I. PURPOSE

A. The purpose of this policy is to establish guidelines for the planned use of force on inmates with an MH3 designation. An MH3 designation indicates the inmate has a severe mental illness (e.g., psychotic disorder, bipolar disorder, or recurring major depression).

1. In addition to all the requirements set out by rule or other policy, ODOC requires that additional measures be taken in planned use of force (as defined in the rule on Use of Force, OAR 291-013) events that involve inmates designated by Behavioral Health Services (BHS) as MH3.

2. When dealing with persons who are presently acting psychotic, it should be recognized that techniques which rely primarily on pain avoidance may be ineffective and increase the chances of injury to the inmate and/or staff when hands-on is attempted.

II. DEFINITIONS

A. MH3: Mental Health code - level three. Designation utilized to identify inmates with a mental health diagnosis that is categorized as highest need.

B. Officer-in-Charge (OIC): That person designated by the functional unit manager to supervise the facility and make operational decisions in accordance with rule or procedure during periods when the functional unit manager or officer-of-the-day are not readily available.

III. POLICY

A. In all planned use of force events in which the inmate has been designated by BHS as MH3, the OIC shall consult with a BHS manager or mental health specialist, when available, prior to the planned use of force. If no BHS manager or mental health specialist is on site, the OIC will contact Medical Services and the regular on-call process will be initiated. The prescriber on-call will be provided with current mental health information from the inmate’s chart and notification of the pending event.

1. Based on the circumstances and if time permits, the BHS manager or mental health specialist may evaluate the inmate prior to the application of force.
2. The OIC will take into consideration prior to the application of force, the recommendations if any of alternative behavioral interventions provided by BHS.

B. The OIC shall seek to have the BHS manager or mental health specialist, if available, intervene and attempt to deescalate the situation and gain compliance from the inmate and/or consider revision of their order(s) if appropriate.

C. ODOC will provide a minimum of two hours training for staff who work in Special Housing Units. Training will focus on the observable psychological, physical and communication cues that may indicate the presence of an emergency or an increase in mental health symptoms.

D. The Taser may be used to temporarily immobilize an inmate designated by BHS as a MH3.
   1. Only those persons properly trained by ODOC and identified by the OIC may use the Taser in a planned use of force.
   2. The Taser may only be used in accordance with planned use of force. The use of the Taser may render the inmate unable to react for long enough that physical restraints can be applied.
   3. BHS will not make the determination of whether the Taser should be used.

E. In planned use of force situations, the use of impact munitions weapons on MH3 inmates is restricted unless authorized by the functional unit manager or his/her designee.
   1. Circumstances must be serious in nature, calling for extreme measures to protect the staff or inmates; e.g., the inmate may be armed with a weapon.
   2. This does not prohibit the use of such weapons in reactive force situations.

F. Prior to the use of chemical agents on inmates designated as MH3 in a planned use of force event, the OIC will confirm with Medical Services staff that there are no medical contraindications for the use of chemical agents on that inmate.

IV. IMPLEMENTATION

This policy will be adopted immediately without further modification.

Certified: ____________________ Signature on File
Birdie Worley, Rules Coordinator

Approved: ____________________ Signature on File
Mitch Morrow, Deputy Director