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**NEVADA COUNTY  
SHERIFF'S OFFICE**



**CORRECTIONS  
DIVISION DIRECTIVE**

**4**  
Effective Date **01/01/94**  
**01/26/18**

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**SUBJECT**

**USE OF SOBERING CELL - 1056**

**POLICY**

The Nevada County Corrections Division will adopt procedures to govern the use of sobering cells for inmates who are a threat to their own safety, or the safety of others due to their state of intoxication on alcohol or drugs. This policy also applies to the Truckee facility.

**PURPOSE**

To provide a safe and secure environment for inmates who are unable to be immediately booked and placed into the general population housing

**CODE REFERENCE**

California Penal Code §4015(b)  
Title 24, §1231.2.4  
Title 15, §1213, Detoxification Treatment  
Title 15, §1056, Use of Sobering Cell  
CFMG Policy & Procedure, §F4  
IMQ Standard #303

**CASE LAW**

**DEFINITIONS**

- A. Department – shall mean the Nevada County Sheriff's Office
- B. Corrections Division – shall mean all Nevada County Sheriff's Office Correctional Facilities
- C. Watch Commander – shall mean the on-duty sergeant
- D. Sobering Cell – shall mean a cell constructed in accordance with Title 24, §1231.2.4, and functions as a closely monitored sobering up station
- E. Sheltered Environment – shall mean the sobering cells located in the booking area

**PROCEDURE**

- A. Chain of Command

1. On-duty Watch Commander
2. On-duty nurse or medical authority

B. Use of the Sobering Cell

1. At intake, custody staff and medical will conduct a medical receiving screening to distinguish between three levels of intoxication. The purpose of the medical receiving screening is to make appropriate decisions related to housing. It determines if the inmate will be accepted into the facility, or be transported by the arresting agency to a medical facility for further medical treatment.
2. When the inmate is accepted into the facility, the on-duty watch commander will, with the help of medical and visual assessment, determine the housing of the inmate in the booking room. Not all inebriated people need the protection of the sobering cell and conversely, not all those who should be placed in the cell are immediately identifiable as inebriated. The three levels of intoxication are listed below:
  - a. Inmates who are under the influence, but not a threat to their own safety or the safety of others, do not need to be placed in a sobering cell.
  - b. Inmates who are intoxicated enough to meet the safety criteria of needing a “sheltered” environment will be placed in a sobering cell and closely monitored until they sober up sufficiently to be moved into general housing.
  - c. Inmates who are evaluated by medical and will require long-term detoxification under supervision will initially be kept in booking, and then moved to medical or into the general population for continued housing.
  - d. Incompatible or combative inmates should not be housed together in sobering cells. Sober inmates should be removed from the sobering cell as soon as possible to prevent problems.

C. Inmates Accepted Into the Facility Will:

1. Be conscious
2. Respond to simple verbal commands
3. Have no difficulty breathing
4. Not appear to be acutely ill or have apparent injuries
5. Be able to walk with minimal assistance

D. Sobering watches will be initiated by the on-duty nurse. The on-duty watch commander will determine the housing status of the inmate placed on the sobering watch. Custody staff will be required to do the following whenever medical initiates a sobering watch:

1. Have the on-duty nurse complete and sign the inmate “Observation Form.”
2. Notify the on-duty watch commander of the sobering watch, so he/she may direct where the inmate is to be housed and sign the inmate “Observation Form.”

3. Conduct and document direct visual observation of the inmate(s) placed on a sobering watch. Direct visual observations will be conducted twice within a thirty (30) minute period, and documented using the inmate "Observation Form." The officer conducting the check will annotate the following information on the inmate "Observation Form," and report any deterioration of the inmate's condition immediately to medical and the on-duty watch commander. Inmates placed on a sobering watch shall be removed from the sobering cell, as they are able to continue with the booking process. Visual observations will include:
  - a. The time the direct visual observation is conducted
  - b. The name of the person conducting the direct visual observation
  - c. Pertinent observations made by the staff person conducting the check. Pertinent observations will include:
    - (1) Observation of the inmate's breathing to determine if he/she is breathing regularly
    - (2) Observation of the inmate to ensure that there has been no vomiting while he/she is asleep
    - (3) An arousal attempt, as necessary to ensure that the person will respond to verbal or pressure stimulation. This is the most important monitoring procedure for staff in a non-medical setting.
    - (4) Note anything said by the inmate or actions of the inmate that indicates a continual need for said inmate to remain housed in the sobering cell.
  - d. The on-duty watch commander will:
    - (1) Assign housing of the inmate placed on the sobering watch
    - (2) Sign the inmate "Observation Form"
    - (3) Monitor checks of inmates placed on a sobering watch
    - (4) Ensure that no inmate remains in a sobering cell over four(4) hours without an evaluation by a medical staff person or an evaluation by custody staff, pursuant to written medical procedures in accordance with Section 1213 of Title 15, to determine whether the prisoner has an urgent medical problem.
  - e. Termination of a sobering watch:
    - (1) Sobering watches may be terminated by jail medical staff or the on duty custody supervisor. Custody staff will immediately notify medical staff upon the termination of a sobering watch. Inmates to be housed subsequent to a termination of a sobering watch will be evaluated by medical staff prior to housing. In all instances, the inmate "Observation Form" will be placed in the inmate's hard card, and become a part of his/her permanent booking record.

**Truckee**

A. Truckee will use the same general guidelines as listed above for determining the need for an inmate to be housed in a sobering cell. Staff will conduct and document direct visual observation of the inmate(s) placed on a sobering watch.

1. Inmates who need to be observed for sobering purposes will be housed in cell #T106. If the need arises for more than one sobering housing area, T105 may be used as a temporary overflow.
2. Once housed in the sobering cell, the inmate will be observed at intervals of at least twice every thirty (30) minutes. Officers will have visual and verbal contact noting the inmate's response on the written log. This log will be maintained as part of the inmate's permanent file.

Visual observations will include:

- a. The time the direct visual observation is conducted.
- b. The name of the person conducting the direct visual observation.
- c. Pertinent observations made by the staff person conducting the check. Pertinent observations will include:
  - 1) Observation of the inmate's breathing to determine if he/she is breathing regularly.
  - 2) Observation of the inmate to ensure that there has been no vomiting while he/she is asleep.
  - 3) An arousal attempt as necessary to ensure that the person will respond to verbal or pressure stimulation. This is the most important monitoring procedure for staff in a non-medical setting.
  - 4) Note anything said by the inmate or actions of the inmate that indicates a continual need for said inmate to remain housed in the sobering cell.
3. Any deterioration of the inmate's condition, such as unable to arouse, unable to respond to simple commands, trouble breathing, or appears ill, he/she will be taken to Tahoe Forest Hospital immediately.
4. Inmates placed on a sobering watch shall be removed from the sobering cell, as they are able to continue with the booking process.

**Nevada County Sheriff's Office  
Corrections Division  
Inmate Observation Log**

Revision Date:  
January 26, 2018

**Shift Supervisor must be notified and approve all of the following:  
Observation type (s):**

<input type="checkbox"/> <b>Safety Cell</b>	<input type="checkbox"/> <b>Suicide Watch</b>	<input type="checkbox"/> <b>Sobering Cell</b>	<input type="checkbox"/> <b>Mech Restraints</b>
1)Direct visual observation twice every 30 min. 2)Med notified with 15 min. of placement 3)Med eval. at 6 hrs. 4)4 Hour continued retention supervisor approval. 5)Medical/Mental health evaluation of placement/retention within 12 hrs. 6)Removal only with approval of supervisor and/or medical/mental health.	1)Direct visual observation twice every 30 min. 2)Med notified within 15 min. of placement. 3)Med. Eval. at 6 hrs. 4)4 Hour continued retention supervisor approval. 5)Medical/Mental health evaluation of placement/retention within 12 hrs. 6)Removal only with approval of supervisor and medical/mental health.	1)Initiated by medical 2)Direct visual observation twice every 30-min. 3)Medical eval. by 6 hrs. and every 6 hrs. thereafter. <hr/> <input type="checkbox"/> <b>OC observation</b> 1) Direct visual observation twice every 30 min. 2) Watch conducted for a minimum of an hour.	1)Direct visual observation twice every 30-min. 2)1 Hour continued retention supervisor approval. 3)Medical opinion by 1 hours. 4)Exercises alternate extremities each 2 hrs. 5)Medical clearance for retention by 4 hrs. 6)Transfer to medical facility after 8 hrs.

Date / Time of Placement: \_\_\_\_\_ Cell Location: \_\_\_\_\_

Inmate Name: \_\_\_\_\_ Booking #: \_\_\_\_\_

Shift Supervisor \_\_\_\_\_ Date /Time: \_\_\_\_\_

CFMG Medical Staff: \_\_\_\_\_ Date / Time: \_\_\_\_\_

Nevada County Behavioral Health Notified: Yes / No / Time: Notified By: \_\_\_\_\_

Nevada County Behavioral Health: \_\_\_\_\_ Date / Time: \_\_\_\_\_  
(NCBH staff member name)

**LOG ALL THAT APPLY: FOOD, WATER, BREATHING, BEHAVIOR, Demeanor, SPEECH, MOVEMENT, ETC...**

Date / Time	Activity (Describe)	Person Checking	Badge #		Check One	
		Print Name	Ofc.	Sgt.	Med.	CMH

**USE BACK OF FORM NOT TO BE USED FOR RESTRAINT CHAIR**

Inmate Name: \_\_\_\_\_ Booking # \_\_\_\_\_

**Check watch type (s):**

<input type="checkbox"/> <b>Safety Cell</b>	<input type="checkbox"/> <b>Suicide Watch</b>	<input type="checkbox"/> <b>Sobering Cell</b>	<input type="checkbox"/> <b>Mech Restraints</b>
1)Direct visual observation twice every 30 min. 2)Med notified with 15 min. of placement. 3)Med. Eval at 6 hrs. 4)4 hour continued retention supervisor approval. 5)Medical/Mental health evaluation of placement/retention within 12 hrs. 6)Remove only with the approval of supervisor and/or medical/mental health.	1)Direct visual observation twice every 30 min. 2)Med notified within 15 min. of placement. 3)Medical eval. at 6 hrs. 4)4 hour continued retention supervisor approval. 5)Medical/Mental health evaluation of placement/retention within 12 hrs. 6)Remove only with the approval of supervisor and medical/mental health.	1)Initiated by medical 2)Direct visual observation twice every 30 min. 3)Medical eval. by 6 hrs. thereafter. <hr/> <input type="checkbox"/> <b>OC observation</b> 1) Direct visual observation twice every 30 min. 2) Watch conducted for a minimum of an hour.	1)Direct visual observation twice 2)2 hour continued retention supervisor approval. 3)Medical evaluation by 4 hours. 4)Exercises alternate extremities each 2 hrs. 5)Medical clearance for retention by 6 hrs. 6)Mental health evaluation by 8 hrs.

*LOG ALL THAT APPLY: FOOD, WATER, BREATHING, BEHAVIOR, DEMEANOR, SPEECH, MOVEMENT, ETC...*

Date / Time	Activity (Describe	Person Checking	Badge #		Check One	
		Print Name	Ofc.	Sgt.	Med.	CMH

**USE BACK OF FORM**  
**NOT TO BE USED FOR RESTRAINT CHAIR**