



CITY OF MADISON POLICE DEPARTMENT
STANDARD OPERATING PROCEDURE



Guarding of Persons in Police Custody at Hospitals

Eff. Date 06/12/2023

Purpose

On occasion, there is the need for Madison Police Department (MPD) personnel to perform the function of guarding a person who is in police custody at a medical facility. This standard operating procedure (SOP) outlines the decision-making process and the resources to be utilized in these circumstances.

Procedure

Arrested Persons

If it is determined that an MPD arrestee will need more than a few hours of medical care prior to being transported to the Dane County Jail (DCJ) the Officer In Charge (OIC) shall be consulted and a decision will be made as to whether MPD resources will be used to guard the arrestee while they are in police custody and while at the medical facility.

Factors to be considered in making the decision to guard an arrestee include the following:

- Seriousness of the incident/offense.
- Dangerousness of the individual/hazard to the community.
- Potential danger to themselves.
- Potential for flight or escape.
- Medical issues involved and the estimated length of required hospitalization.

The OIC will consult with the involved District Command staff or Violent Crime Unit Command staff in making a determination as to whether an arrestee will be guarded at a medical facility or if alternative arrangements can be made.

Persons In Custody for Chapter 51 Purposes

There are also occasions when a person is in police custody for reasons other than arrest and when that person requires an extended hospital stay. One example is MPD has custody of a person as part of a prospective Emergency Detention, in circumstances where the person cannot be transported to, or cannot be received by, another facility for multiple days. In this or similar circumstances, the Officer In Charge (OIC) shall be consulted so that guard assignments can be arranged. A supervisor or commander of the Mental Health Unit should be consulted.

Guard Assignment Staffing Protocols

On-duty patrol resources are likely to be used for the first guard assignment shift. The OIC and District Command will coordinate a staffing plan for the initial 72 hours of guarding assignments as follows:

- If patrol staffing is adequate (above hard minimum staffing level), on-duty patrol officers will be used to fill guard assignments.
- If patrol staffing is **at or below** hard minimum staffing levels, guard assignments will be staffed on overtime. Assignments will be consistent with relevant contractual provisions, with priority for assignment as follows:
 - To police officers assigned to patrol;
 - To all other non-command commissioned personnel (if insufficient patrol assigned officers express interest);
 - To command personnel (if insufficient non-command personnel express interest).

After the initial 72 hour time frame, the First Detail OIC will be responsible to coordinate a guard assignment staffing plan that is staffed using overtime available to all commissioned staff on a voluntary basis. The status of the person in police custody and staffing plan should be reviewed by the First Detail OIC on a daily basis. Overtime assignments will be consistent with relevant contractual provisions, that is, overtime will be open to all commissioned personnel and will be awarded to whomever had the least amount of overtime accrued for the year, with priority assignment as follows:

- To all non-command commissioned personnel;
- To command personnel (if insufficient non-command personnel express interest).

If no one expresses interest in an overtime guard assignment, patrol resources should be ordered to fill the assignment (consistent with existing order over procedures).

Officers assigned to guard assignments should be assigned to the original incident case number for the first 24 hours of the guard assignment. After 24 hours, the OIC or appropriate commander should generate a new case number (incident type: Assist – Guard Duty) using the medical facility as the address of occurrence. All subsequent guard assignments should be assigned on the computer aided dispatch (CAD) program to the new case number. Any reports completed in connection with the guard assignment should be completed under the original incident case number.

Guarding Protocol

The following guidelines will be adhered to whenever a person in police custody is under guard at a medical facility:

- Officers will notify hospital/facility security of their presence upon arrival.
- Two officers should be assigned to the person in police custody.
- The person in police custody should be restrained unless their injury/illness prohibits it.
- Officers will remain in the room with the person in police custody unless medical circumstances prevent it. Officers will coordinate with medical staff to maintain a reasonable degree of control/observation of the person in police custody.
- Persons in police custody are not allowed access to phones for personal communications without approval from an MPD commander.
- Persons in police custody are not allowed visitors without approval from an MPD commander (professional visits from attorneys are generally permitted). In the event that approval is granted, guarding officers will document the visit (time, duration, names of visitors, etc.) in a report completed under the original incident case number. Officers will remain in the room during visitation (excluding attorney visits when appropriate).

The restrictions above apply to persons who are in custody and under arrest, and not to individuals who might be guarded for other purposes.

Command staff from the District/Unit responsible for the arrest may specify guidelines that add to or modify those above.

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(Revised: 03/04/2016, 01/27/2017, 11/09/2017, 08/19/2019, 11/11/2019, 06/12/2023)

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Name change from Guarding of Prisoners to Guarding of Persons in Police Custody at Hospitals: 06/12/2023