

KERN COUNTY SHERIFF'S OFFICE

Detentions Bureau Policies and Procedures

TITLE: SOBERING CELL

C-1200

EFFECTIVE:	REVIEWED:	REVISED:	UPDATED:
July 11, 1994	07-11-24	01-27-12	07-11-24

APPROVED BY: Detentions Bureau Chief Deputy Cindy Cisneros

REFERENCE: Title 15, Section 1056, C.C.R., DBPPM C-350

POLICY

Any facility that receives incarcerated people into the Kern County Jail System will have a Sobering Cell available for use. This will be a special purpose cell used for holding incarcerated people who, due to their state of intoxication, are a threat to their safety or the safety of others.

Any incarcerated person housed at a facility not equipped with a sobering cell, who, due to their state of intoxication, are a threat to their safety or the safety of others, will be transported to a facility for placement in an approved sobering cell. The Shift Supervisors of the involved facilities will coordinate the moves. All provisions of this policy related to the use of the sobering cell under this circumstance shall be adhered to.

The Shift Supervisor will approve the placement of any incarcerated person into a sobering cell. Additionally, the Shift Supervisor will review the need for the incarcerated person to remain in the Sobering Cell every four hours. The Shift Supervisor's approval and subsequent reviews will be documented on the Incarcerated Person Observation Log. The Medical Staff will conduct an assessment of the incarcerated person prior to placement in the Sobering Cell.

Any incarcerated person displaying any sign of severe or acute intoxication (see **Definitions** below) will be seen by the Medical Staff immediately. If the Medical Staff is unavailable, the incarcerated person will be transferred immediately to the Kern Medical by ambulance. If a Staff Member is uncertain about the level of an incarcerated person's intoxication, the incarcerated person will be referred to Medical Staff.

Intermittent direct visual observations of an incarcerated person confined in a sobering cell shall be made at random intervals, at least once every thirty (30) minutes. These observations shall be documented on an Incarcerated Person Observation Log maintained in accordance with Section C-350 of this manual.

Each observation shall include:

- Observation of the incarcerated person's breathing to determine that breathing is regular. Breathing should not be erratic nor indicate that the person is having difficulty breathing. A loud, heavy snoring sound in respiration is an indication of difficulty in breathing.
- Observation of the incarcerated person to ensure that there has been no vomiting while sleeping. Ensuring that intoxicated persons remain on their side rather than on their back can prevent aspiration of stomach contents.
- An arousal attempt to ensure that the person will respond to verbal or pressure stimulation. This is the most important monitoring procedure for jail staff in non-medical settings. If unable to obtain verbal response to stimulation, the Officer must go in and attempt to arouse the person to assess consciousness.

Incarcerated people will be removed from the Sobering Cell when their state of intoxication diminishes to the point that they are no longer a threat to their safety or the safety of others. Medical Staff will conduct an assessment on any incarcerated person being removed from the Sobering Cell to ensure that the incarcerated person's health is no longer at risk.

Medical Staff will evaluate any intoxicated incarcerated person detained in a sobering cell for longer than six hours. In this case, the Shift Supervisor will ensure that a JMS Incident is generated. The removal of an incarcerated person from the sobering cell will be indicated on the Incarcerated Person Observation Log as detailed in section C-350 of this manual.

Each facility with a Sobering Cell will implement policies for the use of that cell. An incarcerated person needing a Sobering Cell will not be mixed with other types of incarcerated people (e.g., non-sobering cell incarcerated people).

DEFINITION(S):**Levels of Intoxication**

- **Moderate:** The incarcerated person can be aroused, responds to simple commands, has no difficulty breathing, and does not appear to be acutely ill. The incarcerated person may be staggering, have slurred speech, and is in a condition that they are unable to exercise proper care for themselves.

- **Severe:** The incarcerated person is unable to stand alone, can hardly talk, has difficulty breathing, is acutely ill, is unable to follow commands, or is passed out. The incarcerated person needs to be referred to the Medical Staff.
- **Acute:** The incarcerated person is at a level of intoxication that puts the incarcerated person's life in danger. Immediate medical attention is required. This incarcerated person may have one or more of the following:
 - Abnormally high blood pressure
 - Relatively rapid heart rate
 - Tremors
 - Shock
 - Difficulty breathing
 - Vomiting or seizures