager or the authorized designee shall post daily, weekly, and monthly cleaning schedules for the equipment and food preparation area.

903.4 MEDICAL SCREENING

The food services manager shall work cooperatively with the Responsible Physician to develop procedures to minimize the potential for spreading contagious disease and food-borne illness. In an effort to prevent the spread of illness, the following shall be strictly observed (15 CCR 1230):

(a) All food services workers shall have a pre-employment/pre-assignment medical examination, in accordance with local requirements, to ensure freedom from diarrhea, skin infections, and other illnesses transmissible by food or utensils.

(b) Periodic reexaminations of food services workers shall be given to ensure freedom from any disease transmissible by food or utensils.

(c) Food services workers shall have education and ongoing monitoring in accordance with the standards set forth in the applicable government health and safety codes.

(d) A supervisor shall inspect and monitor all persons working in any food services area on a daily basis for health and cleanliness, and shall remove anyone exhibiting any signs of food-transmissible disease from any food services area.

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(e) Any person working in any food services area who is diagnosed by a qualified health care professional with a contagious illness should be excluded from the food services areas until medically cleared to return to work.

(f) All food handlers shall wash their hands when reporting for duty and after using toilet facilities. Aprons shall be removed and secured in a clean storage area before entering the toilet facility.

(g) Food services workers shall wear disposable plastic gloves and a protective hair covering, such as a hat or hairnet, when handling or serving food. Gloves shall be changed after each task is completed.

(h) Any outside vendor must submit evidence of compliance with state and local regulations regarding food safety practices.

(i) Smoking at any time is prohibited in any food services area.

(j) Documentation of compliance with all of the above and with any other risk-minimizing efforts implemented to reduce food transmissible disease shall be maintained in accordance with established records retention schedules.

(k) All food services workers shall report to a supervisor any information about their health and activities in accordance with health and safety codes as they relate to diseases that are transmittable through food, (e.g., open sores, runny nose, sore throat, cough, vomiting, diarrhea, fever, recent exposure to contagious diseases such as Hepatitis A or tuberculosis).

Any food services worker is prohibited from handling food or working in any food services area if they report symptoms such as vomiting, diarrhea, jaundice, sore throat with fever, or has a lesion containing pus, such as a boil or infected wound that is open or draining. Food service workers shall only return to work in food service areas when cleared by a qualified health care professional.

903.5 TRAINING REQUIREMENTS FOR FOOD SERVICES WORKERS

The food services manager is responsible for developing and implementing a training program for incarcerated person food services that includes food safety, proper food-handling techniques, and personal hygiene. Each incarcerated person food services worker shall satisfactorily complete the initial training prior to being assigned to prepare, deliver, or serve food. Food services workers should receive periodic supplemental training as determined by the food services manager (15 CCR 1243(g)).

The training curriculum for incarcerated person food services workers should include, at minimum, the following topics:

- Proper hand-washing techniques and personal hygiene as it applies to food services work
- Proper application and rotation of gloves when handling food
- Proper use of protective hair coverings, such as hats or hairnets
- Wearing clean aprons and removing aprons prior to entering toilet facilities

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- Maintaining proper cooking and holding temperatures for food
- Proper portioning and serving of food
- Covering coughs and sneezes to reduce the risk of food-borne illness transmission
- Reporting illness, cuts, or sores to the custody staff in charge

903.6 SUPERVISION OF INCARCERATED WORKERS

Only personnel authorized to work in the food preparation area will be allowed inside. Incarcerated person food handlers working in the kitchen must be under the supervision of a staff member (15 CCR 1243(h)). The Captain will appoint at least one qualified staff member, who will be responsible for the oversight of daily activities and ensuring food safety. The appointed staff member must be certified by passing the American National Standards Institute food safety manager certification examination.

Sufficient custody staff shall be assigned to supervise and closely monitor incarcerated person food services workers. Staff shall ensure that incarcerated person food services workers do not misuse or misappropriate tools or utensils, and that all workers adhere to the following:

- Correct ingredients are used in the proper proportions.
- Food is maintained at proper temperatures.
- Food is washed and handled properly.
- Food is served using the right utensils and in the proper portion sizes.
- Utensils such as knives, cutting boards, pots, pans, trays, and food carts used in the preparation, serving, or consumption of food are properly washed and sanitized after use. Disposable utensils and dishes will not be reused.
- All utensils are securely stored under sanitary conditions when finished.

903.7 SUPERVISION OF THE FOOD SUPPLY

The risk of conflict and protest is reduced when the incarcerated person population has confidence in the safety and quality of their food. Custody staff should supervise the transport and delivery of food to the respective serving areas. Custody staff should ensure the food is protected during transportation and delivered to the right location efficiently and under the right temperatures.

Food services staff should report any suspected breech in the safety or security of the food supply. Staff should be alert to incarcerated person behavior when serving food, and cognizant of any comments concerning perceived contamination or portioning issues. Staff should report any suspicion of incarcerated person unrest to a supervisor.

Any change to the published menu or the standard portioning should be documented and reported to the food services manager as soon as practicable.

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Food Preparation Areas

904.1 PURPOSE AND SCOPE

This policy is intended to ensure the proper design and maintenance of the food preparation area.

904.2 POLICY

It is the policy of this office to comply with all federal, state and local laws and regulations concerning the institutional preparation of food.

904.3 COMPLIANCE WITH CODES

The Captain is responsible for ensuring that food preparation and service areas are in compliance with all applicable laws and regulations and that food preparation areas are sanitary, well lit, ventilated and have adequate temperature-controlled storage for food supplies (15 CCR 1245(a)).

Any physical changes in the food preparation area, such as changing equipment or making major menu changes (from cold production to hot food), must be approved by the local public health entity to ensure adequate food protection.

Living or sleeping quarters are prohibited in the food preparation and food services areas (Health and Safety Code § 114286).

The food preparation area must avoid cross contamination and remain free from vermin infestation (Health and Safety Code § 114259).

904.4 CONSTRUCTION REQUIREMENTS

All remodeling and new construction of food preparation areas shall comply with federal, state, and local building codes, comply with food and agricultural laws and standards, and include any required approvals from any local regulatory authority (Health and Safety Code § 113700 et seq.).

The food preparation area shall be sized to include space and equipment for adequate food preparation for the facility's population size, type of food preparation, and methods of meal services.

Floors, floor coverings, walls, wall coverings, and ceilings should be designed, constructed, and installed so they are smooth, non-absorbent, and attached so that they are easily cleanable (Health and Safety Code § 114268; Health and Safety Code § 114271).

Except in the area used only for dry storage, porous concrete blocks or bricks used for interior walls shall be finished and sealed for a smooth, non-absorbent, easily cleanable surface.

Food storage areas shall be appropriately clean, sized, typed, and temperature-controlled for the food being stored (Health and Safety Code § 114047).

Lighting throughout the kitchen and storage areas shall be sufficient for staff and incarcerated persons to perform necessary tasks (Health and Safety Code § 114252).

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Mechanical ventilation of sufficient capacity to keep rooms free of excessive heat, steam, condensation, vapors, obnoxious odors, smoke, and fumes shall be provided if necessary (Health and Safety Code § 114149(a)).

All equipment used in the food preparation area shall be commercial grade and certified by the American National Standards Institute or approved by a registered environmental health professional/sanitarian (Health and Safety Code § 114130).

Dishwashing machines will operate in accordance with the manufacturer recommendations and hot water temperatures will comply with federal, state, and local health requirements (Health and Safety Code § 114101).

Equipment must be smooth, easy to clean, and easy to disassemble for frequent cleaning. Equipment should be corrosion resistant and free of pits, crevices, or sharp corners.

Dry food storage must have sufficient space to store a minimum of 15 days of supplies and be stored in compliance with the provisions of Health and Safety Code § 114047.

904.5 TOILETS AND WASHBASINS

Adequate toilet and washbasin facilities shall be located in the vicinity of the food preparation area for convenient sanitation and proper hygiene. Toilet facilities shall be completely enclosed and shall have tight-fitting, self-closing, solid doors, which shall be closed except during cleaning and maintenance.

Signs shall be conspicuously posted throughout the food preparation area and in each restroom informing all food services staff and incarcerated workers to wash their hands after using the restroom. Signs shall be printed in English and in other languages as may be dictated by the demographic of the incarcerated person population.

To reduce the potential for contaminants being brought into the food preparation area, toilet facilities in the vicinity of the food preparation area should be limited to use by the food services staff and incarcerated workers only. Anyone working in the food services area must store their aprons in a designated clean area before entering the toilet facilities.

The food services manager shall be responsible for procedures to ensure:

(a) All fixtures in the toilet facilities are clean and in good operating condition.

(b) A supply of toilet tissue is maintained at each toilet at all times. Toilet facilities used shall have at least one covered waste receptacle.

(c) The hand-washing station located adjacent to the toilet facility has warm water available and is kept clean and in good operating condition. Single-dispensing soap and a method for drying hands shall be provided at all times (Health and Safety Code § 113953.3).

If the toilet facility is outside of the kitchen area, food services workers must wash their hands after using the toilet facility and again upon returning to the kitchen area before preparing or serving food.

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Food Budgeting and Accounting

905.1 PURPOSE AND SCOPE

The purpose of this policy is to establish processes that will enable the facility's food services to operate within its allocated budget, and for the development of specifications for purchasing food, equipment, and supplies for the delivery of food services (15 CCR 1243(i)).

905.2 POLICY

The Tehama County Sheriff's Office food services facilities shall serve nutritious meals in an efficient and cost-effective manner in accordance with applicable laws and standards.

905.3 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for establishing a per meal, per incarcerated person budget for food, equipment, and supplies that are needed for the effective operation of the facility food services. This includes monitoring purchases according to the budgeted weekly and monthly spending plans.

The volume for purchasing should be based upon the food services needs and storage availability. The food services manager is responsible for establishing and maintaining detailed records and proper accounting procedures, and should be prepared to justify all expenditures and establish future budget requirements.

905.4 PROCEDURE

The food services manager is responsible for ensuring that food services are delivered in an efficient and cost-effective manner by employing the following procedures including but not limited to:

(a) Developing an annual budget that is realistically calculated according to previous spending data and available revenue, and lists all anticipated costs for the food services operation for the coming year.

(b) Establishing a per meal, per incarcerated person cost using an inventory of existing supplies and planned purchases, minus the anticipated ending inventory (15 CCR 1243(i)).

(c) Ensuring that accurate meal record data is collected and maintained. Meal records should include but not be limited to the date and time of service and the number of:

1. Meals prepared and served for each meal period.
2. Meals served per location.
3. Prescribed therapeutic diet meals served.
4. Authorized religious diet meals served.
5. Authorized disciplinary isolation diet meals served.

(d) Ensuring that food is purchased from an approved wholesale/institutional vendor to ensure food safety.

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(e) Bulk-purchasing nonperishable items to maximize the budget dollars (15 CCR 1243(b)).

(f) Continuous monitoring and improvement to minimize poor food management and/or accounting, including but not limited to:

1. Following planned menus.
2. Inspection of food deliveries to ensure the right quantity is delivered and the condition of the food is acceptable.
3. Purchasing food that is in season.
4. Purchasing the grade of product best suited to the recipe.
5. Following standard recipes.
6. Producing and portioning only what is needed.
7. Minimizing food production waste and establishing appropriate food storage and rotation practices, including proper refrigeration.
8. When reasonably practicable, responding to the incarcerated person's food preferences.
9. Establishing minimum staffing requirements based on the layout and security requirements of the facility.
10. Budgeting adequately for equipment repair and replacement, factoring in any labor cost savings, the need for heavy-duty equipment with corrections packages for safety, and incarcerated person abuse.

(g) Establishing purchasing specifications, which are statements of minimum quality standards and other factors, such as quantity and packaging. A basic specification should contain (15 CCR 1243(b)):

1. The common name of the product.
2. The amount to be purchased.
3. The trade, federal, or other grade or brand required.
4. The container size and either an exact or a range of the number of pieces in a shipping container.
5. The unit on which prices are to be quoted (e.g., 6/#10 cans, 10/gallons).

(h) Establishing accounting procedures for financial statements and inventory control.

(i) Maintaining records of invoices, purchase orders, meal count sheets, food production records, therapeutic and religious diet records, inventory of food, supplies, and equipment for the required period of time, as mandated by the governing body of the facility.

905.5 MONTHLY REPORTING

The food services manager is responsible for ensuring that accurate meal record data is collected and maintained. Meal records should include, but not be limited to, the number of (15 CCR 1243(j)):

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(a) Meals prepared and served for each meal period.

(b) Meals served per location.

(c) Prescribed therapeutic diet meals served.

(d) Authorized religious diet meals served.

(e) Authorized disciplinary isolation diet meals served.

A monthly report summarizing all data should be provided to the Captain.

All meal records shall be retained in accordance with office retention schedules and state statutory regulations.

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Inspection of Food Products

906.1 PURPOSE AND SCOPE

The purpose of this policy is to establish methods by which the Food and Drug Administration (FDA) and/or the United States Department of Agriculture (USDA) inspections and/or approvals are conducted on any food products grown or produced within the jail system.

906.2 POLICY

The Tehama County Sheriff's Office will ensure the safety and quality of all food products grown or produced at this facility through routine inspections and approvals, as required by law.

906.3 FOOD INSPECTION PROCEDURES

The food services manager is responsible for developing procedures for ensuring that all food used in the food services operation has been inspected and/or approved to standards established by statute, and that the delivery of all food products to the food preparation areas and to the incarcerated persons occurs promptly to reduce the risk of any food-borne illness or contamination.

The food services manager shall establish inspection procedures in accordance with established standards and statutes. Such procedures shall include but are not limited to:

(a) The FDA or USDA inspection and/or approval of all food products grown or produced by this facility prior to distribution.

(b) A system of periodic audits and inspections of the facility and of all raw material suppliers, either by custody staff or by a third-party vendor.

(c) A system of thorough documentation of all inspection and approval processes, training activities, raw material handling procedures, cleaning and sanitation activities, cleanliness testing, correction efforts, record-keeping practices, and the proper use of sign-off logs shall be developed and implemented.

(d) Processes of evaluating the effectiveness of training and validating cleanliness through testing (e.g., swabs, bioluminescence and visual, taste, and odor evaluations) shall be created and implemented. Records of all such activities shall be documented.

(e) Documentation of any recommendations for continuous quality improvement and their implementation, with the intent of eliminating deficiencies. Documentation should include a post-deployment verification of the correction.

906.4 FOOD SERVICES MANAGER RESPONSIBILITIES

The food services manager is responsible for ensuring adherence to the following practices, including but not limited to:

(a) The scope of food products being grown or processed internally is well-defined.

(b) All critical processes are validated to ensure consistency and compliance with specifications.

(c) Any changes to the process are evaluated for effectiveness.

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(d) There are clearly written instructions and procedures for the staff and incarcerated persons to follow.

(e) The staff and incarcerated persons are trained to perform all established tasks and document all necessary procedures.

(f) Physical barriers for separating raw and cooked food-processing areas are established and maintained.

(g) The traffic flow of workers is designed to minimize the risk of any cross-contamination.

(h) All drains are used and cleaned properly, within industry standards.

(i) Proper equipment and/or tools are provided and designated for specific use.

(j) All persons working in the food services areas are wearing proper clothing and protective devices at all times.

(k) All persons working in the food services areas wash their hands properly and frequently.

(l) Only authorized personnel are allowed in the food processing areas.

(m) Only potable water is used for growing or washing produce.

(n) The distribution of all prepared food is done in a manner that reduces the risk of food-borne illness or contamination.

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Food Services Facilities Inspection

907.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for inspecting food services areas and facilities to ensure a safe and sanitary environment for staff and incarcerated persons.

907.2 POLICY

It is the policy of the Tehama County Sheriff's Office that the food services area be maintained in a safe, sanitary condition by conducting regularly scheduled inspections, both by facility staff and by an outside independent inspection authority as may be required by law.

907.3 CLEANING AND INSPECTIONS BY STAFF

The food services manager shall ensure that all equipment, appliances, and utensils in the food preparation areas and dining areas are inspected weekly. Adequate hot and cold water should be available in the kitchen. The water temperature of all fixtures should be checked and recorded weekly to ensure compliance with the required temperature range. Deficiencies noted by inspections shall be promptly addressed.

A cleaning schedule for each food services area shall be developed and posted for easy reference by staff, and shall include areas such as floors, walls, windows, and vent hoods. Equipment, such as chairs, tables, fryers, and ovens, should be grouped by frequency of cleaning as follows:

- After each use
- Each shift
- Daily
- Weekly
- Monthly
- Semiannually
- Annually

The food services manager is responsible for establishing and maintaining a record-keeping system to document the periodic testing of sanitary conditions and safety measures, in accordance with established records retention schedules. At the direction of the Captain or the authorized designee, the food services manager shall take prompt action to correct any identified problems.

907.3.1 SAFETY INSPECTION CHECKLIST

The following items should be part of the weekly inspection:

- Lighting is adequate and functioning properly.
- Ample working space is available.
- Equipment is securely anchored.

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- There are suitable storage facilities, minimizing the risk of falling objects.
- Floors are clean, dry, even, and uncluttered.
- Machines have proper enclosures and guards.
- A clear fire safety passageway is established and maintained.
- Fire extinguishers and sprinkler systems are available, not expired and are tested regularly.
- The food preparation area has good ventilation.
- Furniture and fixtures are free from sharp corners, exposed metal, and splintered wood.
- All electrical equipment is in compliance with codes and regulations.
- All workers wear safe clothing, hair coverings, gloves, and protective devices while working.
- All workers are in good health, with no symptoms of illness or injury that would pose a risk to food safety.
- All ranges, ovens, and hot holding equipment are clean and in good operating condition.
- Mixers and attachments are clean and in good operating condition.
- Dishwashing machines are clean and in good operating condition, and proper chemicals are in use.
- Water temperatures for hand sinks, washing sinks, and dishwashing machines meet minimum acceptable temperatures.
- Appropriate hand-washing stations are provided.
- Toilet facilities are in good repair and have a sufficient supply of toilet paper.
- All temperature charts and testing documents are current, accurate, and periodically reviewed and verified by the food services manager.
- Only authorized personnel are allowed in the kitchen area.
- Foods are labeled and stored properly using the first-in first-out system.
- The refrigerators and freezers are in good operating condition and maintain proper temperature.
- There is no evidence of cross-connection or cross-contamination of the potable water system.

907.4 CONTRACTING FOR INSPECTION

The food services manager is responsible for ensuring that the food services operation works in accordance with all state and local laws and regulations.

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Food Services Facilities Inspection

The Captain shall contract with an independent outside source for periodic inspection of the food services facilities and equipment to ensure that established state and local health and safety codes have been met.

Documentation of the inspections, findings, deficiencies, recommended corrective actions, and verification that the corrective standards were implemented will be maintained by the facility in accordance with established records retention schedules.

A contract for services from an independent and qualified inspector should include but is not limited to the following components:

(a) The inspector should conduct a pre-inspection briefing with the Captain and other appropriate personnel, including the food services manager, to identify the applicable government health and safety codes and the areas to be inspected. The inspector should provide the necessary equipment to conduct the inspection.

(b) The inspector should audit the policies and procedures of the food services operation.

(c) During the course of the inspection, the inspector should study and report on whether the following meet acceptable standards:

1. Walls, ceilings, and floors are in good condition, smooth and easily cleanable.
2. The kitchen layout is properly designed to avoid cross-contamination.
3. The kitchen is properly lighted and ventilated.
4. The temperature-controlled storage areas are in good operating condition and proper temperatures are being maintained.
5. Dry foods are properly stored off the floor, away from the walls and ceilings.
6. There is no sign of pest infestation.
7. All equipment is properly maintained, in a sanitary condition and is certified by one of the American National Standards Institute certification agencies (e.g., Underwriters Laboratories, the National Science Foundation product certification mark).
8. The dishwashing equipment is clean, in good operating condition, and maintains proper washing and rinsing temperatures.
9. There is no evidence of cross-contamination between the potable and contaminated water systems.
10. The dishware washing area is clean and supplied with proper chemicals and Safety Data Sheets.
11. The food is properly stored, labeled, and rotated according to first-in first-out procedures.
12. The food services staff and incarcerated workers are wearing clean uniforms and practice proper personal hygiene.
13. All food services workers are trained for proper food handling and there is a person in charge who is responsible for the food safety of the facility.

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14. Appropriate hand-washing stations are provided.

Any deficiencies should be noted by the inspector in their inspection report, and recommendations made for corrective action.

At the exit interview, the inspector should cite any violations according to the government health and safety codes.

The inspector should conduct a follow-up inspection to verify the deficiencies have been corrected as recommended.

The food services manager should provide the Captain with a plan to implement the recommended corrections in a timely manner and schedule a post-correction inspection with the original independent inspector.

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Food Storage

908.1 PURPOSE AND SCOPE

The purpose of this policy is to establish food storage methods that are designed to meet manufacturer's recommendations, Health and Safety Codes, state laws and local ordinances, and to safely preserve food, extend storage life and reduce food waste.

908.2 POLICY

Food and food supplies will be stored in sanitary and temperature-controlled areas in compliance with state and local health laws and standards (15 CCR 1243(c); 15 CCR 1245(a)).

908.3 PROCEDURES

The food services manager shall be responsible for establishing procedures to ensure the safe preservation and storage of food in the most cost-effective manner, beginning with the receipt of the raw materials through the delivery of prepared meals.

When receiving food deliveries, food services staff shall inspect the order for quality and freshness, and shall ensure that the order is correct by checking the order received against the order form. All delivery vehicles shall be inspected by food services staff to make certain that the vehicles are clean, free from vermin infestations and are maintained at the appropriate temperature for the type of food being carried.

If food quality and freshness do not meet commonly accepted standards or if it is determined that proper storage temperatures have not been maintained, the employee checking the order in will refuse the item and credit the invoice.

Any food destined for return to the vendor should be stored separately from any food destined for consumption. The food services manager will contact the vendor and arrange for replacement of the unacceptable food items.

Storage temperatures in all food storage areas should be checked and logged on a daily basis. Records of the temperature readings should be maintained in accordance with established records retention schedules.

An evaluation system should be established for food stored in any area with temperature readings outside the normal range, and should include contingency plans for menu changes, food storage relocation or food destruction, as indicated. All actions taken to ensure the safety of the food served should be documented and retained in accordance with established records retention schedules.

908.4 DRY FOOD STORAGE

Canned items and dry food that does not need refrigeration should be stored in a clean, dry, secure storage area where temperatures are maintained between 45 and 80 degrees. Temperatures shall be monitored and recorded once each day on a checklist.

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All dry items shall be stored at least 6 inches off the floor and at least 6 inches away from any wall. Only full unopened cans and containers shall be stored in the storerooms. Open containers and packages shall be appropriately stored in the working or holding areas.

All storage areas will be kept locked when they are not in actual use. New food shipments shall be placed behind existing like items and rotated using a first-in first-out rotation method.

Personal clothing and personal items shall not be stored in food storage areas.

908.4.1 MAINTENANCE OF DRY FOOD STORAGE AREAS

Incarcerated workers or staff should clean the storage areas at least once each day by sweeping and mopping all floors and wiping down shelves and walls. Any damaged items should be inspected for spoilage and repackaged or discarded as appropriate. Food services staff should inspect the storage areas to ensure they are clean and orderly. Staff will document the inspection and record the daily temperature on the storage area checklist (15 CCR 1243(m)).

908.5 REFRIGERATED AND FROZEN STORAGE

Unless health codes dictate otherwise, refrigerators must be kept between 32 and 41 degrees. Deep chill refrigerators will be set between 28 and 32 degrees for cook-chill products, dairy, and meat items, to extend shelf life. Other than the defrosting cycle, all freezers must maintain a temperature of 0 degrees or lower.

All freezer and refrigerator storage areas should have at least two thermometers to monitor temperatures. One thermometer should have a display visible to the outside. The second thermometer shall be placed in the warmest place inside the storage area. Daily temperature readings shall be recorded on the storage area checklist. Any variance outside of acceptable temperature range shall be immediately addressed.

All food must be covered and dated when stored. Cooked items shall not be stored beneath raw meats. Cleaned vegetables shall be stored separately from unwashed vegetables. Storage practices shall use a first-in first-out rotation method.

908.5.1 MAINTENANCE OF REFRIGERATED AND FREEZER AREAS

Refrigeration storage units should be cleaned daily, including mopping floors and wiping down walls. A more thorough cleaning should occur weekly to include dismantling and cleaning shelves. Food services staff should inspect the contents of freezers and storage units daily to ensure all items are properly sealed and labeled (15 CCR 1243(m)).

908.5.2 STORAGE OF CLEANING SUPPLIES AND MATERIALS

Soaps, detergents, waxes, cleaning compounds, insect spray, and any other toxic or poisonous materials should be kept in a separate, locked storage area to prevent cross contamination with food and other kitchen supplies.

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908.6 WASTE MANAGEMENT

The food services manager shall develop and maintain a waste management plan that ensures the garbage is removed daily (15 CCR 1243(l)). This plan also should include methods to minimize the waste of edible food and to dispose of non-edible or waste food material without utilizing a landfill.

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Prescribed Therapeutic Diets

909.1 PURPOSE AND SCOPE

The purpose of this policy is to ensure that incarcerated persons who require prescribed therapeutic diets as a result of a diagnosed medical condition are provided with nutritionally balanced therapeutic meals that are medically approved and meet nutritional and safety standards.

909.2 PROCEDURES

The Responsible Physician, in consultation with the food services manager, shall (15 CCR 1248):

(a) Develop written procedures that identify individuals who are authorized to prescribe a therapeutic diet.

(b) The therapeutic diets utilized by this facility shall be planned, prepared, and served with consultation from a registered dietitian.

(c) The Captain shall comply with any therapeutic diet prescribed for an incarcerated person.

(d) The Captain and the Responsible Physician shall ensure that the diet manual, which includes sample menus of therapeutic diets, shall be available to both the health services and food services workers. A registered dietitian shall review, and the Responsible Physician shall approve, the diet manual on an annual basis.

As a best practice, all therapeutic diet prescriptions should be reviewed and rewritten, if appropriate, on a quarterly basis. This is to reduce the risk of an incarcerated person developing an adverse medical condition or nutritional defect as the result of a diet that is inconsistent with the person's current medical needs. A diet request form should be made available to incarcerated persons.

Pregnant or lactating incarcerated persons shall be provided a balanced, nutritious diet approved by a physician (15 CCR 1248).

909.3 STAFF COMMUNICATION/COORDINATION

It is the responsibility of the health authority to compile a daily list of all incarcerated persons who are prescribed therapeutic diets. The list should contain the following information:

(a) Incarcerated person's name

(b) Incarcerated person's identification number

(c) Housing location or dining location where the meals will be delivered

(d) Incarcerated person's therapeutic diet type

(e) Special remarks or instructions

Any time incarcerated persons are assigned to a different housing area, custody staff must notify the food services personnel immediately.

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909.4 PREPARATION AND DELIVERY OF MEALS

The food services manager or the authorized designee is responsible for reviewing the therapeutic diet lists prepared by the Responsible Physician, counting the number and type of therapeutic meals to be served, and preparing the food according to the therapeutic menu designed by the registered dietitian.

Therapeutic diets may include snacks and oral supplements. Snacks and supplements should be distributed with regularly scheduled meal service or may be distributed with medications. Individual labels or written documents containing the following information should be prepared by the kitchen, clearly identifying each meal and any included snacks:

(a) Incarcerated person's name

(b) Incarcerated person's identification number

(c) Housing location or dining location where the meals will be delivered

(d) Incarcerated person's therapeutic diet type

(e) A list of items provided for the meal

The custody staff responsible for meal distribution shall ensure that any incarcerated person who has been prescribed a therapeutic meal by the Responsible Physician or the authorized designee receives the prescribed therapeutic meal. Incarcerated persons who receive a therapeutic meal should sign for receipt of the meal.

Therapeutic meal receipts should be retained in the incarcerated person's medical record for an amount of time necessary to resolve any dispute about the receipt or composition of a prescribed meal.

Unless a therapeutic diet was prescribed with a specific end date, only the Responsible Physician or the authorized designee may order that a therapeutic diet be discontinued.

Incarcerated persons who are receiving therapeutic diets must receive clearance from the Responsible Physician before they may receive a religious or disciplinary diet.

If prescribed by the Responsible Physician, supplemental food shall be served to incarcerated persons more frequently than the regularly scheduled meals. An incarcerated person who misses a regularly scheduled meal shall receive the prescribed meal.

909.5 THERAPEUTIC AND RELIGIOUS MEAL RECORDS

Incarcerated persons receiving prescribed therapeutic diet meals and/or authorized religious diet meals must sign a document indicating the following:

(a) Incarcerated person's name

(b) Incarcerated person's identification number

(c) Dates and times of service

(d) Housing location or dining location where the meals will be delivered

(e) Incarcerated person's therapeutic diet type

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(f) A list of items provided for the meal

All information regarding a therapeutic diet is part of an incarcerated person's medical record and is therefore subject to state and federal privacy laws concerning medical records.

All meal records shall be retained in accordance with established retention schedules and applicable statutory regulations.

909.6 POLICY

It is the policy of this office to provide therapeutic diet meals as prescribed by qualified health care professionals.

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Chapter 10 - Inmate Programs

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Programs and Services

1000.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the programs and services that are available to incarcerated persons. The programs and services exist to motivate offenders toward positive behavior while they are in custody. The policy identifies the role and responsibilities of the Programs Coordinator, who manages a range of programs and services.

1000.2 POLICY

The Tehama County Sheriff's Office will make available to incarcerated persons a variety of programs and services subject to resources and security concerns. Programs and services offered for the benefit of incarcerated persons may include social services, faith-based services, out of cell activities, library access, educational/vocational training, alcohol and drug abuse recovery programs, and leisure time activities (15 CCR 1070).

1000.3 PROGRAMS COORDINATOR RESPONSIBILITIES

The Programs Coordinator is selected by the Captain and is responsible for managing the incarcerated person programs and services, including the following:

(a) Research, plan, budget, schedule, and coordinate security requirements for all incarcerated person programs and services.

(b) Develop or procure programs and services as authorized by the Captain (15 CCR 1070).

(c) Act as a liaison with other service providers in the community that may offer social or educational programs (e.g., school districts, Department of Social Services, health educators, substance abuse counselors).

(d) Develop, maintain, and make available to incarcerated persons the schedule of programs and services.

(e) Develop policies and procedures, and establish rules for the participation of incarcerated persons in the programs and services.

(f) Develop and maintain records on the number and type of programs and services offered, as well as incarcerated person attendance at each offering.

(g) Establish controls to verify that the content and delivery of programs and services are appropriate for the circumstances.

(h) Accumulate data and prepare monthly and annual reports as directed by the Captain.

(i) Ensure incarcerated persons are not denied access to educational and vocational programs based solely on their indigent status.

1000.4 SECURITY

All programs and services offered to benefit incarcerated persons shall adhere to the security and classification requirements of this facility. To the extent practicable, the Programs Coordinator will

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develop individualized programs and services for incarcerated persons who are housed in high-security or administrative separation.

1000.5 DISCLAIMER

Incarcerated person programs are provided at the sole discretion of the Tehama County Sheriff's Office in keeping with security interests, available resources, and best practices.

Nothing in this policy is intended to confer a legal right for persons to participate in any program offered other than what is required by law or that which is medically required.

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Incarcerated Person Welfare Fund

1001.1 PURPOSE AND SCOPE

The Office is authorized to maintain a fund derived from proceeds from the commissary, vending machines, telephones, and other incarcerated person-related commerce activities to be used primarily to provide welfare and education programs for the benefit of the incarcerated person population.

1001.2 INCARCERATED PERSON WELFARE FUND

The Programs Coordinator, in cooperation with the Finance Department, will establish and maintain an Incarcerated Person Welfare Fund where proceeds derived from incarcerated person telephones, commissary profits, vending machines, and other income intended for the support of incarcerated person programs are deposited.

The Incarcerated Person Welfare Fund is allocated to support a variety of programs, services, and activities benefiting the general incarcerated person population and enhancing incarcerated person activities and programs. This includes capital construction and improvement projects in support of such programs, services, and activities (Penal Code § 4025).

1001.3 INCARCERATED PERSON WELFARE FUNDING SOURCES

Revenues and funding from the following sources shall be deposited into the Incarcerated Person Welfare Fund account:

(a) All proceeds from commissary and canteen operations

(b) Proceeds from vending machines made available for incarcerated person use

(c) Proceeds from the operation of incarcerated person telephones

(d) Proceeds from the sale of incarcerated persons' arts-and-crafts projects

(e) Donations

(f) Interest income earned by the Incarcerated Person Welfare Fund

1001.4 EXPENDITURE OF INCARCERATED PERSON WELFARE FUNDS

The Incarcerated Person Welfare Fund shall be used solely for the welfare and benefit of the incarcerated person population or as otherwise permitted by law.

Expenditures permitted from the Incarcerated Person Welfare Fund include but are not limited to the following:

(a) Education programs

(b) Recreational goods and services, such as:

1. Recreational equipment, games, and sporting goods
2. Televisions and cable/satellite subscriptions, video players, and content media
3. Library books

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4. Vending machines

(c) Salary and benefit costs for personnel while they are employed in positions or are performing activities solely for the benefit of incarcerated persons or to facilitate incarcerated person programs

(d) Welfare packages for indigent incarcerated persons

(e) Alcohol and drug treatment programs

(f) Office facility canteens, including vending machines available for incarcerated person use

(g) Incarcerated person trust accounting system

(h) Envelopes, postage, and personal hygiene items for indigent incarcerated persons

(i) Approved non-prescription, over-the-counter health aids for incarcerated person use

(j) Libraries designated for incarcerated person use

(k) Visiting room equipment, supplies, and services

(l) Incarcerated person activity programs, including:

1. Equipment for television viewing
2. Visiting music/entertainment groups
3. Music equipment and supplies
4. Activities equipment, supplies, and services
5. Repair of equipment purchased from the Incarcerated Person Welfare Fund
6. Food or supplies for special occasions
7. Incarcerated person awards for the purpose of providing umpires or referees, and maintaining activity equipment and apparel
8. Incarcerated person tournaments and holiday events
9. Incarcerated person club activities
10. Entertainment equipment, cable or satellite subscription services, and other related supplies
11. Materials for faith-based programs

1001.4.1 PROHIBITED EXPENDITURES OF INCARCERATED PERSON WELFARE FUND
Except as permitted by law, the Incarcerated Person Welfare Fund shall not be used to fund activities associated with any of the following:

(a) Security-related functions, including staff, safety equipment, radios, weapons, or control devices that are specifically designated for use by the custody staff in maintaining the security, safety, and order in the facility

(b) Food service, staff costs, equipment, and supplies

(c) Medical/dental services, staff costs, equipment, and supplies

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(d) Maintenance and upkeep of office facilities not otherwise permitted by law

(e) Janitorial services and supplies

(f) Transportation to court, medical appointments, or other reasons not related to incarcerated person programs

(g) Any other normal operating expenses incurred by the day-to-day operation of the Office

1001.4.2 EXPENDITURE FOR REENTRY PROGRAMS

Expenditures from the Incarcerated Person Welfare Fund are also permitted for programs that assist indigent incarcerated persons with the reentry process within 30 days of release. These programs include work placement, counseling, obtaining proper identification, education, and housing (Penal Code § 4025.5).

1001.5 FINANCIAL ACCOUNTING OF INCARCERATED PERSON WELFARE FUNDS

The Programs Coordinator in cooperation with the Finance Department shall maintain an accounting system to be used for purchasing goods, supplies, and services that support incarcerated person programs (see the Financial Practices Policy).

1001.5.1 ANNUAL REPORTING

The Captain is responsible for ensuring an annual report of expenditures from the Incarcerated Person Welfare Fund is submitted annually to the County Board of Supervisors (Penal Code § 4025).

1001.6 POLICY

It is the policy of this office to maintain and administer an Incarcerated Person Welfare Fund that supports incarcerated person programs.

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Accounts

1002.1 PURPOSE AND SCOPE

This policy establishes guidelines and procedures for managing, handling, and accounting of all money belonging to incarcerated persons that is held for their personal use while they are incarcerated in this facility.

1002.2 INCARCERATED PERSON ACCOUNTS

A separate account will be established for each incarcerated person when they are booked into this facility.

When a person is admitted to the jail, a written, itemized inventory of the money in the person's possession shall be completed. Any subsequent deposits to the incarcerated person's fund shall be inventoried and documented. An incarcerated person shall be issued a receipt for all money held until their release.

An incarcerated person may use money in their account for bail or to purchase items from the commissary. Incarcerated persons may receive and release money while in custody. Funds will be made available to incarcerated persons for their use in accordance with the rules and regulations established by the Captain.

1002.3 FUNDING SOURCES

The incarcerated person account will only accept funds for deposit from approved sources. Funds deposited into an incarcerated person's account will first be used to settle the incarcerated person's negative balance, should one exist.

1002.3.1 DEPOSITS DURING BOOKING

With the exception of legally prescribed fees (e.g., booking fees, pay to stay), all money received during the booking process shall be deposited to the incarcerated person's account after the incarcerated person signs an acknowledgement agreeing to the amount.

1002.3.2 DEPOSITS THROUGH THE MAIL

All funds received by mail to be deposited to an inmate’s account shall be delivered to the cashier after signed acknowledgement by the inmate.

Only cash, money orders and checks issued by federal, state, county or city government agencies that are received through the mail are acceptable for deposit into inmate accounts. Although cash may be accepted for deposit, it is not recommended that cash be sent through the mail. All personal checks, payroll checks and other unapproved monies will be forwarded to the personal property storage area and placed in the inmate's property bag.

1002.3.3 VISITOR DEPOSITS

Only approved visitors may deposit funds into an inmate’s account. The cashier may only accept cash or money orders for deposit to an inmate's account.

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The cashier shall post funds received to the inmate's account and prepare a validated receipt for the transaction. A copy of the transaction receipt shall be provided to both the inmate and the person making the deposit. A copy will be retained by the cashier.

Inmates will not be allowed to accumulate large sums of money in their account other than for the purpose of bail. Deposits bringing the inmate's balance over $500 must be approved by the Jail Commander. Anything over the limit will be placed in the inmate's personal property.

1002.4 AUTHORIZATION FOR SELF-BAIL

Incarcerated persons wishing to use their personal funds as bail must sign an authorization for self-bail transaction document. This transaction document must be received by the cashier before the incarcerated person's account can be debited and a receipt issued.

1002.5 RELEASE OF FUNDS TO OTHER PERSONS

1. When an inmate's money is being requested by an individual at the visitation window.

    a. Line staff or a STARS volunteer will obtain a Inmate Property Release Form and write in the inmates's name, CN#, date, name and telephone number of the individual at the visitation window.

    b. The Inmate Property release Form and the individual's driver's license will be given to the jail division secretary who will verify the inmate is eligible to release funds.

        1. If denied the secretary will shred the Inmate Property release form and return the individual's driver's license notifying him/her that the request can not be granted.

        2. If approved the secretary will indicate, in pencil, the amount the inmate currently has on his/her account. The secretary will then deliver the Inmate Property Release Form to the booking officer who will delegate an officer to deliver it to the inmate.

        3. The inmate is to indicate the dollar amount, if any, he/she wishes to release in the appropriate box on the form. The officer will then deliver the Inmate Property release Form to the secretary.

        4. With a signed form the secretary will erase the penciled dollar amount from the form, make a withdraw from the inmate's account by issuing a check made out in the name as it appears on the driver's license and white-out the fund balances on the receipts.

    c. An inmate may release money once per incarceration period. Checks will not be made out to pay inmate bills without express approval of the Jail Commander.

2. The person receiving the check must sign the Inmate Property Release Form and both check receipts.

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a. The top (Small) check receipt will be stapled to the completed Inmate Property Release Form and filed in the inmate's "desk file". The bottom (larger) check receipt will be placed in the secretary's in tray.

b. No property is to be released without a signed Inmate Property Release Form.

3. At the time an inmate is being released from custody, if he/she has $2.00 or less on his/her account, he/she may donate the funds to the inmatae welfare accounty by signing a resolution 67-2005 form.

1002.6 RELEASE FROM CUSTODY

The cashier will receive a daily roster of incarcerated person scheduled for release. Each incarcerated person's account will be accessed and a report showing all activity on the account will be completed and filed after it has been adjusted to show a zero balance.

Staff members who are responsible for the release of incarcerated persons will notify the cashier of all impending releases, including those not on the scheduled release roster, by providing the list with the names and booking numbers to the cashier.

The cashier will release the money to the incarcerated person after the incarcerated person endorses the account report.

1002.7 CASHIER RESPONSIBILITY

The cashier will verify all funds received against the amounts recorded on the incarcerated person account financial record. The cashier will then post the funds to the incarcerated person's account and prepare a receipt for the incarcerated person.

At the end of every shift, each cashier shall be responsible for balancing all transactions completed during the shift and shall complete a cash activity sheet itemizing each type of transaction.

All monies shall be counted, verified against the transactions, bundled, and placed in a designated secure safe or transferred to the Finance Department with appropriate transmittal documentation, in accordance with Office finance rules.

Any unresolved discrepancies found during the balancing procedures shall be promptly reported. The cashier reporting the discrepancies shall prepare a report showing the amount of the discrepancy.

The report shall include the following:

(a) Date and time each cash discrepancy was discovered

(b) Amount of overage or shortage

(c) Explanation of the cause of the overage/shortage

(d) Documentation used to identify the error

(e) Recovery attempts

(f) Name of person reporting the discrepancy

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(g) Name of person approving the report and the date approved

The supervisor shall initial the report prior to submission to the Finance Department for final review.

1002.8 SECURE BANKING OF INCARCERATED PERSON FUNDS

All monies collected by custody personnel shall be secured daily in an officially designated and secure place, and verified by a supervisor.

1002.9 AUTOMATED KIOSKS

The use of automated kiosks for the deposit of monies into the incarcerated person account or to transfer incarcerated person monies for the purchase of commissary or other authorized items will meet the financial accounting requirements of this policy and other standard financial practices.

1002.10 POLICY

It is the policy of this office to manage incarcerated person accounts for the purpose of receiving funds from authorized sources for incarcerated persons use.

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Counseling Services

1003.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a process for providing counseling and crisis intervention services to inmates.

1003.2 POLICY

This office will provide counseling and crisis intervention services to any inmate who either requests services or is determined by a health provider to be in need of counseling or crisis intervention services. These services may be provided by:

(a) Medical/mental health staff assigned to the facility.

(b) Faith-based counseling by the chaplain or religious volunteers (see the Religious Programs Policy).

(c) Correctional officers assigned to the facility who have specific training and expertise in this area.

(d) Inmates requesting to make Crisis Line Calls will be placed on the Crisis Line and provided the opportunity to speak with professional counselor as soon as practical.

The Jail Commander shall coordinate with the Responsible Physician to develop and confidentially maintain records of counseling and crisis intervention services provided to inmates and to ensure that those records are retained in accordance with established records retention schedules.

The Jail Commander shall ensure that request forms are available and provided to inmates who request counseling services. All inmate requests for counseling shall be forwarded to the Shift Supervisor. If an inmate displays behavior indicating a need for counseling or crisis intervention services, the facility employee shall notify the Shift Supervisor. The Shift Supervisor shall assess the need and area of counseling and make a reasonable effort to provide the inmate with the requested counseling as soon as reasonably practicable with consideration given to facility security, scheduling and available resources. Inmates who are victims of a sexual abuse or harassment incident will be informed of the availability and continuity of counseling (28 CFR 115.82; 28 CFR 115.83).

1003.3 NON-CRISIS COUNSELING

The Office shall, when reasonably practicable, make counseling services available to assist inmates who are being released into the community.

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Exercise and Out of Cell Time

1004.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines and procedures ensuring that the Tehama County Sheriff's Office facility will have sufficiently scheduled exercise and out of cell time periods and sufficient space for these activities, as required by law.

1004.1.1 DEFINITIONS

Definitions related to this policy include (15 CCR 1006):

Exercise - The opportunity for physical exertion.

Out of Cell Time - Time spent outside of the sleeping area, where an individual has the opportunity to exercise or participate in recreation.

Recreation - An individual's ability to choose from activities that occupy the attention and offer the opportunity for relaxation and may include reading, games, socialization, entertainment, education, and programs.

1004.2 RESPONSIBILITIES

The Captain or the authorized designee shall be responsible for ensuring there is sufficient secure space allocated for physical exercise and out of cell time, and that a schedule is developed to ensure accessibility to both activities for all incarcerated persons. At least three hours per week of exercise opportunities shall be provided and at least seven hours of out of cell time distributed over a period of seven days for recreation (15 CCR 1065).

1004.3 ACCESS TO EXERCISE

Incarcerated persons shall have access to exercise opportunities and equipment, including access to physical exercise outside the cell and adjacent dayroom areas, and the opportunity to exercise outdoors when weather permits.

The Shift Supervisor shall use the approved daily log sheet to document when incarcerated persons of like classification status are scheduled to exercise each day and shall record the exercise of an incarcerated person, or that the incarcerated person has declined outside exercise.

Daily log sheets should be collected monthly and forwarded to the Captain. Log sheets shall be maintained in accordance with established records retention schedules.

1004.4 ACCESS TO OUT OF CELL TIME

Each incarcerated person shall have access to the minimum state-required out of cell time (leisure-time) activities outside the cell and adjacent dayroom areas (15 CCR 1065). The length of time will be determined by the incarcerated person's classification status, security concerns, and operational schedules that preclude out of cell time during a period of time (e.g., meal times, searches, lockdown, court). The staff should ensure that the maximum time possible is provided to the incarcerated persons for this purpose.

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Televisions, newspapers, table games, and other items may also be made available to enhance out of cell time. Consideration will be given to the passive or active out of cell time needs of older incarcerated persons and incarcerated persons with disabilities.

1004.4.1 USE OF THE INCARCERATED PERSON WELFARE FUND
Monies derived from the Incarcerated Person Welfare Fund may be used to purchase and maintain equipment and supplies.

1004.5 SECURITY AND SUPERVISION

The staff supervising incarcerated persons during exercise and out of cell time shall document when each incarcerated person has the opportunity to exercise or recreate, and when each incarcerated person actually participates.

Staff shall be responsible for inspecting exercise equipment to ensure it appears safe for use. Broken equipment or equipment that is in an unsafe condition shall not be used. Incarcerated persons will not be permitted to use equipment without supervision. All equipment shall be accounted for before incarcerated persons are returned to their housing unit.

The supervising staff may terminate the exercise or out of cell time period and escort back to the housing unit any incarcerated person who continues to act in an aggressive or disorderly manner after being ordered to stop by the staff. Whenever an exercise or out of cell time period is involuntarily terminated, the staff will document the incident and rationale for terminating the exercise period. The Shift Supervisor will determine whether disciplinary action is warranted.

1004.6 EXERCISE SPACE

Exercise areas, as specified by federal, state, and/or local laws or requirements, should be sufficient to allow each incarcerated person the required minimum amount of exercise. Use of outdoor exercise is preferred but weather conditions may require the use of covered/enclosed space. Dayroom space is not considered exercise space.

Incarcerated persons on separation status shall have access to the same facilities as other incarcerated persons unless security or safety considerations dictate otherwise. When incarcerated persons on separation status are excluded from use of regular facilities, the alternative area for exercise use shall be documented.

1004.7 INABILITY TO MEET REQUIREMENTS

In the event that the incarcerated person population exceeds the ability of the facility to meet the exercise and out of cell time requirements, the facility should notify the governing body about the deficiency in space for exercise, that it may violate the law and/or the requirements, and request funds to remedy the situation. The facility should document all action taken to try to remedy the situation, including funding requests, population reduction requests, and all responses to those requests.

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1004.8 POLICY

It is the policy of this office to provide incarcerated persons with access to exercise opportunities, exercise equipment, and out of cell time activities in accordance with state laws or requirements.

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Education, Vocation, and Rehabilitation

1005.1 PURPOSE AND SCOPE

This office provides educational and vocational programs that are designed to help incarcerated persons improve personal skills, assist in their social development, and improve employability after release. The ability of the office to offer educational programs is dictated by available funding, incarcerated person classification, and other required incarcerated person programs and routines.

1005.2 PROGRAM REQUIREMENTS

Designated space for incarcerated person education and vocational programs will, whenever practicable, be designed with input from educational/vocational service providers.

Adequate funding is required. If the funding source reduces or eliminates funding in these areas, educational and/or vocational programs may be reduced or eliminated.

While the housing classification of an incarcerated person has the potential to pose security issues, every effort, to the extent reasonably practicable, will be made to provide individualized educational opportunities (15 CCR 1061).

1005.3 PROGRAMS COORDINATOR

The Programs Coordinator shall be appointed by the Sheriff or the authorized designee and shall be responsible for managing all aspects of the educational and vocational program. Those duties include but are not limited to:

(a) Conducting an annual needs assessment to determine the type of programs needed to serve the incarcerated person population.

(b) Developing the program plans.

(c) Developing or directing the curricula for each educational, vocational, and testing component.

(d) Developing and implementing individualized programs for high-risk or administrative incarcerated persons, as needed.

(e) Coordinating with corrections staff regarding the security issues associated with these programs.

(f) Developing and maintaining records of all needs assessments, all training offered, all incarcerated person attendees, testing records, and class evaluations.

(g) Forecasting the annual cost of the program and coordinating with the budget office to secure funding.

1005.4 COURSE OFFERINGS

Course offerings will be subject to need, available resources, security concerns, available space, and incarcerated person classification, and may include the following:

(a) Basic education, preparation for a high school equivalency credential

(b) English as a second language (ESL)

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(c) Basic literacy

(d) Substance abuse and healthy lifestyles education

(e) Parenting courses

(f) Basic computer instruction

(g) Basic life skills

(h) Vocational skills such as:

1. Cooking and food services
2. Landscaping, horticulture
3. Basic woodworking
4. Auto body and painting
5. Basic auto repair
6. Basic office skills

(i) Other courses as deemed appropriate by the Programs Coordinator

1005.5 OUTREACH

Information about educational opportunities should be included in the general incarcerated person orientation. At a minimum, incarcerated persons should receive instruction on how to request participation in the incarcerated person education programs, along with eligibility requirements and rules for participation.

1005.6 ELIGIBILITY REQUIREMENTS

Educational/vocational programming (other than televised courses) may be offered to sentenced and pretrial persons. The Sheriff shall ensure that there is equal opportunity for participation for incarcerated persons of each gender.

1005.7 INCARCERATED PERSON REQUESTS

Incarcerated persons should be given a form to request participation in the education program. Incarcerated person requests will be forwarded to the Programs Coordinator, who will have the facility classification staff screen and approve the request.

The Programs Coordinator will notify the incarcerated person whether they have been approved for an education program. If approved, the Programs Coordinator will provide instruction to the person on how to access the program services and will notify the affected facility staff about the incarcerated person's scheduled attendance.

Incarcerated persons may also contact the Programs Coordinator at any time and request information regarding educational opportunities by completing and submitting the appropriate request form.

Incarcerated persons have the right to refuse to participate in programs other than work assignments or programs that are required by statute or court order.

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1005.8 SELF-STUDY PROGRAM

Whenever reasonably feasible, the basic educational program may be presented by self study tutoring and videotape programming.

Incarcerated persons admitted into the high-school equivalency preparation program will be issued the necessary books and supplies. Studying will be done throughout the day at scheduled periods when videotape programming is presented on closed-circuit television.

Upon completion of a GED self-study program, the incarcerated person may be given the opportunity to take the high school equivalency preparation credential examination.

1005.9 HIGH-SECURITY/ADMINISTRATIVE SEPARATION INCARCERATED PERSONS

To the extent reasonably practicable, high-security incarcerated persons and those held in administrative separation may receive individual instruction in the form of a correspondence course.

1005.10 REHABILITATION PROGRAM

The Office provides opportunities for rehabilitation programs that are based upon victim and community input and are fashioned in a way that gives the incarcerated person an opportunity to make amends for the harm done.

The Sheriff and the Captain should work with other justice system partners to create such programs and opportunities. Examples include the following:

- Programs designed to deter domestic violence and substance abuse
- Community service, such as supervised public works projects
- Making restitution to victims
- Paying court fines

1005.11 DISCLAIMER

Nothing in this policy is meant to confer a legal right for incarcerated persons to participate in any educational offering. Educational programming is provided at the sole discretion of the Sheriff and the Captain.

1005.12 CLASSROOM USE AND DESIGN

The demographics of the incarcerated person population should always be considered when developing educational and other programs. Incarcerated person classification and separation requirements also need to be considered.

The Captain should encourage and include educators in the setup and design of classrooms that have been identified for incarcerated person education programs. To the extent reasonably possible, in consideration of the space design and the ability to provide adequate security, teachers, education managers, and administrators should be consulted to ensure that their needs are met.

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In addition to the traditional classroom approach to educational programming, there are several other delivery methods. These include independent study and computer education programs.

1005.13 NEW CONSTRUCTION OR RENOVATION

Whenever construction of new facilities is considered, the Captain may include education specialists during the design phase to ensure that the needs of education providers are met with regard to security, sound levels, and educational equipment.

The Captain may seek technical assistance from consultants to school districts that provide education programs in correctional settings. There are also networks of educators who can provide valuable consulting services in order to keep pace with rapidly evolving program and legislative issues that are related to education.

1005.14 POLICY

It is the policy of this office to provide educational and vocational programs to all eligible incarcerated persons subject to schedule, space, personnel, and other resource constraints.

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Commissary Services

1006.1 PURPOSE AND SCOPE

The purpose of this policy is to establish a commissary program that will give incarcerated persons the opportunity to purchase specific items that are not provided to them while in custody.

1006.2 POLICY

It is the policy of this office to provide commissary services so that incarcerated persons who are not on disciplinary restriction and who have funds posted to their incarcerated person accounts may purchase items approved by the Captain (Penal Code § 4025).

1006.3 COMMISSARY MANAGER RESPONSIBILITIES

The Captain shall be responsible for designating a qualified person to act as the Commissary Manager. The Commissary Manager shall be responsible for the accounting and general operation of the commissary, which shall include but is not limited to:

- Maintaining current rules, regulations, and policies of the commissary and ensuring compliance by commissary staff.
- Managing inventory and processing orders in a timely manner.
- Performing weekly audits of high-security items.
- Ensuring that sufficient space is provided either on or off facility property for the storage and processing of commissary orders.
- Ensuring commissary facilities are sanitary and secure.
- Conducting a quarterly inventory of all supplies and immediately reporting any discrepancies to the Captain.
- Ensuring that all incarcerated persons who are approved to purchase commissary items are provided with a printed list of items that are available at local stores if the facility does not operate a commissary.
- To the extent reasonably practicable, ensuring the prices for items offered in the commissary correspond to local retail store prices.

Any commissary inventory or sales issues related to religious diets shall be addressed in the Religious Programs Policy.

1006.4 COMMISSARY ACCOUNTING

The Shift Supervisor shall be responsible for ensuring that all incarcerated persons who have commissary privileges have the opportunity to order and receive commissary items in a timely manner.

All incarcerated persons shall be afforded the opportunity to review an accounting of their money held in their account, including deposits, debits, and commissary goods purchased and received. Any discrepancy of the incarcerated person's funds shall be immediately reported to the

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Commissary Manager. If the Commissary Manager and the involved incarcerated person cannot settle the discrepancy, the Captain shall be notified and the Captain will resolve the discrepancy.

1006.5 INCARCERATED PERSON WELFARE PACKS

The Captain or the authorized designee shall monitor the provision of welfare packs to indigent incarcerated persons. Welfare packs shall include but not be limited to:

(a) At least two postage-paid envelopes and two sheet of paper each week to permit correspondence with family members and friends (see the Mail Policy).

(b) Personal hygiene items, including toothbrush, toothpaste, soap, and other supplies deemed to be appropriate for indigent persons.

The Sheriff may expend money from the Incarcerated Person Welfare Fund to provide indigent incarcerated persons with essential clothing and limited transportation expenses upon release (Penal Code § 4025(i)).

1006.6 ANNUAL AUDIT OF THE COMMISSARY

The Commissary Manager should ensure that an annual audit of the commissary operation is conducted by a certified auditor. The written report prepared by the auditor should be reviewed for accuracy by the Commissary Manager and provided to the Captain.

All surplus funds from the commissary operation should be deposited into the Incarcerated Person Welfare Fund or used in a manner from which the incarcerated persons will benefit. They also may be deposited and used in accordance with expenditures authorized by the board of supervisors. An itemized report on expenditures shall be submitted annually to the board of supervisors (Penal Code § 4025(e)).

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Library Services

1007.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for funding of library services and for providing incarcerated persons access to leisure and legal reading materials.

1007.2 RESPONSIBILITIES

The Captain or the authorized designee is responsible for the administration of the library services and should appoint a capable member to serve as librarian to run the daily library operations. The library services shall include access via paper documents or through electronic media to legal reference materials, current information on community services and resources, and religious, educational, and recreational reading material (15 CCR 1064).

The librarian shall ensure that reading materials are provided to the general housing units and that any member assigned to assist with the delivery of library services has received the appropriate training in facility safety and security practices.

1007.3 LIBRARY FUNDING AND MAINTENANCE

The Captain should ensure that funding is available to operate the library. The Captain may use monies from the Incarcerated Person Welfare Fund to offset the cost of salaries, services, and supplies. The librarian may enlist the assistance of the local public library system and other community organizations to maintain and update the library. Donated books and materials should be screened by the librarian for permissible content and safety prior to being distributed to incarcerated persons.

The Office may reject library materials that may compromise the safety, security, and orderly operation of this facility (see the Mail Policy for examples of materials that may be rejected).

The library shall be operated within the physical, budgetary, and security limits of the existing facility.

Books and other reading material should be provided in languages that reflect the population of the facility.

1007.4 LEISURE LIBRARY MATERIALS

Each incarcerated person is allowed to have no more than two books at any given time. Existing selections must be returned before new books may be selected by an incarcerated person. Incarcerated persons who destroy or misuse books and library materials will be subject to disciplinary action and may be required to pay for the material.

1007.5 LEGAL MATERIALS

All incarcerated persons shall have reasonable access to the legal system, which may include access to legal reference materials. Pro per incarcerated persons shall have priority regarding access to legal publications.

Legal information that may be provided through the library includes but is not limited to:

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- Criminal code sections.
- Copies of criminal and/or civil cases.
- Copies of relevant judicial forms.

Incarcerated persons desiring access to the library or legal publications shall submit a completed legal information request to the housing correctional officer. Only one request per incarcerated person per week is allowed unless the incarcerated person is a court-ordered pro per.

The housing correctional officer will collect completed request forms and deliver them to the librarian. Upon receipt the librarian will time stamp, log, and number the request and arrange for the incarcerated person to have access to the library or to legal research services if they are available and do not conflict with scheduling or security concerns. Records of access to legal materials and whether the requests were fulfilled or denied should be documented each day and maintained in the incarcerated person's file in accordance with established records retention schedules.

Pro per incarcerated persons may keep minimal supplies for their case in their cells (e.g., paper, letters, reference materials), provided they do not create a fire hazard or other safety or security concern.

1007.6 ALTERNATE MEANS OF ACCESS TO LEGAL RESOURCES

Nothing in this policy shall confer a right to access a law library. Unless it is specified by court order, the Sheriff may provide access to legal resources by a variety of means that may include public or private legal research services (e.g., web-based legal resources).

1007.7 POLICY

It is the policy of this facility to operate a library service that provides leisure and legal reading materials to incarcerated persons.

1007.8 ACCESS TO LIBRARY

Access to the incarcerated person library or to library materials shall be based on incarcerated person classification, housing location, and other factors that legitimately relate to maintaining the safety and security of the facility.

Incarcerated persons in disciplinary separation shall have the same access to reading materials and legal materials as the general population unless a restriction is directed by the court.

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Mail

1008.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines for the receipt, rejection, inspection, and sending of incarcerated person mail.

1008.2 POLICY

This office will provide ample opportunity for incarcerated persons to send and receive mail, subject to restriction only when there is a legitimate government interest.

1008.3 MAIL GENERALLY

Incarcerated persons may, at their own expense, send and receive mail without restrictions on quantity, provided it does not jeopardize the safety of staff, visitors, or other incarcerated persons, or pose an unreasonable disruption to the orderly operation of the facility.

However, incarcerated persons are only allowed to store a limited amount of mail in their cells as determined by the Captain. Excess mail will be stored with the incarcerated person's personal property and returned at the incarcerated person's release.

1008.4 CONFIDENTIAL CORRESPONDENCE

Incarcerated persons may correspond confidentially with courts, legal counsel, officials of this office, elected officials, the Department of Corrections, jail inspectors, government officials, or officers of the court. This facility will also accept and deliver a fax or interoffice mail from these entities.

Foreign nationals shall have access to the diplomatic representative of their country of citizenship. Staff shall assist in this process upon request.

Facility staff may inspect incoming confidential correspondence for contraband. Facility staff may inspect outgoing confidential correspondence for contraband before it is sealed, provided the inspection is completed in the presence of the incarcerated person. In the event that confidential correspondence is inspected, staff shall limit the inspection to a search for physical items that may be included in addition to the correspondence and shall not read the content of the correspondence itself (15 CCR 1063(c)).

1008.5 SUSPENSION/RESTRICTION OF MAIL PRIVILEGES

Mail privileges may be suspended or restricted upon approval of the Captain whenever staff becomes aware of mail sent by an incarcerated person that involves (15 CCR 1083(f)):

(a) Threats of violence against any member of the government, judiciary, legal representatives, victims, or witnesses.

(b) Incoming or outgoing mail representing a threat to the security of the facility, staff, or the public.

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The District Attorney or County Counsel should be consulted in cases where criminal charges are considered against an incarcerated person or there is an apparent liability risk to the Office that relates to suspension or restriction of mail privileges.

1008.6 PROCESSING AND INSPECTION OF MAIL BY STAFF

Staff should process incoming and outgoing mail as expeditiously as reasonably possible. All incoming and outgoing mail should be processed within 24 hours and packages within 48 hours. Mail processing may be suspended on weekends, holidays, or during an emergency situation.

Assigned correctional officers should open and inspect all incoming and outgoing general mail of current incarcerated persons. The incoming correspondence may be read as frequently as deemed necessary to maintain security or monitor a particular problem. Mail for incarcerated persons no longer in custody should not be opened.

Outgoing general mail may not be sealed by the incarcerated person and may be read by staff when:

(a) There is reason to believe the mail would:
    1. Interfere with the orderly operation of the facility.
    2. Be threatening to the recipient.
    3. Facilitate criminal activity.
(b) The incarcerated person is on a restricted mail list.
(c) The mail is between incarcerated persons.
(d) The envelope has an incomplete return address.

When mail is found to be inappropriate in accordance with the provisions of this policy or when an incarcerated person is sent material that is not prohibited by law but is considered contraband by the facility, the material may be returned to the sender or held in the incarcerated person's property to be given to the incarcerated person upon release.

Incarcerated persons are allowed to correspond with other incarcerated persons in this jail, as well as other jails or correctional institutions, as long as they pay for the mailing and the mailing is sent and received through the U.S. Postal Service.

Incarcerated persons shall be notified in writing whenever their mail is held or returned to the sender. Mail logs and records, justification of censoring or rejection of mail, and copies of hold or return notices shall be maintained in the incarcerated person's file in accordance with established records retention schedules.

Cash, government checks, and money orders contained in incoming incarcerated person mail shall be removed and credited to the incarcerated person's account. Personal checks may be returned to the sender or held in the incarcerated person's property to be given to the incarcerated person upon release.

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1008.6.1 DESIGNATION OF STAFF AUTHORIZED TO READ MAIL

Only staff members designated by the Captain are authorized to read incoming and outgoing non-confidential mail. These staff members should receive training on legitimate government interests for reading and censoring mail and related legal requirements (15 CCR 1063).

1008.6.2 CENSORSHIP OF INCOMING AND OUTGOING NON-CONFIDENTIAL CORRESPONDENCE

In making the determination of whether to censor incoming non-confidential correspondence, consideration shall be given to whether rejecting the material is rationally related to a legitimate government interest, and whether alternate means of communicating with others is available.

The impact the correspondence may have on other incarcerated persons and jail staff is also a factor. Reasonable alternatives should be considered and an exaggerated response should be avoided; for example, discontinuing delivery of a magazine because of one article.

Outgoing non-confidential correspondence shall only be censored to further a substantial government interest, and only when it is necessary or essential to address the particular government interest. Government interests that would justify confiscation of outgoing mail include:

(a) Maintaining facility security.

(b) Preventing dangerous conduct, such as an escape plan.

(c) Preventing ongoing criminal activity, such as threats of blackmail or extortion, or other similar conduct.

(d) Preventing harassment of those who have requested that no mail be sent to them by the incarcerated person.

Correspondence and material identified for censorship shall be delivered to the Shift Supervisor, who shall make the decision if such mail will be censored.

Notices should be sent to the sender of censored correspondence or publications, even when the sender is the editor or publisher. A single notification may be sent if the publication is received by multiple incarcerated persons.

1008.6.3 DOCUMENTING REJECTED OR CENSORED CORRESPONDENCE

In each case where it is necessary to remove any item, or reject or censor correspondence, a written record must be made of such action, to include:

(a) The incarcerated person name and number.

(b) A description of the mail in question.

(c) A description of the action taken and the reason for such action.

(d) The disposition of the item involved.

(e) Signature of the correctional officer.

(f) Notification to the incarcerated person and sender (unless such notification jeopardizes any investigation or the security of the facility).

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1008.7 BOOKS, MAGAZINES, NEWSPAPERS, AND PERIODICALS

Unless otherwise in conflict with this policy and prohibited by the Captain, incarcerated persons are permitted to purchase, receive, and read any book, newspaper, periodical, or writing accepted for distribution by the U. S. Postal Service (15 CCR 1066(a)).

Publications, magazines, or newspapers shall be accepted only if they are mailed directly from the publisher to a named incarcerated person. A current newspaper in general circulation or other like source, including a non-English alternative shall be made available to interested people (15 CCR 1066(a)).

1008.8 REJECTION OF MAGAZINES AND PERIODICALS

The Office may reject magazines, periodicals, and other materials that may inhibit the reasonable safety, security, and discipline in the daily operation of this facility. Generally, books, newspapers, and magazines are accepted only if they are sent directly by the publisher. Materials that may be rejected include but are not limited to (15 CCR 1066(a)):

- Materials that advocate violence or a security breach.
- Literature that could incite racial unrest.
- Sexually explicit material, including pornographic magazines, nude pictures, or pictures or descriptions of sexually explicit activities.
- Obscene publications or writings and mail containing information concerning where or how such matter may be obtained; any material that would have a tendency to incite murder, arson, riot, violent racism, or any other form of violence; any material that would have a tendency to incite crimes against children; any material concerning unlawful gambling or an unlawful lottery; any material containing information on the manufacture or use of weapons, narcotics, or explosives or any other unlawful activity.
- Material that could lead to sexual aggression or an offensive environment for incarcerated persons.
- Material that could create a hostile or offensive work environment.
- Any material with content that could reasonably demonstrate a legitimate government interest in rejecting the material.

Staff shall notify the Shift Supervisor whenever a decision is made to reject books, magazines, or periodicals. The Captain or the authorized designee will be responsible for making the final decision as to the specific magazines, periodicals, and other materials that will be prohibited within this facility.

Religious texts not supplied by facility-authorized entities may be accepted by the chaplain or other religious volunteer who has received training on facility rules involving contraband, and who has been approved by a supervisor to review such documents for distribution.

1008.9 FORWARDING OF MAIL

Any non-legal mail received for a former incarcerated person should be returned to the sender with a notation that the incarcerated person is not in custody. Obvious legal mail should be forwarded

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to the former incarcerated person's new address if it is reasonably known to the facility. Otherwise, legal mail should be returned to the sender.

1008.10 INDIGENT INCARCERATED PERSONS REQUESTS FOR WRITING MATERIALS

Indigent incarcerated persons shall receive writing materials on a weekly basis, as provided by an approved schedule established by the Captain. Writing materials should include the following (15 CCR 1063):

(a) At least four pre-stamped envelopes for correspondence with family and friends

(b) At least eight sheets of writing paper

(c) One pencil

Indigent incarcerated persons shall receive an amount of pre-stamped envelopes and writing paper sufficient to maintain communication with courts, legal counsel, officials of this office, elected officials, jail inspectors, government officials, and officials of the Board of State and Community Corrections. There shall be no limitation on the number of postage-paid envelopes and sheets of paper permitted for correspondence to the indigent incarcerated person's attorney and to the courts (15 CCR 1063(e)).

Requests shall be screened and granted based on need by the Programs Coordinator. Incarceratedpersons should not be permitted to maintain an excess supply of writing materials without the approval of a supervisor.

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Telephone Access

1009.1 PURPOSE AND SCOPE

This policy establishes guidelines for permitting incarcerated persons to access and use telephones.

1009.2 POLICY

The Jail will provide access to telephones for use by incarcerated persons consistent with federal and state law. The Captain or the authorized designee shall develop written procedures establishing the guidelines for access and usage (15 CCR 1067). All incarcerated persons will be provided a copy of the telephone usage rules as part of their incarcerated person orientation during the booking process.

1009.3 PROCEDURE

Incarcerated persons housed in general population will be permitted reasonable access to public telephones at scheduled times in the dayrooms for collect calls unless such access may cause an unsafe situation for the facility, staff, or other incarcerated persons. The Captain shall ensure a notice is conspicuously posted near the phones, informing incarcerated persons that non-attorney calls may be monitored and recorded.

Incarcerated persons are not permitted to receive telephone calls. Messages will only be delivered in the event of a verified emergency.

In the event of a facility emergency, or as directed by the supervisor or the Captain, all telephones will be turned off.

For security reasons, incarcerated persons who are awaiting transport to another facility or release to another agency are not permitted to use the telephones.

Teletypewriter or other communication devices (e.g., videophones, third-party communications assistant) will be made available to persons who are known to have, or are perceived by others as having, hearing or speech impairments to allow them equivalent telephone access as those without these disabilities (15 CCR 1067).

The minimum time allowed per call should be 10 minutes, except where there are substantial reasons to justify such limitations. Reasons for denial of telephone access shall be documented and a copy placed into the incarcerated person's file. The rules governing the use of the telephone will be provided topersons during orientation and posted near the telephones.

The staff should monitor the use of public telephones to ensure incarcerated persons have reasonable and equitable access and that the rules of use are observed. Any incarcerated persons refusing to cooperate with the telephone rules may have their call terminated, telephone privileges suspended, and/or incur disciplinary action.

Requirements relating to the use of telephones during booking and reception are contained in the Reception Policy.

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1009.4 USE OF TELEPHONES IN HIGH-SECURITY OR ADMINISTRATIVE SEPARATION HOUSING

Incarcerated persons who are housed in high-security or administrative separation may use the public telephones in the dayroom during the time allocated for that classification of incarcerated person to utilize that space. If portable telephones are available in the facility,persons who are housed in high-security or administrative separation units may have reasonable access to the portable telephones.

1009.5 COURT-ORDERED TELEPHONE CALLS

If a court order specifying free telephone calls is received by the facility, or a supervisor determines there is a legitimate need for a free telephone call for a specific incarcerated person, the supervisor may direct that a person use a facility telephone at no charge. Calls placed from a facility telephone should be dialed by a staff member. The staff shall be responsible for ensuring that the incarcerated person is not calling a number that has been restricted by a court order or by request of the recipient. Such a call shall be recorded to the same extent authorized for calls that are not court-ordered.

1009.6 ATTORNEY-CLIENT TELEPHONE CONSULTATION

At all times through the period of custody, whether the incarcerated person has been charged, tried, convicted, or sentenced, reasonable and non-recorded telephone access to an attorney shall be provided to theperson at no charge to either the attorney or to the incarcerated person, in accordance with the Access to Courts and Counsel Policy.

1009.7 TELEPHONE CONTRACTS AND CHARGES

The Captain or the authorized designee is responsible for ensuring that rates charged to incarcerated persons are similar to those charged to the general public and that incarcerated persons are afforded a range of feasible calling options.

1009.8 FOREIGN NATIONALS

A foreign national who has been detained may contact their consulate via the public phones provided for incarcerated persons. If the consulate does not accept collect calls, the foreign national shall be allowed to make a reasonable number of direct calls to establish communication with the consulate.

Consular officers who contact the jail to speak with a foreign national to provide consular services should be given reasonable telephone access to the incarcerated person.

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Visitation

1010.1 PURPOSE AND SCOPE

The purpose of this policy is to establish rules for visitation and to provide a process for incarcerated person visits and visitors. Visitation is a privilege and is based on space availability, schedules, and on-duty staffing.

1010.1.1 DEFINITIONS

Definitions related to this policy include (Penal Code § 4032):

In-person visit - An on-site visit that may include barriers. In-person visits include interactions in which an inmate has physical contact with a visitor, the inmate is able to see a visitor through a barrier, or the inmate is otherwise in a room with a visitor without physical contact. “In-person visit” does not include an interaction between an inmate and a visitor through the use of an on-site two-way audio/video terminal.

Video visitation - Interaction between an inmate and a member of the public through the means of an audio-visual communication device when the member of the public is located at a local detention facility or at a remote location.

1010.2 POLICY

It is the policy of the Tehama County Sheriff's Office to allow incarcerated person visitation, including video visitation when applicable, as required by law.

1010.3 PROCEDURES

The Office shall provide adequate facilities for visiting that include appropriate space for the screening and searching of incarcerated persons and visitors and storage of visitors' personal belongings that are not allowed in the visiting area.

The Captain shall develop written procedures for incarcerated person visiting, which shall provide for as many visits and visitors as facility schedules, space, and number of personnel will reasonably allow, with no fewer visits allowed than specified by 15 CCR 1062 per week, by type of facility. The procedures are subject to safety and security requirements and should consider:

- The facility's schedule.
- The space available to accommodate visitors.
- Whether an emergency or other conditions justify a limitation in visiting privileges.
- Video visitation if applicable (Penal Code § 4032; 15 CCR 1062).

The visiting area shall accommodate incarcerated persons and visitors with disabilities. Visitors with disabilities who request special accommodations shall be referred to a supervisor. Reasonable accommodations will be granted to incarcerated persons and disabled visitors to facilitate a visitation period.

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Visitor logs and records shall be developed and maintained in accordance with established records retention schedules.

Court orders granting a special incarcerated person visitation are subject to county legal review and interpretation.

1010.3.1 VISITOR REGISTRATION AND IDENTIFICATION
All visitors must register and produce a valid state, military, tribal, or other government identification. Identification will be considered valid for 90 days after expiration, provided the visitor has renewed the ID and has proof of the renewal.

(a) The registration form must include the visitor's name, address, and the relationship to the incarcerated person.

(b) A valid identification shall include the following:

1. A photograph of the person

2. A physical description of the person

(c) An official visitor shall present proof of professional capacity. For example, attorney license/Supreme Court card, law enforcement identification, or a business card/ letterhead of the business with the visitor's name.

Failure or refusal to provide a valid identification is reason to deny a visit.

1010.3.2 VIDEO VISITATION NOT TO REPLACE IN-PERSON VISITATION
The Office may not substitute video visitation for in-person visitation to meet the requirements of 15 CCR 1062.

1010.4 AUTHORIZATION TO SEARCH VISITORS

Individuals who enter the secure perimeter of this facility are subject to search if there is reasonable cause to believe the visitor has violated the law, is wanted by a law enforcement agency, or is attempting to bring contraband onto the facility property or into the facility. All searches shall be made in accordance with current legal statutes and case law.

The area designated for a visitor to be searched prior to visiting with an incarcerated person shall have a notice posted indicating that any cellular telephone, wireless communication device, or any component thereof shall be confiscated for the period of the visitation and returned to the visitor upon departure from the facility (Penal Code § 4576(b)(3)).

1010.5 VISITING SCHEDULE

The Captain shall designate a person to develop a schedule for incarcerated person visitation that includes daytime, evening, and weekend hours. Each incarcerated person shall receive a copy of the visitation schedule in the incarcerated person handbook at orientation. The visiting hours will also be posted in the public area of the facility.

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1010.6 DENIAL OR TERMINATION OF VISITING PRIVILEGES

The Captain or the authorized designee is responsible for defining, in writing, the conditions under which visits may be denied.

Visitation may be denied or terminated by a supervisor if the visitor poses a danger to the security of the facility or there is other good cause (15 CCR 1062). Danger to the security of the facility or other good cause includes but is not limited to the following:

(a) The visitor appears to be under the influence of drugs and/or alcoholic beverages.

(b) The visitor refuses to submit to being searched.

(c) The visitor or incarcerated person violates facility rules or posted visiting rules.

(d) The visitor fails to supervise and maintain control of any minors accompanying the visitor into the facility.

(e) Visitors attempting to enter this facility with contraband will be denied a visit and may face criminal charges.

Any visitation that is denied or terminated early, on the reasonable grounds that the visit may endanger the security of the facility, shall have the actions and reasons documented. A copy of the documentation will be placed into the incarcerated person's file and another copy will be forwarded to the Captain (15 CCR 1062).

1010.7 GENERAL VISITATION RULES

All visitors and incarcerated persons will be required to observe the following general rules during visitation:

(a) A maximum of two adults and two children will be permitted to visit an incarcerated person at any one time. Children visiting incarcerated persons must be deemed age appropriate by the parent or guardian accompanying the child. Where a dispute over children visiting occurs between the incarcerated person and the parent or legal guardian, the incarcerated person will be advised to use the court for resolution. Adults must control minors while they are waiting to visit and during the visit.

(b) An incarcerated person may refuse to visit with a particular individual.

(c) Those incarcerated persons who are named as the restrained person in any restraining or other valid court order shall not be allowed visits from persons who are protected by the order.

(d) Visitors must be appropriately attired prior to entry into the visitor's area of the jail.

(e) Inappropriate clothing, such as transparent clothing, halter-tops, excessively tight or revealing clothing, hats and bandannas, or any other clothes associated with a criminal gang or otherwise deemed by the staff to be unacceptable, will not be permitted.

(f) All visitors must have footwear.

(g) Visitors will leave all personal items, with the exception of car keys and identification, outside of the secure area. Visitors who enter the jail with handbags, packages, or

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other personal items will be instructed to lock the items in a vehicle or locker or return at another time without the items. The jail is not responsible for lost or stolen items.

(h) Food or drink is not permitted in the visiting area.

(i) Incarcerated persons will be permitted to sign legal documents, vehicle release forms, or any other items authorized by the Shift Supervisor. Transactions of this nature will not constitute a regular visit.

1010.8 SPECIAL VISITS

The Shift Supervisor may authorize special visitation privileges, taking into consideration the following factors:

- The purpose of the visit
- The relationship of the visitor to the incarcerated person
- The circumstances of the visit
- Distance traveled by the visitor

Whenever a special visit is denied, an entry into the duty log will be made. The entry will include the requesting visitor's name and the reason why the visit was denied.

1010.9 ATTORNEY VISITS

Incarcerated persons shall have access to any attorney retained by or on behalf of the incarcerated person, or to an attorney the incarcerated person desires to consult, in a private interview room. Staff shall not interfere with, suspend, or cancel official visits except in circumstances where the safety, security, or good order of the jail is compromised (see the Access to Courts and Counsel Policy).

1010.10 CONSULAR VISITS

The Captain or the authorized designee should facilitate visitor access between a detained foreign national and a consular officer when requested by the detainee or consular officer. Additionally, access should also be facilitated when a consular officer requests to visit with a detained foreign national in cases where the detainee does not want a visit.

A foreign national should be allowed to visit with a consular officer in a private interview room. Members should not interfere with, suspend, or cancel official consular visits except in circumstances where the safety, security, or good order of the jail is compromised.

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Resources for Released Persons

1011.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the process of providing community resource information to any incarcerated person who is due for release after serving at least 30 days, in order to assist with the transition back into the community.

1011.2 COMMUNITY RESOURCES

The information packet with community resources should contain, at a minimum, the contact information for the following organizations and resources:

- Community health centers
- Employment centers
- Registry office to obtain an identification card
- Substance abuse and mental health providers
- Housing agencies
- Education agencies

Subject to the approval of the Sheriff or the Jail Commander, the staff or community providers may offer classes within the facility that are related to these community services.

Upon request, the office will provide the verification needed for a replacement California identification card, if applicable (Vehicle Code § 14902(g)).

1011.3 POLICY

It is the policy of this office that all incarcerated persons who have served at least 30 days shall be provided with an information packet containing community resources prior to their release.

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Therapeutic Community Treatment

1012.1 PURPOSE AND SCOPE

This office seeks to provide treatment services for incarcerated persons with substance abuse problems, including the provision of services for post-release continuity of care and support in the community.

1012.2 ELIGIBILITY

The Sheriff should designate a supervisory member of the facility as the director of the therapeutic community treatment program, which includes substance abuse programs. The director, in cooperation with all custody personnel, the local alcohol and drug treatment centers, mental health authorities, schools, probation departments, and courts will identify and monitor those incarcerated persons who have been placed into, or are eligible to be placed into, a therapeutic community treatment program.

Eligibility for participation will be based upon the following:

(a) Substance abuse use or history

(b) Positive drug screen on commitment

(c) Willingness to voluntarily commit to the program

(d) A mental health diagnosis that indicates suitability for participation

Each program applicant will be screened for mental health concerns and must be cleared for participation by the mental health staff.

1012.2.1 REFERRAL TO THE THERAPEUTIC COMMUNITY TREATMENT PROGRAM

Incarcerated persons may be referred to the therapeutic community treatment program through the program director, in consultation with qualified health care professionals, or by a recommendation of the courts.

1012.2.2 SCREENING PROCESS

Initial screening with the applicant will include:

(a) A description of the program and its rules and procedures, such as assessments, alcohol and drug testing, and the responsibilities of the applicant.

(b) A review of the applicant's history to determine referral needs.

(c) Program objectives and goals as identified in an individualized treatment plan.

(d) Other assessments as determined by the program director.

1012.3 PROGRAM OBJECTIVES

The objectives of this program are:

(a) To provide diagnosis and treatment plans, establish goals and objectives for the incarcerated person, provide education and counseling, prevent relapse, and provide discharge planning and transition services.

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(b) To provide a structured program to identify physical, social, medical, mental health, community, and spiritual needs.

(c) To provide linkage to community-based programs upon the incarcerated person's return to the community.

1012.4 RESPONSIBILITIES OF THE DIRECTOR

The director of the program shall institute a procedure to assist in the treatment of incarcerated persons and will provide information related to the following:

(a) A diagnosis of the incarcerated person

(b) Individual treatment and counseling plans

(c) Education for substance abuse

(d) Post-release activities and education

(e) Treatment objectives

(f) The utilization of self-help groups

(g) Pre-release support services

(h) Connections with community support and treatment services

1012.5 PROGRAM PARTICIPATION

The therapeutic community treatment program is voluntary; participants must consent to program treatment services in advance of receiving the service. This program is focused on providing participants with the necessary knowledge, insight, and skill for successful reentry into the community.

1012.6 DRUG AND ALCOHOL TESTING

Program participants are expected to submit to random urinalysis. Failure to submit or a positive reading will result in termination from the program and possible disciplinary action.

1012.7 PROGRAM INCENTIVES

The director will develop program incentives designed to support and encourage success on the part of program participants. Incentives can include but are not limited to:

(a) Certificates of completion for satisfactory completion of the program.

(b) Separate housing for program participants.

(c) Early release from custody, if authorized by the sentencing court.

1012.8 TERMINATION FROM THE PROGRAM

Termination from the program may occur for the following reasons:

(a) A participant's failure to comply with the responsibilities of the program is grounds for dismissal by the director at any point during the course of the program.

(b) A participant may withdraw from the program by notifying any staff person verbally or in writing.

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(c) A participant may be terminated for any major institutional disciplinary violation if it is determined that the incarcerated person is no longer suitable for participation in the program.

1012.9 POLICY

It is the policy of the Office to provide services in cooperation with a therapeutic community treatment program, which supports the mission of public safety and community reintegration through evidence-based assessment, treatment, and aftercare services.

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Work Release Program

1014.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Work Release Program. The Work Release Program allows incarcerated persons to maintain employment, support families, and facilitate a successful return to the community.

1014.2 POLICY

It is the policy of this office to operate a voluntary Work Release Program to provide incarcerated persons with opportunities to secure or maintain employment, support families, assist in the payment of fines and penalties to the court, and promote a successful return to the community (Penal Code § 4024.2(a)).

Release programs shall be conducted in accordance with state and local guidelines. In cases of pretrial release, the courts may have jurisdiction over release decisions.

1014.3 WORK RELEASE PROGRAM

Any incarcerated person who has met the eligibility requirements and received approval may be granted permission to leave the facility to work at the person's place of employment in accordance with state and local guidelines, court orders, and the provisions of this policy.

The Captain or the authorized designee has sole authority to approve participation in the program and is responsible for the overall administration of the Work Release Program.

The Work Release Program participants are limited to geographic restrictions of the facility and must remain within state boundary lines unless otherwise ordered by the sentencing court.

1014.3.1 ELIGIBILITY

In order to be eligible for the Work Release Program, an incarcerated person must meet the following requirements:

- Sentenced directly to work release programs by the court
- No documented disciplinary incidents
- No outstanding warrants, wants, or detainers

Incarcerated persons who do not adhere to the rules of the program will be subject to removal from the program and to disciplinary and criminal action in accordance with the rules of the facility and applicable laws.

1014.3.2 STAFF RESPONSIBILITY

The Work Release Program staff is responsible for contacting the employer prior to authorizing the work assignment. The staff should inform the employer and the incarcerated person of the rules and expectations for program participants.

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The program staff shall provide each employer with the facility's contact information, including the contact person and telephone number, and instruct the employer to notify the contact person immediately if an incarcerated person does not report to work, leaves prior to the scheduled departure time, or if any concerns arise during the work shift. The facility should provide a contact person who is available 24 hours a day, seven days a week, as some incarcerated persons will work evening or overnight shifts.

1014.3.3 HOUSING

Incarcerated persons participating in the Work Release Program should be housed in an area other than general population housing to reduce the possibility of contraband entering the facility.

Incarcerated persons in the program may either return to separate housing within the facility's secure perimeter or may be housed in a residential facility outside the secure perimeter. Factors to consider when determining appropriate housing for program participants include the following:

- Rated bed capacity of the facility
- Current occupancy
- Housing options and security capabilities outside the secure perimeter of the facility
- Number of incarcerated persons approved to participate in the program

1014.3.4 DAILY WORK ITINERARIES

Incarcerated persons must have an approved daily work itinerary prior to leaving the facility. The itinerary should include the following:

- Scheduled start and stop times for work
- Anticipated amount of travel time between the facility and the employer, each way
- Mode of transportation each way (e.g., bus, car, walk)
- Location of the workplace
- Contact name, address, and telephone number of the employer
- Contact name, telephone number, and driver's information of the transport person if the incarcerated person does not have a valid license
- Contact name and telephone number of the on-duty program staff member

Any change to the itinerary (e.g., overtime, location of the workplace, transportation) must be approved in advance by the Captain or the authorized designee.

1014.3.5 FINANCIAL MANAGEMENT

All incarcerated persons who participate in the Work Release Program shall ensure that the appropriate funds are deposited into their incarcerated person accounts. Funds from the incarcerated person accounts will be subtracted for room and board, program drug testing, booking fees, etc. Fines to the court, victim restitution, allowances to help pay family financial obligations,

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and funds for a savings account may also be taken from the account with the permission of the incarcerated person or by order of the court.

1014.3.6 EMPLOYER VERIFICATION
The Work Release Program staff shall make scheduled telephone calls and random site visits to the incarcerated person's employer to ensure compliance with the rules of the program.

1014.3.7 PROGRAM CONFLICTS
The Work Release Program staff shall make every attempt to ensure the incarcerated person's work schedule does not conflict with their required participation in treatment programs at the facility.

1014.3.8 DRUG TESTING
Random and scheduled drug testing shall be conducted on all incarcerated persons participating in the Work Release Program. Any positive results may cause the incarcerated person's disqualification from the program, as well as disciplinary sanctions or criminal charges, if warranted.

1014.3.9 ADMINISTRATIVE REMOVAL
An incarcerated person may be administratively removed from the program for the safety and well-being of the person, the staff, the program, the facility, and/or the general public. Such removal shall be subject to review by the Captain or the authorized designee on the next business day (15 CCR 1054).

1014.4 RECORDS

The following records shall be maintained by the Captain or the authorized designee on all incarcerated persons participating in the Work Release Program:

(a) All payments and accounting associated with the Work Release Program

(b) All contacts between the staff and employers prior to releasing incarcerated persons to work and confirming all employment information

(c) All daily logs of time worked and payments received

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Incarcerated Person Work Program

1015.1 PURPOSE AND SCOPE

The purpose of this policy is to establish the guidelines and requirements for the Incarcerated Person Work Program. The Incarcerated Person Work Program allows incarcerated persons to improve and/or develop useful job skills, work habits, and experiences that will facilitate a successful transition back to the community.

1015.2 POLICY

The Tehama County Sheriff's Office shall operate an Incarcerated Person Work Program in accordance with all applicable federal, state, or local work safety laws, rules, and regulations, and to the extent that the operation of incarcerated person work programs do not pose a risk to the safety of the staff, other incarcerated persons, or the public. This policy establishes the requirements, selection process, supervision, and training of persons prior to and after entering the facility's Incarcerated Person Work Program.

1015.3 WORK CRITERIA

1015.3.1 SENTENCED INCARCERATED PERSON WORK REQUIREMENTS

All sentenced incarcerated persons who are physically and mentally able should work. Incarcerated persons shall not be required to perform work that exceeds their physical limitations. Incarcerated persons may be excused from work in order to maintain their participation in an educational, vocational, drug abuse treatment, or other program. The Office will abide by all laws, ordinances, and regulations when using incarcerated persons to work in the facility.

1015.3.2 PRETRIAL AND UNSENTENCED INCARCERATED PERSON WORK REQUIREMENTS

Pretrial and unsentenced incarcerated persons may volunteer to participate in the Incarcerated Person Work Program but shall not be required to participate in work beyond maintaining the immediate living area.

1015.4 INCARCERATED WORKER SELECTION

The Incarcerated Person Work Program Coordinator shall be responsible for the selection and assignment of incarcerated persons to the various work assignments. The coordinator should solicit input from other custody staff in assisting with incarcerated person selection and assignment. Staff shall take into consideration the following eligibility criteria:

(a) Incarcerated persons who have posed a threat in the past or have been charged with escape should be carefully screened for incarcerated person work projects.

(b) The incarcerated person's charges and classification are such that the person will not pose a security risk to other incarcerated persons, staff, or the public.

(c) The incarcerated person's capacity to perform physical tasks, including which tasks can be performed by the incarcerated person while pregnant, will match the job requirements.

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(d) The incarcerated person is able to learn the necessary work routines.

(e) The special interests, abilities, craft, or trade of the incarcerated person will benefit the work assignment.

Incarcerated persons must be able to pass a health screening test in accordance with the policies contained in this manual, and must meet all statutory and regulatory requirements. Health-screening shall be done for persons who work in the kitchen, around food products, or who serve meals to the incarcerated person population.

1015.5 COMMUNITY SERVICE PROGRAM

Sentenced incarcerated persons may be assigned to public works projects with state, municipal, and local government agencies, or to community service projects, with the approval of the Sheriff and in accordance with all applicable laws and regulations.

Assigning incarcerated persons to activities that benefit individuals, businesses or other private entities that are not considered a public works project is prohibited and may constitute a violation of the law.

1015.5.1 PROGRAM GUIDELINES

Any community service program is subject to the approval of the Captain or the authorized designee.

Any such program shall be subject to the following guidelines:

(a) The program complies with all statutes, ordinances, regulations, labor agreements, permissions, or restrictions relating to incarcerated persons whenever they are assigned to public works and community service projects.

(b) There are incarcerated persons available who, as a matter of classification, are deemed eligible for participating in the community service programs. Only incarcerated persons who are classified as minimum custody shall be assigned outside the secure perimeter.

(c) The number of work opportunities available in the community will determine the availability of opportunities to participate in the community service program.

(d) Staff assigned to manage the program should strive to develop work assignments that give incarcerated persons an opportunity to develop good work habits and attitudes that can be applied to jobs obtained after release.

(e) Victim and community input should be solicited and considered when developing community service programs.

(f) Poor performance in the work program or violating rules may render the incarcerated person ineligible to participate in the work program. Any violation of work rules may result in disciplinary action that may include the loss of credits previously awarded for good behavior and work time. Incarcerated persons who do not comply with program rules, or for any reason cannot work, will be reclassified in accordance with the policies and procedures of the Tehama County Sheriff's Office.

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1015.5.2 COMMUNITY WORK SELECTION PROCESS

Participation in any community service program is strictly voluntary. A classification process that clearly describes the criteria for program participation will be developed by the supervisor in charge of the program.

Any incarcerated person desiring to participate in the community service program is subject to the following:

(a) The incarcerated person must submit to a screening process, including a criminal history check, to ensure that their criminal history is compatible with work in non-secure areas.

(b) The incarcerated person must agree in writing to participate in the community service program.

Incarcerated persons may be charged a fee for participating in the program in order to offset the cost of administration and staffing.

1015.6 PROHIBITION OF NONPUBLIC WORK PROJECTS

Work projects on behalf of any private individual or to an individual's private property are strictly prohibited and may constitute a violation of the law.

1015.7 SUPERVISION OF INCARCERATED WORKERS

Facility staff in charge of work programs or who provide supervision of incarcerated persons assigned to work crews should adhere to the following:

(a) Incarcerated workers should be provided with safety equipment, clothing, and footwear commensurate with the work performed. Safety equipment may include but is not limited to eye protection, gloves, hardhat or headwear, and sunscreen for protection from sun exposure.

(b) Work periods shall not exceed 10 hours per day.

(c) Incarcerated workers should be provided with work breaks to allow them to take care of personal needs.

(d) Incarcerated workers shall have access to nutritious meals and a reasonable amount of time to consume those meals during their work period.

(e) Incarcerated persons who work shifts during the early morning or late-night hours should be provided with quiet space to allow for sleep during daytime hours.

(f) Incarcerated workers shall not access incarcerated person records, incarcerated person monies, or commissary.

(g) Incarcerated workers shall not participate in the maintenance of locking systems or other security detention devices.

(h) The incarcerated person workday approximates the workday in the community.

(i) Incarcerated person performance is regularly evaluated and recorded.

(j) Incarcerated persons receive written recognition of the competencies they acquire.

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Incarcerated workers shall be under the direct supervision of the facility staff at all times and shall not be supervised by other incarcerated persons when they are on assignment through the Incarcerated Person Work Program.

Persons who are responsible for the supervision of incarcerated persons on work crews should receive training in basic areas of safety, security, and reporting procedures.

Disciplinary action for incarcerated worker misconduct shall adhere to the Discipline Policy.

1015.8 INCARCERATED WORKER TRAINING

Incarcerated persons who are assigned to work in any area that may require the handling of any chemicals or the use of any equipment shall receive training from the respective office supervisor prior to using the chemicals or equipment. Work-crew supervisors shall also train incarcerated workers on safety practices. Incarcerated persons should never be assigned to handle dangerous chemicals or equipment that normally require a level of expertise and competency beyond their demonstrated ability.

1015.9 INCARCERATED WORKER INCENTIVES

The Captain is responsible for establishing an incentive program for incarcerated persons assigned to the Incarcerated Person Work Program. Incentives for incarcerated persons may include:

(a) Granting "Good Time and Work" credits to apply to their sentence as allowed by state or local law.

(b) Using credits for sentence reduction when allowed by statute.

(c) Granting distinctive housing assignments, extra privileges, recreation, and special rewards, as allowed by law regulation and policy. Welfare funds may be used to offset the cost of a reward program.

(d) Awarding certificates of achievement for successful completion of vocational, educational, and/or work programs.

(e) When allowed by law, ordinance, and in consideration with local labor relations, giving monetary compensation for work on government projects.

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Religious Programs

1016.1 PURPOSE AND SCOPE

This policy provides guidance regarding the right of incarcerated persons to exercise their religion and for evaluating accommodation requests for faith-based religious practices of incarcerated persons (15 CCR 1072).

1016.1.1 DEFINITIONS

Definitions related to this policy include:

Compelling government interest - A method for determining the constitutionality of a policy that restricts the practice of a fundamental right. In order for such a policy to be valid, there must be a compelling government interest, which is necessary or crucial to the mission of the Office, as opposed to something merely preferred, that can be furthered only by the policy under review.

Least restrictive means - A standard imposed by the courts when considering the validity of policies that touch upon constitutional interests. If the Office adopts a policy that restricts a fundamental religious liberty, it must employ the least restrictive measures possible to achieve its goal.

Religious exercise - Any exercise of religion, whether or not it is compelled by, or central to, a system of religious belief. The key is not what a faith requires but whether the practice is included in the incarcerated person's sincerely held religious beliefs.

Substantial burden - For the purposes of this policy, substantial burden means either of the following:

- A restriction or requirement imposed by the Office that places an incarcerated person in a position of having to choose between following the precepts of the person's religion and forfeiting benefits otherwise generally available to other incarcerated persons, or having to abandon one of the precepts of their religion in order to receive a benefit.
- The Office puts considerable pressure on an incarcerated person to substantially modify the person's behavior in violation of their beliefs.

1016.2 POLICY

It is the policy of this office to permit incarcerated persons to engage in the lawful practices and observances of their sincerely held religious beliefs consistent with the legitimate governmental objectives of the facility.

1016.3 CHAPLAIN

The Sheriff shall appoint an individual to serve as the chaplain for the facility. The chaplain shall be responsible for assisting the Captain with supervising, planning, directing, and coordinating religious programs. The chaplain may be responsible for duties including but not limited to:

(a) Coordinating religious services.

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(b) Maintaining a list of accepted religious practices that have been approved by the Captain and ensuring the current list is available to the staff.

(c) Reviewing requests for religious accommodations.

(d) Providing or arranging for grief counseling for incarcerated persons.

(e) Distributing a variety of religious texts.

(f) Developing and maintaining a liaison with a variety of religious faiths in the community.

(g) Making reasonable efforts to enlist religious leaders from outside the community as necessary.

(h) Seeking donations for religious programs from the community, when appropriate.

(i) Working with incarcerated person families when requested.

(j) Periodically surveying the facility population to assist in determining whether current resources are appropriate for the incarcerated person population.

(k) Providing guidance to the Sheriff and the Captain on issues related to religious observance.

1016.4 RELIGIOUS BELIEFS AND ACCOMMODATION REQUESTS

Incarcerated persons are not required to identify or express a religious belief. An incarcerated person may designate any belief, or no belief, during the intake process and may change a designation at any time by declaring the person's religious belief in writing to the chaplain. Incarcerated persons seeking to engage in religious practices shall submit a request through the established process. Requests to engage in practices that are on the facility's list of accepted practices should be granted. Requests to engage in religious practices that are not on the approved list shall be processed as provided in this policy.

All requests for accommodation of religious practices shall be treated equally, regardless of the religion that is involved. Equal and consistent treatment of all religions and religious beliefs shall not always require that all incarcerated persons of the same religion receive the same accommodations. Requests for accommodation of religious practices shall be submitted to a supervisor. In determining whether to grant or deny a request for accommodation of a religious practice, the supervisor will work with the chaplain to determine the sincerity of the religious claim of an incarcerated person. Requests should be denied only if the denial or reason for denial would further a compelling interest of the facility and is the least restrictive means of furthering that compelling interest.

A supervisor who does not grant the accommodation, either in part or in full, should promptly forward the request to the Captain, who, after consultation with legal counsel as appropriate, should make a determination regarding the request within 10 days following the incarcerated person's request.

A Captain who does not grant an accommodation, either in part or in full, should forward the request to the Sheriff with the basis for the denial within 14 days of the incarcerated person's

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original request being made. The Sheriff or the authorized designee will review the denial and respond to the requesting incarcerated person as soon as reasonably practicable.

The Captain and the Sheriff shall be informed of all approved accommodations. The chaplain should make any necessary notifications to staff as necessary to meet an approved accommodation.

All incarcerated person requests for religious accommodations and related determinations shall be fully documented in the person's record.

1016.4.1 SUSPENSION OR REVOCATION OF ACCOMMODATIONS

In an emergency or extended disruption of normal facility operations, the Captain may suspend any religious accommodation. The Captain may also revoke or modify an approved religious accommodation if the accommodated incarcerated person violates the terms or conditions under which the accommodation was granted.

1016.4.2 APPEALS OF SUSPENSION OR REVOCATION OF ACCOMMODATIONS

Incarcerated persons may appeal the Captain's denial, suspension, or revocation of an accommodation through the appeal process.

1016.4.3 ACCOMMODATION REQUESTS REGARDING GROOMING, RELIGIOUS CLOTHING, AND HEADWEAR

Individuals in custody have the right to a religious accommodation with respect to grooming, religious clothing, and headwear in observance of their sincerely held religious belief, at all times and throughout the jail, except if in furtherance of a compelling governmental interest regarding security that may impact the jail, staff, the individual, or others in custody. Religious grooming, clothing, and headwear accommodations shall only be denied when doing so would be the least restrictive means of furthering these governmental interests (Penal Code § 2607). (See the Reception Policy.)

1016.5 DIETS AND MEAL SERVICE

The Captain should provide incarcerated persons requesting a religious diet, including fasting and/or hour of dining, a reasonable and equitable opportunity to observe their religious dietary practice. This should be done within budgetary constraints and be consistent with the security and orderly management of the facility. The chaplain shall provide a list of incarcerated persons authorized to receive religious diets to the food services manager. The food services manager shall establish a process for managing religious meal accommodations.

1016.6 HAIRSTYLES AND GROOMING

Unless it is necessary for the health and sanitation of the facility, incarcerated persons who wear head and facial hair in the observance of their religion will generally not be required to shave or cut their hair. To the extent reasonably practicable, alternative housing may be considered to accommodate the need for religious hair and grooming, while meeting the health and sanitation needs of the facility (Penal Code § 2607).

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Any incarcerated person whose appearance is substantially altered due to changes in facial hair or hair length may be required to submit to additional identification photographs.

1016.7 RELIGIOUS TEXTS

Religious texts should be provided to the requesting incarcerated person, if the texts available do not pose a threat to the safety, security, and orderly management of the facility.

1016.8 UNAUTHORIZED PRACTICES OR MATERIAL

The following list, which is not intended to be exhaustive, includes materials or practices that shall not be authorized:

(a) Animal sacrifice

(b) Language or behaviors that could reasonably be construed as presenting a threat to facility safety or security

(c) Self-mutilation

(d) Use, display, or possession of weapons

(e) Self-defense or military training

(f) Disparagement of other religions

(g) Nudity or sexual acts

(h) Profanity

(i) Use of illegal substances or controlled substances without a prescription

1016.9 GROUP RELIGIOUS SERVICES

Group religious services may be allowed after due consideration of the incarcerated person's classification or other concerns that may adversely affect the order, safety, and security of the facility.

Alternatives to attendance of group religious services may include but are not limited to:

- The provision of religious books and reading materials.
- Access to religious counselors.
- Recorded religious media (e.g., DVDs, CDs, video tapes).

1016.10 RELIGIOUS SYMBOLS AND IMPLEMENTS

Religious symbols and implements used in the exercise of religion should generally be allowed unless the symbol or implement poses a threat to the safety and security of the facility. Alternatives to the provision of religious symbols and implements may be considered when security, safety, or efficient operations may be jeopardized (e.g., substitution of a towel in lieu of a prayer rug).

1016.11 RELIGIOUS GARMENTS AND CLOTHING

Incarcerated persons who practice a religion that requires particular modes of dress, garments, headgear, etc., other than standard-issue clothing, should generally be accommodated subject to

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the need to identify incarcerated persons and maintain security (Penal Code § 2607). (See the Reception Policy for additional guidance.)

Head coverings shall be searched before being worn in the housing areas of the facility and shall be subject to random searches for contraband. Personal head coverings should be exchanged in favor of office-supplied head coverings when available and appropriate.

Incarcerated persons wearing headscarves or other approved coverings shall not be required to remove them while in the presence of or while visible to the opposite gender, if they so desire. Religious garments that substantially cover the person's head and face shall be temporarily removed during the taking of booking and identification photographs.

To the extent reasonably practicable, alternative housing may be considered to accommodate an incarcerated person's need for religious attire, while meeting the security needs of the facility.

1016.12 FAITH- AND MORALS-BASED COUNSELING

The Captain shall be responsible for establishing a plan for incarcerated persons to receive faith- and morals-based counseling from the chaplain or religious volunteers. Incarcerated persons should be reasonably accommodated, including reasonable access to clergy members and spiritual advisers, volunteer religious organizations, faith- and morals-based programs, and other secular volunteer programs.

No incarcerated person shall be required to participate in any such program.

1016.13 SPACE AND EQUIPMENT FOR RELIGIOUS OBSERVANCES

The Captain shall ensure that there are sufficient facilities and resources for the chaplain to serve the incarcerated person population, including providing access to areas of the facility. Space for group worship will be dictated by the availability of secure areas and the classification status of the incarcerated persons to be served. All recognized religious groups should have equal access to the space, equipment, and services which the facility normally provides for religious purposes.

1016.14 COMMUNITY RESOURCES

The chaplain may minister their particular faith and any other similar faiths to incarcerated persons but should also establish contacts with clergy of other faiths who can provide services to persons of other religious denominations.

Whenever the chaplain is unable to represent or provide faith-based services to an incarcerated person, a religious leader or other volunteer from the community, credentialed by the particular faith, should be sought to help provide services. All individuals providing faith-based services should be supervised by the chaplain. All efforts to contact faith-based representatives should be documented and retained in accordance with established records retention schedules.

Volunteers are another valuable resource that could be utilized extensively in the delivery of the religious program (see the Volunteer Program Policy). A volunteer could ensure that religious personnel who provide programming in the facility possess the required credentials and have the security clearance to enter the facility.

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The chaplain, in cooperation with the Captain or the authorized designee, shall develop and maintain communication with faith communities. The chaplain shall review and coordinate with the Captain regarding offers to donate equipment or materials for use in the religious programs. All communication efforts and donations should be documented and retained in accordance with established records retention schedules.

1016.15 TRAINING

The Office shall provide training to facility staff on the requirements of this policy.

The Office shall also provide training in safety and security to the chaplain. The chaplain shall approve and train clergy and religious volunteers. This includes the preparation of a training curriculum, as well as the development and maintenance of training records.

1016.16 STAFF RESPONSIBILITIES

Members shall not show favoritism or preference to any religion and will not discriminate or retaliate against any incarcerated person for participating or not participating in any religion or religious practice. Incarcerated persons are not required to participate in religious programs or activities.

Facility staff will not allow their personal religious beliefs to influence them in the daily management of the incarcerated person population, particularly as it relates to religious practices.

1016.17 SEARCHES REGARDING RELIGIOUS CLOTHING AND HEADWEAR

Unless exigent circumstances exist, when a person in custody is wearing religious clothing or headwear, a correctional officer shall offer to conduct searches of the individual using a correctional officer of the same gender and offer the search to be out of view of members of a different gender (Penal Code § 2607).

Following a search, any religious clothing or headwear purchased, accessed, or retained shall be returned unless there is a reason to confiscate the item due to a security risk. If the item is not returned, the reason shall be documented (Penal Code § 2607).

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Chapter 11 - Facility Design

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Space and Environmental Requirements

1100.1 PURPOSE AND SCOPE

This policy describes the desired space and environmental requirements for the physical plant.

1100.2 FACILITY SECURITY AND ACCESSIBILITY

Planned designs for renovations, modifications, additions, or new construction within the facility should facilitate personal communication with incarcerated persons and direct visual observation of all cells, dayrooms, and out of cell time areas. Electronic surveillance may be used to augment the observation of incarcerated persons but shall not be used as a substitute for personal communication.

All locks, detention hardware, fixtures, furnishings, and equipment should have the proper security value for the areas in which they are used. The use of padlocks in place of security locks on cell or incarcerated person housing unit doors is generally prohibited, as unauthorized locking mechanisms may pose a significant threat to the safety and security of the facility in the event of an emergency.

All parts of the facility that are accessible to the public should be accessible to and usable by disabled persons.

1100.3 ENVIRONMENTAL REQUIREMENTS

1100.3.1 LIGHTING LEVELS

Lighting levels shall be adequate for staff and incarcerated persons to perform daily activities. Night lighting levels should permit adequate illumination for supervision but should not unnecessarily interfere with the ability of incarcerated persons to sleep.

1100.3.2 NATURAL LIGHT

All incarcerated persons living areas should provide incarcerated person with exposure to natural light, unless prohibited by security concerns.

1100.3.3 NOISE LEVEL

Noise levels at night should be sufficiently low to allow inmates to sleep. Nothing in this policy is intended to limit or impair in any way staff’s ability to monitor the jail in a manner that is consistent with safety and security and good correctional practices. Noise measurements in each housing unit shall be documented by a qualified independent source no less than once per annual inspection cycle and a report provided to the Jail Commander.

1100.3.4 VENTILATION

Ventilation systems, including those in toilet rooms and cells with toilets, should be sized and calibrated to supply fresh or circulated air in accordance with federal and state laws, codes, and jail standards.

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Other than an emergency situation, incarcerated persons or jail staff shall not adjust or restrict the ventilation systems without the express permission of the supervisor. Any adjustments made to the ventilation system shall only be allowed for the duration of the emergency or until qualified maintenance personnel can adjust or repair the ventilation system.

Air quantities shall be documented at least annually by an independent expert or by a designated trained staff member who is able to correctly document the conditions, and a report provided to the Captain.

1100.3.5 TEMPERATURE LEVELS
Temperature and humidity levels should be maintained at a level established by facility maintenance personnel and deemed comfortable and cost-efficient.

1100.3.6 CELL FURNISHINGS
Each incarcerated person housed in this facility shall be provided with the following items:

- A sleeping surface and mattress in accordance with federal and state laws, codes, and jail standards
- A writing surface and seat
- A storage area for clothing and personal belongings

1100.4 DAYROOMS

Dayrooms shall be equipped with at least one shower for every 20 incarcerated persons or fraction thereof (24 CCR 1231.3.4), and tables and sufficient seating for all incarcerated persons at capacity. Where incarcerated persons do not have continuous access to their cells, dayrooms shall also be equipped with one toilet, an immediate source of fresh potable water, and lavatory with hot and cold water for every 10 incarcerated persons or fraction thereof (24 CCR 1231.2.9).

1100.5 JANITOR CLOSETS

Janitor closets shall be located near or inside each housing unit. Each janitor closet should contain a sink and the necessary cleaning implements. Access to the janitor closets shall be controlled and supervised by the staff. Only incarcerated persons with a minimum-security classification status shall be allowed access to the janitor closets, and then only under the supervision of staff.

1100.6 EMERGENCY POWER

The facility shall be equipped with a sufficient emergency power source to operate communications, security, and alarm systems in control centers; emergency lighting in corridors, stairwells, all incarcerated person housing areas and security control points; and audio-visual monitoring systems.

1100.7 POLICY

It is the policy of this office to comply with federal and state laws, codes, and correctional standards in matters relating to the jail space and environmental requirements. Any designs for renovations,

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modifications, additions, or new construction within the facility should be in compliance with federal and state laws, codes, and jail standards.

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Smoking and Tobacco Use

1101.1 PURPOSE AND SCOPE

This policy establishes limitations on the use of tobacco products by members and others while on-duty or while in Tehama County Sheriff's Office facilities or vehicles.

For the purposes of this policy, smoking and tobacco use includes but is not limited to any tobacco product, such as cigarettes, cigars, pipe tobacco, snuff, tobacco pouches, and chewing tobacco, as well as any device intended to simulate smoking such as an electronic cigarette or personal vaporizer.

1101.2 POLICY

The Tehama County Sheriff's Office recognizes that tobacco use is a health risk and can be offensive to others. Smoking and tobacco use also presents an unprofessional image for the Office and its members. Therefore, smoking and tobacco use are prohibited by members, incarcerated persons, and visitors in all office facilities, building, and vehicles, and as is further outlined in this policy.

1101.3 SMOKING AND TOBACCO USE

Smoking and tobacco use by members is prohibited any time members are in public view representing the Office.

Smoking and the use of other tobacco products is not permitted inside office facilities or any office vehicle, or any other county building (Labor Code § 6404.05).

It shall be the responsibility of each employee to ensure that no person under their supervision smokes or uses any tobacco product inside county facilities and vehicles.

1101.4 ADDITIONAL PROHIBITIONS

No person shall smoke tobacco products within 20 feet of a main entrance, exit, or operable window of any public building, including any office facility or a building on the campuses of the University of California, California State University and the California community colleges, whether present for training or any other purpose (Government Code § 7596 et seq.).

1101.4.1 NOTICE

The Captain or the authorized designee should ensure that proper signage regarding smoking and tobacco use prohibitions is posted at each entrance to the facility (Labor Code § 6404.5).

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Control Center

1102.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines for a control center for monitoring and coordinating the facility security, safety and communications.

1102.2 POLICY

It is the policy of this office to maintain a control center, designated as Booking, which shall be secure and staffed 24 hours each day to monitor and coordinate security, safety and communications.

1102.3 COMMUNICATIONS AND MONITORING CAPABILITIES

Booking shall have multiple means of direct communication capabilities with all staff control stations in incarcerated person housing areas, including telephone, intercom, and radio.

The Booking staff shall be responsible for monitoring fire, smoke, and life-safety alarms and shall have the means to summon assistance in the event of an emergency.

1102.4 SECURITY

Access into the Booking should be through a sallyport entrance controlled by the staff inside the Booking.

At no time should incarcerated persons be allowed to enter the Booking.

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Crowding

1103.1 PURPOSE AND SCOPE

One of the determining factors in maintaining a safe and secure jail is to limit the incarcerated person population to the number of beds constructed in each incarcerated person classification level. Occasionally, emergencies occur that will require the jail to exceed its approved bed capacity. This policy establishes the approved bed capacity of the facility, addresses temporary population excess, and provides a plan for gathering statistics and projecting long-term space needs via a jail needs assessment.

1103.2 POLICY

It is the policy of the Tehama County Sheriff's Office to manage the incarcerated person population to the extent as is reasonably possible to avoid exceeding the facility's approved bed capacity.

1103.3 CROWDING COMMITTEE

The Sheriff or the authorized designee is responsible for forming the crowding committee and for facilitating its meetings. When the incarcerated person population nears the approved bed capacity of the facility, the Sheriff should schedule a meeting with the committee for the purpose of identifying potential solutions to reduce the population to, or below, the approved bed capacity.

A complete report describing facility population, conditions, and mitigation recommendations should be provided to all members of the committee, as well as being released to the public.

The committee membership should include but is not limited to:

(a) The Sheriff of the Office

(b) The Captain

(c) A member of the local judiciary

(d) A representative of the District or Prosecuting Attorney's Office

(e) A representative of the Public Defender's Office

(f) A representative from the City Manager's/County Administrator's Office

(g) A representative from the office's legislative body (e.g., counsel, supervisor, commissioner)

(h) One or more members of the public

1103.4 FACILITY NEEDS ASSESSMENT

In the event that the jail maintains an average 80 percent occupancy rate consistently for one year, the Office should initiate a jail needs assessment. The assessment initiates a systematic process that is designed to identify a variety of operational issues and program needs, and may indicate when expansion or replacement of the facility is warranted.

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1103.5 DAILY INCARCERATED PERSON POPULATION REPORT

The Captain or the authorized designee is responsible for ensuring that detailed daily logs of the facility's incarcerated person population and other demographic information are completed and maintained by the staff. These logs shall reflect the monthly, average daily population of sentenced and non-sentenced incarcerated persons by categories of each gender as of midnight of each day. The number of incarcerated persons occupying holding cells shall also be counted at midnight each day. An incarcerated person population report summarizing this information shall be created daily and distributed to the Sheriff and the Captain (see the Population Management Policy). The Captain shall provide the Board of State and Community Corrections with applicable incarcerated person demographic information as described in the Jail Profile Survey (15 CCR 1040).

1103.6 RESPONSIBILITIES

The Sheriff is responsible for ensuring that the facility has a sufficient number of housing units in an appropriate configuration so that incarcerated persons can be separated according to the facility's classification plan.

In the event of an emergency that causes the facility to be populated beyond the approved bed capacity, every reasonable effort should be made to reduce the incarcerated person population to the approved bed capacity as soon as reasonably practicable. The Office will take affirmative action to address excess population. In the event that the incarcerated person population remains over capacity or continues to increase, a crowding committee should be formed to examine any and all methods to ensure that the facility population is reduced and remains within the approved bed capacity.

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Chapter 12 - Contraband Detection

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Body Scanner

1200.1 PURPOSE AND SCOPE

The low dose, X-Ray based operation of the Intercept Tek84, body scanner will be used as a tool to assist staff with detection and prevention of weapons, contraband and prohibited items from entering the secure areas of the jail. The purpose of this policy is to establish an effective radiation safety and protection program that will reduce the risk of exposure related to the use of ionizing x-radiation, and provide for the safe operation of the Intercept Tek84 scanner.

1200.2 DEFINITIONS

Body Scan: X-ray technology used to produce an image revealing the presence of contraband concealed on or inside of a subject.

Body Scan Device: A stationary system for obtaining full height radiographic images of a person to detect any kind of weapons, explosives, drugs, and precious stones and metals either concealed under the clothes, swallowed, or hidden in anatomical cavities of the human body (for example, drugs in capsules) without causing harm to the scanned person. (i.e., Intercept Tek84 system)

X-Ray: Also referred to as x-radiation, is a form of electromagnetic radiation similar to light but of shorter wavelength and capable of penetrating solids and of ionizing gases.

Radiation: Radiation is the process in which energetic particles or waves travel through a medium or space. There are two distinct types of radiation; ionizing and non-ionizing. X-radiation is an ionizing radiation.

Radiation Survey: Measurement of the X-radiation equivalent dose rate at the external surfaces of the body scan device, the personnel work station(s), the boundaries of the working zone, and in adjacent rooms if applicable.

Exposure: A term defining the amount of ionizing radiation that strikes living or inanimate material. The Federal Drug Administration definition is found at 21 CFR 1020.40(b) (5).

Dose: The quantity of radiation or energy absorbed.

RSO: Radiation Safety Officer.

Anomalies: Something that deviates from what is standard, normal, or expected.

1200.3 GENERAL INFORMATION

The Intercept Tek84 scanner will be utilized to scan new intakes, housed inmates, objects and property. The intent is to prevent weapons, drugs and prohibited items from being concealed on or in a person's body that would compromise the safety and security of the jail facility.

All arrestees and housed inmates brought into the jail may be subject to an x-ray scan, unless a condition exists that would prohibit scanning. This Transmission X-Ray scanner does not reveal identity or gender specific images, and may be used for cross gender scans. As a standard practice, only male staff are allowed to view scans of males and female staff are allowed to view

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scans of females. If contraband or anomalies are detected on a scan, staff of the opposite sex may view the scan if a secondary opinion is needed.

1200.4 GUIDELINES FOR SCANNING

Pacemakers and other medical devices

There is no FDA published material indicating the use of the body scanner will adversely affect implanted medical devices, such as a pacemaker. A person who claims to have such a device should first be examined by medical staff prior to a scan. However, the presence of such a device should not preclude the use of the scanner, unless other circumstances known to medical staff or jail staff indicate otherwise.

Pregnant Inmates

(a) The Body Scan device shall not be used to scan arrestees or inmates who are known or alleged to be pregnant under any circumstances. A statement by the arrested person or inmate that she is pregnant is sufficient for officers to assume the subject is exempt from a body scan.

(b) Pregnancy tests are administered to female arrestees at the time of intake. If medical staff advises a female arrestee claiming to be pregnant has tested negative (not pregnant), the female arrestee shall be scanned with the body scan device. This will only occur if the negative test result is revealed before the female is housed.

(c) Prior to scanning a female arrestee or inmate, the officer performing the scan shall ask the arrestee/inmate if they are pregnant.

Inmates that have been housed into the inmate population may be scanned any time there is a belief they may have concealed weapons, drugs or contraband on or in their body (unless pregnant).

The scanner may be used to scan any item belonging to an arrestee or inmate who is booked into, or housed within the Tehama County Jail. Scanning of a new arrestee's property may be conducted when articulable facts exist to believe the contents of the property may pose a risk to the safety or security of the facility. Use of the scanner to inspect the contents of packages or articles not belonging to an arrestee, or items that will not be stored inside the jail property room will not be conducted absent clear legal authority or valid court order. The purpose of the scanner is to prevent contraband from entering the facility, and to detect weapons, drugs and contraband possessed by inmates within the facility, or hidden within their property.

The Intercept Tek84 body scanner does not take the place of a pat search or strip search when facts exist to warrant a strip search.

Intoxicated Arrestees

Care should be exercised when scanning persons who demonstrate an acute level of intoxication to such an extent that standing, or remaining still for the duration of the scan might not be possible. If the person demonstrates objective symptoms of intoxication to an extent that their safety may

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be compromised the scan should be delayed to a later time, or deferred completely if the person will be released when sober or with sergeant/watch commander approval.

Fresh Arrests

All new intakes will be scanned using the following procedures:

(a) The arrestee will subject to a pat search followed by removal of all property from their clothing.

(b) Following removal of all property, the arrestee will be escorted and instructed to stand on the platform with their face pointed away from the scanning beam. The handcuffs may be removed to allow the arms hang freely to the sides of the body if it is deemed necessary by the intake deputy.

(c) If the screening deputy suspects the inmate may have concealed weapons or drugs in their shoes, the officer should scan the shoes separately to avoid potential use of a weapon, or destruction of evidence

(d) The intake process will continue if no anomalies are detected.

1200.5 DETECTION OF CONTRABAND

If the scanning process of a fresh arrest reveals an object that is clearly identifiable as a weapon, drug or contraband, the following procedures will be followed:

(a) If the object is clearly a weapon or suspected drug, appropriate officer safety practices will be utilized, the arrestee secured with restraints and placed under constant supervision

(b) The Sergeant/ Watch Commander will be advised of the detection.

(c) The arrestee's clothing will be searched in the approximate area where the object appeared to be located.

(d) If the clothing search is unsuccessful, a strip search may be authorized by the Watch Commander, based on the totality of the facts known to staff (see below).

(e) If the object appears to be in a body cavity such as the rectum, vagina or mouth, the arrestee will be asked to remove the object. The arrestee will be taken to an appropriate location, for privacy, to facilitate the removal by the arrestee.

(f) If the arrestee refuses to remove the object, or the object appears to be in a location where a physical body cavity search or intrusive medical procedure would be required, medical staff will be notified of the suspected concealed item and apparentlocation, if medical staff is not available, medical clearance may be required prior to accepting the arrestee for processing.

(g) Upon a determination from our medical staff that the object presents a medical threat to the health or welfare of the inmate, or can't be removed without intrusive medical procedures, the arrestee will not be accepted for booking.

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(h) The shift supervisor will download and print a copy of the image which will be provided to the arresting officer. The arresting officer will be required to obtain a medical clearance before accepting the arrestee.

(i) Nothing in this policy will preclude staff from conducting more than one scan of an inmate or arrestee to ensure all possible contraband has been detected.

1200.6 HOUSED INMATES

To prevent the introduction, transfer or concealment of weapons, drugs and contraband inside the facility, all booked and housed inmates may be scanned at any time. No specific articulable facts are required beyond the routine security precautions necessary to safeguard the safety and security of the facility, and the health and welfare of the inmate population.

Considerations that may warrant use of the scanner for housed inmates:

(a) Inmates returning from court, outside medical appointments or inmate transfers from other institutions where the inmate(s) may have had access to weapons, drugs or contraband.

(b) Inmates within housing units who demonstrate signs or symptoms of drugs intoxication.

(c) Housed inmates who are the subject of a jail or criminal investigation involving weapons, drugs or contraband.

(d) Confidential Informant information that indicates a specific inmate is concealing weapons, drugs or contraband.

(e) Other information known to any staff member that would indicate an inmate, or group of inmates, may be in possession of weapons, drugs or contraband.

NOTE: To maintain the integrity of the Tehama County jail and control the spread of contraband, we encourage jail staff, when time permits, to randomly scan inmates of different classifications.

1200.7 REFUSAL BY ARRESTEE / COMBATIVE INMATES

(a) Due to the nature of the scanning process, scanning a combative arrestee or inmate will not produce a usable image. Arrestees or inmates who refuse to cooperate with the scanning process will be, at a minimum, placed into an observation/holding cell where their activities can be monitored. If the arrestee's charges, history or behavior would otherwise qualify them for a strip search, the arrestee will be strip searched and given jail clothing while housed in the observation/holding cell.

(b) If the arrestee would not otherwise be qualified for a strip search, their refusal to submit to a scan may be considered with other factors such as behavior, symptoms of drug use or observations that would seem to indicate an attempt to conceal a weapon or drugs. The Sergeant/ Watch Commander will make this determination based on the totality of circumstances.

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(c) The arrestee may be accepted into custody and booked, but will remain in the observation/holding cell until they have been scanned for weapons, drugs or contraband.

(d) If an inmate is housed in an observation/holding cell due to a refusal to submit to a scan, medical staff will be notified.

In any case where an inmate is placed in a holding cell pursuant to this section, the placement will be reviewed by jail administration within the first twenty-four (24) hours of placement, and every forty-eight (48) hours thereafter.

1200.8 PRESERVATION OF IMAGES

In the event weapons, drugs or contraband items are detected, the image will be flagged as a "positive" and noted in the log book maintained at the operator station. The shift supervisor will be notified of the detection and appropriate steps will be taken to preserve the image, if needed as evidence for a criminal prosecution. Sheriff's Office protocols for booking evidence will be utilized for criminal cases. If the evidence is being provided to another agency, that agency will be responsible for documenting chain of custody and preservation of the image (digital or print).

(a) When contraband is recovered as a result of the scanner, a jail incident report will be generated and the scan number shall be notated in the incident report.

(b) All other scans, when conducted for routine facility security purposes, will be documented using the "Scanned Inmate" log book located at the operator's station.

1200.9 INMATE PROPERTY

(a) Inmates have traditionally used a variety of methods to conceal weapons, drugs and contraband. Methods have involved concealing prohibited items inside inmate commissary containers, issued bedding and within envelopes used for legal materials.

(b) Notwithstanding language regarding the property of fresh arrestees or persons not housed in the jail facility, any property located in inmate housing may be scanned at any time, and for any reason.

(c) Inmate property located in a jail property bag may be scanned when staff has information to believe articles within the property bag may contain illegal property, weapons, drugs or contraband that would pose a risk to this facility if not recovered from the bag, a risk to another institution if the inmate is transferred**,** or a risk to the general safety of the public if the inmate is released.

1200.10 SCANNER SYSTEM SAFETY AND OPERATING PARAMETERS

The following provisions shall be adhered to by all staff:

(a) Upon becoming aware of any safety issues related to a body scan device, staff shall immediately report their concerns to their supervisor, who will forward them to the Radiation Safety Officer.

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(b) Operators of a body scan device shall use it in a responsible manner, in accordance with this policy, and in accordance with the manufacturer's operating instructions.

(c) The operator's manual for the body scan device shall not be removed from the officer's work station of the unit.

(d) All part removal and installation of scan device components shall be completed by a service engineer of the representative company and/or other qualified service contractors.

1200.11 STAFF TRAINING

Body scan device operator training consists of the following subject matter:

(a)Design of the scanner: purpose of the basic components, principles of the scanner operation.

(b)Radiation and overall Scanner operation safety principles: History of X-ray, nature of X-rays, the X-ray Tube, penetration and absorption, security X-ray machines, X-ray scanners features, prohibited items, limitations of X-ray, operating procedures, and health and safety.

(c)Control of the scanner: switching on, testing, data input, scanning and switching off.

(d)Principles of investigation of digital images: analysis (determination) of objects on the human body, using the mathematical filters, scaling, etc.

(e)Malfunction diagnostics.

(f)Practice and knowledge testing.

(g)STAFF WHO MAY BE PREGNANT OR HAVE CONFIRMATION OF PREGNANCY SHALL NOT OPERATE OR BE IN THE PROXIMITY OF TEK84 SCANNER DURING ITS USE.

NOTE: No employee shall operate a body scan device without first successfully completing proper training.

1200.12 DUTIES OF THE RADIATION SAFETY OFFICER

The Radiation Safety Officer (RSO) will:

(a) Maintain the Radiation Safety and Protection Program and coordinate the safe operation of x-ray based body scan devices in compliance with applicable state and federal regulations.

(b) Ensure all new or relocated radiation sourcing equipment operated by the Tehama County Sheriff's Office within the Custody Division is registered with the Radiologic Health Branch of the California Department of Public Health (form number RH-2261).

(c) Ensure all radiation sourcing equipment operated by the Tehama County Sheriff's Office within the Custody Division is maintained and serviced in compliance with applicable state and federal requirements.

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(d) Arrange and schedule any needed repair or service for a body scan device upon being advised of any damage or malfunction.

(e) Retain any survey, service, inspection, and instrument calibration records for the lifetime of the body scan device.

(f) Ensure that the annual fee for each body scan device is paid to the Radiologic Health Branch of the California Department of Public Health prior to the anniversary of the effective date of the license.

NOTE: Title 17 of the California Code of Regulations, Section 30231, requires the above payment and mandates that failure to do so requires all usage of the body scan device to immediately cease until such time that the fee and any late fees have been paid.

1200.13 DUTIES OF THE WATCH COMMANDER

In each facility containing an x-ray based body scan device, the watch commander, with the assistance and coordination of the Radiation Safety Officer, will:

(a) Receive authorization from the RSO prior to allowing staff to operate any new x-ray emitting equipment.

(b) Notify the RSO upon becoming aware of any maintenance issues related to a body scan device.

(c) Notify the RSO immediately upon becoming aware of any safety issues related to a body scan device.

1200.14 TEK84 BODY SCAN DEVICE SAFETY FEATURES

The system operation modes are preset by the manufacturer during installation and are not to be changed by the operator.

The following design features of the system make it possible to minimize radiation doses for staffing conducting the scan and persons being scanned:

(a) X-ray generator enclosed in the X-ray protection case.

(b) Slit diaphragms system, making it possible to obtain a narrow fan-shaped beam.

(c) X-ray protection shutter cutting off output of the X-ray radiation from the generator.

(d) Inbuilt X-ray radiation filter.

(e) Highly sensitivity digital X-ray radiation converter.

(f) Inbuilt dosimeter purposed to monitor the personal dose rate under any mode of the X-ray generator operation.

(g) A monitor located inside the scanning unit indicates that the X-ray radiation from the generator is generating a scan.

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(h) The key switch on the Kiosk, when deactivated, cuts off the X-ray radiation from the generator with the X-ray protection shutter.

(i) The X-ray protection shutter cuts off the X-ray radiation from the generator in case of deviations from the system mechanisms and electronic devices operation parameters and conditions set by the manufacturer as well as in case of malfunctions.

(j) In case of a failure of the X-ray protection shutter, the high voltage is not supplied to the X-ray tube.

(k) The software tests the system upon its switching on and in the process of scanning. Detected faults messages are displayed on the operator monitor.

Failure of Safety Features / Vendor Repair

The above safety features are required to be functioning to operate the system. Should any of these features become inoperable, the operator of the body scan device will:

(a) Shut down the body scan device.

(b) Immediately notify his/her supervisor

(c) The supervisor will:

(d) Notify the RSO and Jail Administration. The Radiation Safety Officer or shift supervisor will contact a contracted vendor to make any repairs as necessary.

Annual Servicing and Survey of Body Scan Devices

The calibration, periodic annual maintenance of the X-Ray scanner and radiation survey will be performed only by persons and contractors authorized to perform such services. Refer to the Intercept Tek84 Operations Manual for detailed service tasks.

Radiation Survey

An annual radiation survey shall be performed on each body scan device to ensure no radiation exposure to operators:

(a) Upon installation of a new unit;

(b) At intervals not exceeding one year;

(c) Upon relocation of an existing unit;

(d) Immediately following any service that could potentially increase the system output.

This survey shall only be performed by persons and contractors authorized to perform this service.

1200.15 RADIATION DOSES AND DOSIMETRY PROGRAM

Safety of the Persons Scanned

The inspected person dose rate per inspection does not exceed the contracted value of 0.1-1.0 µSv.

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STAFF WHO MAY BE PREGNANT OR HAVE CONFIRMATION OF PREGNANCY SHALL NOT OPERATE OR BE IN THE PROXIMITY OF THE INTERCEPT TEK84 BODY SCANNER DURING ITS USE.

Dose Per Screening

The minimum radiation dose to which an inmate or arrestee being scanned is exposed per scanning session, does not exceed.90 µSv. For the Tek84 body scan device, the annual quote of the dose for one person in case of repeated inspections of him/her is set to be 30% of the limit of the man-caused exposure of the population to the radiation (that is, 0.25 mSv/year).

The three scan techniques available on the Tek84 body scan device are:

(a) "Low" (0.25uSv per scan), "Medium" (0.50uSv per scan), and "High" (0.90uSv per scan).

(a) Taking into account the above characteristics of the body scan device, it allows the same person to be inspected up to 1000 times per year at.25 uSv, 500 scans per year at.50 uSv and 277 scans per year at.90 uSv. (Two to three scans per day).

(a) Each respected scan level produces a slightly higher level of image resolution.**To maximize the ability of staff to detect small items with "loose" degrees of density, the "high" dose rate should be utilized as the default scanning level.**

Safety for operator and Bystanders

The Intercept Tek84 body scanner is a shielded unit which allows bystanders and the operators protection from the level of exposure per day and year.

BYSTANDERS WHO MAY BE PREGNANT OR HAVE CONFIRMATION OF PREGNANCY SHALL NOT BE IN THE PROXIMITY OF THE TEK84 BODY SCANNER DURING ITS USE.

System Check

A weekly status equipment and safety check of each body scanner shall be performed and logged by the RSO or their designee.

Staff completing the status equipment and safety check will:

(a) Inspect the device for obvious damage.

(b) Ensure all access panels are securely in place.

(c) Ensure all accessible (external) cable connections are secure.

(d) If the system is not already on, turn it on using the key switch (clockwise);

(e) Verify that the "POWER ON" light is lighted.

If any damage or malfunction is found during a system check, staff will:

(a) Power the unit off.

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(b) Notify their immediate supervisor who will notify the Facility Manager or designee.

The shift supervisor will:

(a) Advise the RSO the scanner may need service or repair.

(b) Ensure the scanner is not operated until appropriate service or repairs have been completed.

(c) If it is believed that the damage or malfunction may compromise the safety of any persons in the immediate vicinity of the device, the emergency procedures outlined within will be followed.

1200.16 EMERGENCY PROCEDURES

If an emergency situation occurs, the body scan device shall be powered off and the appropriate personnel shall be notified in accordance with the system check requirements.

NOTE: If the control panel is not accessible or functioning, the main power breaker for the system must be shut off and/or the unit should be unplugged immediately.

The main power disconnect for the Tek84 Body Scan Device is located on the pillar next to the Tek84 Body Scan Device.

If a situation occurs in which staff suspect possible exposure to excessive or dangerous levels of radiation while operating the body scan device, the operator will immediately notify the shift supervisor. The shift supervisor will assess the situation and circumstances. If a risk exists, the shift supervisor will see that the scanner is shut down appropriately and will notify the RSO.

If it is suspected that there was a potential exposure to excessive or dangerous levels of radiation, the shift supervisor will ensure that the use of the body scan device is immediately discontinued and notify the RSO and Jail Administration. The RSO will:

(a) Schedule any needed service and a radiation survey on the identified body scan device.

(b) If it is deemed safe to do so, ensure that the body scan device is surveyed in the condition it was when it became suspect.

(c) Only clear the body scan device to return to normal operations if it is determined to be safe to do so by a service engineer of the Tek84 representative company and/or other qualified service contractors.

If it is believed a radiation leak has occurred, the RSO will ensure that a service engineer from Tek84 or other qualified service contractor will calculate the approximate exposure (radiation intensity) of the person(s) possibly exposed.

State and federal regulations mandate that information related to radiation exposure be made available to staff that operate and are in proximity to radiation machinery.

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Body Scanner

http://www.nrc.gov/reading-rm/doc-collections/cfr/part020/full-text.html

https://www.cdph.ca.gov/Programs/CEH/DRSEM/CDPH%20Document%20Library/RHB/rhb2364.pdf

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Attachments

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INDEX / TOPICS

A

ADMINISTRATIVE REPORT FORMAT. . . . 20
AUTOMATIC DETECTION SYSTEM. . . . 197

B

BRIEFING TRAINING. 179
BUDGET
Budget request. 62
BUDGET OBJECTIVES. 62
BUDGET PLAN. 62

C

CHAIN OF COMMAND. 9
CHEMICAL AGENT. 167
CLINICAL DECISIONS. 418
CONFIDENTIALITY REQUIREMENTS. . . 80
CONFIDENTIAL RECORDS. 80
CONTINUOUS QUALITY IMPROVEMENT. 436
CONTRABAND. 75
CONTROL CENTER. 566
CORRESPONDENCE. 19
COUNSELING. 521
CRIMINAL RECORDS. 80
CRISIS INTERVENTION. 521

D

DAILY TRAINEE PERFORMANCE
EVALUATIONS. 152
DATA CONFIDENTIALITY. 80
DEBRIEFING. 191
DISABILITY. 109
DISPUTE. 41

E

EMERGENCY WATER. 472
EQUIPMENT INVENTORY. 68
EVIDENCE. 75
EXTERIOR-USE TOOLS. 70

F

FIRE ALARM. 197
FITNESS FOR DUTY. 121
FOOD SERVICE REQUIREMENTS. . . . 485
FOOD SERVICES. 483
FOOD SERVICES MANAGER. 483

H

HANDWRITTEN REPORTS. 87
HOSTAGE RESCUE TEAM. 192

I

INMATE RECORDS. 83
INMATE RIGHTS. 330
INSPECTION, SANITATION. 463
INSPECTION OF FOOD PRODUCTS. . . . 499
INTRODUCTORY SUMMARY
MEMORANDUMS
Memorandums. 19

K

KEY INVENTORY. 91

L

LEGAL ASSISTANCE. 11
LEGAL FOUNDATION. 11
LEGAL LIAISON. 11
LETTERHEAD. 19

M

MEDIA ACCESS. 111

P

PERSONAL PROTECTIVE EQUIPMENT
PPE. 404
PHYSICAL IMPAIRMENT

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Mental impairment. 109
POSITION CONTROL. 63
PROTECTION FROM ABUSE. 330
PURCHASING PROCESS. 67

Q

QUALIFICATIONS
Applicant. 154

R

RECORD MAINTENANCE. 83
RELEASE OF INMATE RECORDS. 84
RELIGIOUS DIETS. 484
REPORT CHANGES
Report alterations. 89
REPORT CORRECTIONS. 89
REPORT PREPARATION. 87
REQUIRED REPORTING. 87
REQUISITIONS. 67

S

SERVICE CONTRACTS. 67
SPECIALIZED RESPONSE UNITS. . . . 164
STAFF REPORTS. 19
SURVEYS. 19

T

THERAPEUTIC DIETS. 484
TRAINING MANAGER. 181
TRAINING MANUAL. 152
TRAINING NEEDS ASSESSMENT. . . . 181
TRAINING RECORDS, BRIEFING. . . . 180
TRAINING RECORDS, CHEMICAL AGENT 167
TRAINING RECORDS, HEALTH CARE
PROVIDER TRAINING. 172

U

USDA INSPECTIONS. 499
USE OF FORCE. 167

V

VEHICLE INSPECTIONS. 119
VERMIN AND PEST CONTROL. 473

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