

## Custodial Operations Policy and Procedures

### 5.2 Inmate accommodation

#### Policy summary

Custodial officers are responsible for the effective management of inmates in accommodation areas to ensure the safety, security and good order of a correctional centre, by:

- appropriate cell/dormitory placement of inmates
- accurate recording of inmate cell or dormitory assignments and movements
- operative observation of inmate behaviour
- effective communication and interaction with inmates.

When determining an inmate’s cell or dormitory assignment, officers must apply the principle of least restrictive care to manage any apparent risks of harm to self, to others, or from others. Inmates should be placed in the most appropriate accommodation, taking into account any specific risk factors and/or individual needs.

#### Management of Public Correctional Centres Service Specifications

Service specification	Decency and respect Safety and security
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## Scope

This section applies to all correctional centres and other facilities administered by or on behalf of CSNSW.

It also applies to all CSNSW employees, and where relevant to other personnel such as Justice Health and Forensic Mental Health Network (JHNSW), contractors, subcontractors, and visitors.

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# 1 Inmate accommodation

## 1.1 Policy

Custodial officers are responsible for the effective management of inmates in accommodation areas to ensure the safety of staff, inmates and the safety, security and good order of the correctional centre.

Staff must refer to the *Cell placements decision guide* which outlines suitable cell placements for inmates based on relevant factors. Utilising this guide along with other information will assist staff in determining and recording appropriate cell/dormitory placement.

Officers must adopt the principle of least restrictive care, that is, the cell placement for an inmate should be the least restrictive to manage any apparent risks the inmate may pose to themselves, to others, or any risk to the inmate from others.

The Governor or their delegate (the Functional Manager (FM) or Officer in Charge (OIC) is responsible for determining the type of cell placement for an inmate. Cell placements include:

- **normal cell-placement:** suitable for shared accommodation with no immediate risk factors identified
- **one-out:** based on identified risk factor(s) such risk of harm to others or medical reasons, the inmate is not suitable for shared accommodation
- **two-out:** based on identified risk factor(s) such as risk of harm to self or medical reasons, the inmate requires accommodation with another suitable inmate
- a **temporary cell placement**, such as assessment cell, or dry cell, based on identified risk factors.

The Governor or Manager of Security (MOS) in charge of the correctional centre must ensure that Local Operating Procedures (LOPs) are in place that identify all required checks, procedures and responsibilities for determining inmate cell or dormitory placements.

Recommendations for cell placement may be made by JHNSW or State-wide Disability Service (SDS), or as part of an Immediate Support Plan (ISP) or Risk Intervention Team (RIT) management plan where appropriate.

The FM or OIC (e.g. night senior) is responsible for approving cell placements, taking into account recommendations provided. If the recommendation is not supported by the FM or OIC, the reason(s) must be documented; the advisors notified that it is not supported; and alerts, accommodation records and the inmates Case Management File (CMF) updated to reflect the approved cell placement.

In all forms of accommodation, inmates are obliged to keep their cells and cubicles tidy, uncluttered, and must not obstruct lines of sight. A set amount of authorised property may be kept in the cell or cubicle (refer COPP **4.2 Property kept in cell**).

## 1.2 Information sources

JHNSW must complete a Reception Screening Assessment (RSA) for all inmates received at the correctional centre.

JHNSW will provide advice and recommendations to custodial staff via the Health Problem Notification Form (HPNF), including:

- their assessment of an appropriate cell placement for an inmate (e.g. normal; one-out; two-out), and
- any relevant management information that must be noted by custodial staff.

JHNSW must advise custodial staff on any risks identified that will affect an inmate's management in custody. For example:

- whether an inmate has been identified as a risk of harm to self, to others, or from others;
- whether the inmate requires placement in a temporary cell (such as an assessment cell) and any observations required;
- practical management considerations, such as whether the inmate is aged and frail, or has a disability.

Custodial staff must implement recommendations provided by JHNSW unless there are overriding security concerns. The Governor, MOS or FM may override these recommendations, but must record the reasons.

Other sources of information or advice available to custodial staff include:

- OIMS alerts (including non-associations and care-in-placement)
- Classification (security) rating
- Inmate Profile Document (report from OIMS)
- Court orders
- Inmate Identification and Observation (IIO) form
- Inmate Screening Questionnaire (from OS&P) - Narrative Summary
- Reception checklists (*Reception and accommodation checklist* or *Reception transfer checklist*, whichever is applicable)
- Documentation in the inmates CMF
- Intelligence holdings (FM Intel), Security Designation, Security Categorisation and ETI warnings.

Staff must ensure that all the above information is reviewed on receipt of an inmate at a correctional centre. This includes checking an inmate's current and past behaviour; criminal history and charges; health status and relevant issues (e.g. mental health); intelligence records; and risk factors.

## 1.3 Observations recommended by JHNSW

If an inmate requires observations JHNSW must detail the frequency and type of observation (e.g. physical, or electronically via CCTV) in the HPNF.

A physical observation consists of attending the cell and observing for signs of life, including the rise and fall of the chest and physical movement, or behaviour which requires intervention.

An electronic CCTV observation consists of observing physical movement or behaviour which requires intervention.

Examples of behaviour which may require intervention include but are not limited to:

- The inmate is slumped in an awkward position.
- Staggering around cell, unsteady on feet, or crawling on floor.
- No movement over a period of time e.g., while sleeping when movement is expected.
- The inmate is completely covered by bedding for an extended period of time.
- Self-harming, or preparing to self-harm e.g., ripping of materials, headbanging, or the use of sharps for self-harm.
- Twitching, clutching, or holding part of body.
- Covering camera (physical observations must replace CCTV observations).

If after observing behaviour that requires intervention, and the inmate reports experiencing health related issues this must be reported to JHNSW immediately. Some of the health-related issues that an inmate may report that should prompt staff to contact JHNSW could include:

- Loss of consciousness.
- Difficulty breathing, wheezing or shortness of breath.
- Excessive sweating, hot and cold flushes.
- Pain in chest, neck, jaw, shoulders, arms, fingers.
- Seizures, twitching or shaking.
- Vomiting or diarrhoea.
- Difficulty talking / muteness.
- Excessive drinking – reporting constant thirst, concealing amount of water ingested, communication of large amount of water ingested, standing in shower to drink the water, or drinking water from the toilet to quench their thirst.

When a CCTV camera is covered by an inmate, physical observation must replace CCTV observation until the covering is removed from the CCTV camera.

When a CCTV camera has been damaged and or becomes non-functional, and no alternate cell with CCTV is available, then physical observation must replace CCTV observation, until the CCTV camera is functional, or an alternate cell becomes available.

As per local Daily Security Reporting (DSR) requirements, any CCTV camera which is covered, damaged, or non-functional must be documented and reported to the relevant FM.

## 1.4 Custodial assessments

There are various custodial assessments that can be used to determine appropriate management strategies when an inmate is received in custody, and where risks are identified, such as the:

- *Assessment tool - Inmates under threat (refer to COPP section 3.2 Protective custody)*
- *Risk factors for consideration – reference guide and Inmate interview questions to further evaluate risk (refer to COPP section 3.7 Management of inmates at risk of self-harm or suicide).*

## 1.5 Cell placement decisions

A cell placement decision is a decision made by an officer which determines an inmate's suitability to be placed with other inmates or in a cell type described at part 2 *Types of cell placements*. The outcome of a cell placement decision continues until their cell placement is reviewed.

A cell placement decision may be:

### *Ongoing*

- One-out only (not to share a cell with others at any time)
- Two-out only (must share a cell with at least one other inmate at all times)
- Normal cell placement (can occupy a cell alone or with other inmates)

### *Temporary*

- Camera cell (held in a cell with a CCTV camera)
- Assessment cell (held in a cell with a CCTV camera and minimised hanging and ligature risks)
- Other temporary cell placement i.e., transition (step-down) cell, dry cell or segregation cell

A Local Operating Procedure (LOP) must be developed to determine responsibility for approving cell placement decisions for new reception inmates and review of cell placement decisions.

## 1.6 Cell placement decision for new receptions to a correctional centre

A cell placement decision must be made when an inmate is received at a correctional centre. Officers should use the *Cell placement decision guide* for determining the decision. The decision must be recorded on the *Reception and accommodation checklist* (for receptions from Police or Court cells) or the *Reception transfer checklist* (for receptions from other correctional centres).

An officer responsible for cell placement decisions must document the reasons for the cell placement decision and sign the cell placement decision section of the *Reception and accommodation checklist* or *Reception transfer checklist*.



## 1.7 Procedures for determining suitable cell placement

	Procedure	Responsibility
1.	Complete <i>Reception and accommodation checklist</i> or <i>Reception transfer checklist</i> . The delegated officer must seek the officer specified in the LOP to record and sign for the inmate's cell placement on this form including the reason for the decision. <b>(refer to COPP section 1.1 Reception procedures)</b> .	Assigned officer
2.	Review information (refer to <b>subsection 1.2 Information sources</b> of this policy), including: <ul style="list-style-type: none"> <li>• Recommendations or special instructions (e.g. HPNF from JHNSW)</li> <li>• OIMS (e.g. Alerts, Non-Associations, Care in Placement)</li> <li>• CMF (e.g. IIO if initial reception) – this will include specific alerts where risks have been identified.</li> </ul>	Assigned officer
3.	Complete relevant custodial assessment, if required (refer to <b>subsection 1.3 Custodial assessments</b> of this policy).	Assigned officer
4.	Determine inmate's cell placement (normal, one-out, two-out etc).	Assigned officer
5.	Inform the inmate of the outcome of the cell placement decision.	Assigned officer

## 1.8 Review of cell placement decision

Cell placement decisions are a key tool to mitigate inmate risk to self (self-harm and suicide) and the risk an inmate may pose to others (violence/contagious illness).

A *Cell placement decision* form must be completed when a new cell placement decision is made.

A review of an inmate's cell placement decision must be undertaken by the officer specified in the LOP in any of the following circumstances:

- Negative change in an inmate's circumstance, e.g., death in the family, relationship breakdown etc..
- a victim of an assault or serious assault.
- adverse reaction to court/legal outcome.
- upon request for protective custody (PRNA & SMAP).
- upon separation of an inmate (78A).
- upon segregation of an inmate (consideration for one-out cell placement, immediately contact JHNSW if mentally ill or suspected of being mentally ill (refer to COPP section 3.4 Segregation).
- an inmate refuses to take prescribed medication for mental illness e.g. depression.
- when a HPNF is received that recommends a cell placement which does not align with the inmate's current cell placement decision.
- significant and concerning change in demeanour or behaviour which requires intervention.

- any other time when a CSNSW staff member holds concerns or receives information that they believe may affect an inmate's cell placement.

## 1.9 Procedures for reviewing an inmate's cell placement

	Procedure	Responsibility
1.	Complete <i>Review of cell placement decision</i> form and determine if a change of cell placement is required.	Assigned Officer
2.	Review existing HPNF or request a new HPNF if the inmate's change in circumstances relates to health.	Assigned Officer
3.	Inform FM/OIC of outcome of inmate's cell placement review.	Assigned Officer
4.	Ensure <i>Review of cell placement decision form</i> is filed in the inmate's Case Management File (CMF).	Assigned Officer
5.	Complete OIMS E-Case note, recording outcome of cell placement review.	Assigned Officer
6.	If the review results in a change of cell placement, update accommodation records and OIMS after inmate is assigned to the cell, and create records as required e.g. cell card ( <b>refer to COPP section 5.1 Accommodation records</b> ). <b>Note:</b> Cell cards must be created and referred to by staff.	Assigned Officer
7.	Provide the completed <i>Review of cell placement</i> form to the officer responsible for supervising the inmate e.g. Wing officer and inform the inmate of the outcome of the review of cell placement decision.	Assigned Officer
8.	Ensure the inmate is immediately assigned to a suitable bed in accordance with subsection 1.10 <i>Assessing and recording inmate bed assignment</i> and 1.11 <i>Procedures for assessing and recording inmate bed assignment</i> .	Assigned Officer

## 1.10 Assessing and recording inmate bed assignment

Senior Correctional Officers (SCOs) and/or Accommodation Unit Officers are responsible for:

- assessing the inmate's compatibility with cellmate(s) prior to assigning them a bed to ensure that there are no known factors that would preclude them sharing accommodation (where normal or two-out placement type has been assessed as suitable).
- ensuring that an inmate is assigned to a bed in accordance with the current cell placement decision and any JHNSW or State-wide Disability Service (SDS) bed recommendations including bottom bunk, ground floor, JHNSW Medical/Clinical observation or disabled access.

If any CSNSW staff holds concerns or receives information that they believe would affect an inmate's cell placement or bed assignment, they must immediately notify the OIC of the accommodation area, and the OIC must conduct an immediate review.

CSNSW officers must keep accurate and up-to-date records of all cell/dormitory bed assignments and movements for each inmate in CSNSW custody. This must include the date and time that an inmate was assigned to a cell or dormitory and when they were moved from it.

Entries must be made in OIMS prior to the commencement of the first watch on the following day; or if OIMS is unavailable, recorded in an appropriate journal and recorded in OIMS as soon as possible (**refer to COPP section 5.1 Accommodation records**).

An OIMS case note stating which staff member conducted the assessment and made the bed assignment decision must be entered.

An FM/OIC must be informed if an inmate's cell placement is altered due to a change in the inmate's circumstances (e.g. they are at risk).

Cell cards must be affixed to the wall immediately outside the cell or cubicle for each inmate with a current photograph of the inmate, their name and MIN. Staff must refer to information recorded on an inmate's cell card for all interactions, placements, or movements.

An inmate's criminal history must not be written on a cell card. In centres where inmates of various statuses are co-located, their protective or segregated custody status may be noted on the cell card to assist operational activities (refer to COPP section 5.1 *Accommodation records*).

### 1.11 Procedures for assessing and recording inmate bed assignment

	Procedure	Responsibility
1.	Conduct checks: <ul style="list-style-type: none"> <li>consider JHNSW/ SDS bed recommendations (e.g. bottom bunk, ground floor, JHNSW Medical/Clinical observation or disabled access)</li> <li>ensure that inmate is placed in the correct type of bed with regard to the current cell placement decision (e.g. normal; one-out; two-out).</li> <li>check that there are no known factors that would preclude cellmates from sharing accommodation (if sharing accommodation) (refer to requirements under <b>subsection 1.10 Assessing and recording inmate bed assignment</b> of this policy and cell placement LOP).</li> <li>ensure that the inmate is advised of the location and operation of the cell call alarm.</li> </ul>	Accommodation officer(s)
2.	Assign inmate to cell/dormitory/bed.	Accommodation officer(s)

	Procedure	Responsibility
3.	Update accommodation records and OIMS after inmate is assigned to the cell, and create records as required e.g. cell card ( <b>refer to COPP section 5.1 Accommodation records</b> ) <b>Note:</b> Cell cards must be created and referred to by staff.	Accommodation officer(s)
4.	Enter an OIMS case note stating which staff member conducted the assessment and made the bed assignment decision.	Accommodation officer(s)
5.	Conduct induction into accommodation (refer to <b>subsection 1.13 Induction into accommodation</b> of this policy).	Accommodation officer(s)

### 1.12 Interim cell placements if not screened by JHNSW

If an inmate has not been screened by JHNSW within 24 hours of reception, the FM or OIC of reception can make an interim accommodation decision to house the inmate temporarily in a cell assignment identified as suitable for the inmate based on information available and any identified risks. This decision must be recorded in an OIMS case note.

If there are any concerns regarding the inmate's health and wellbeing, a JHNSW After Hours Nurse Manager (AHNM) may be contacted 24 hours per day on 1300 076 267, or emergency services contacted.

If the AHNM is contacted, ensure to advise them that the inmate is unscreened by JHNSW and request advice on an interim accommodation decision (**refer to COPP section 6.1 OIC notifications**). JHNSW must be notified as soon as possible to conduct the screening.

### 1.13 Bed recommendations

In addition to cell placement recommendations, bed recommendations may be made by JHNSW or SDS. Bed recommendations may include, bottom bunk, ground floor, JHNSW Medical/Clinical observation or disabled access.

### 1.14 Induction into accommodation

As routines may vary from one accommodation area to another it is important that all inmates are made aware of routines specific to the area/unit to which they are assigned.

Once an inmate is assigned to a bed, the wing officer must ensure that the inmate is advised of the location and operation of the cell call alarm, and of specific operations for the area/unit, including:

- provision of health services
- access to services and programs
- routine lock-in and let-go times
- muster procedures
- visit times and procedures
- schedule for laundering of personal clothing and linen exchange

- processes for the submission of buy-up forms and receipt of purchases
- standard of dress inside and outside of the area
- submission of request and application forms
- processes for accessing personal property stored in reception.

The inmate must be informed of behavioural expectations and that failure to abide by correctional centre routine may result in disciplinary action.

## 2 Types of cell placements

### 2.1 General requirements

Police/court cells and correctional centres must ensure that transport and the receiving centre are advised on the inmate's current cell placement and any recommendations provided in the current HPNF.

CSNSW officers must ensure that appropriate placement and behavioural alerts are recorded in OIMS.

The FM, OIC, SCO or wing officer must ensure that all accommodation records are up to date to reflect any cell placement recommendations. This is to be specified in LOPs.

### 2.2 Normal cell placement

Normal cell placement may include:

- Shared accommodation in cells or rooms (those with more than one-bed)
- Dormitory accommodation
- Single-cells/rooms with one bed (where available).

Inmates who have been assessed as not presenting with an immediate risk of harm to others, risk of harm from others, or a risk of harm to self will be deemed suitable for normal cell-placement in shared accommodation.

Assignment to shared accommodation will occur where inmates are assessed as compatible and there are no factors that would preclude the occupants from sharing accommodation.

### 2.3 One-out cell placement due to risk

A one-out cell placement is suitable for an inmate assessed as having significant risk factor(s) that indicate that they **must not share a cell with anyone else**, such as:

- being a serious risk to others (e.g. recent charges for violence, detoxing/withdrawing, or demonstrating erratic/disturbed behaviour)
- medical recommendation (such as an infectious or communicable disease, or are severely mentally unwell)
- serious risk from others (e.g. SMAP, protection, transgender)
- serious risk to themselves AND not suitable for placement with others (must be managed under RIT protocols (**refer to COPP section 3.7 Inmates at risk of self-harm of suicide**)).

An OIMS behavioural and placement alert must be entered to state that the inmate must only be placed in one-out cell and are not to be placed in a cell with another inmate. Staff must ensure that all incidents are reported and recorded. For example, Police/court cell staff must enter an alert where risk factors (e.g. Outlaw Motor Cycle Gang (OMCG), previous employment (Police, CSNSW), or charges) indicate a person may be at risk from others or to others.

## 2.4 Two-out bed placement due to risk

A two-out cell placement is suitable for inmates with a significant risk factor(s) that indicates that they **must share another cell with a compatible inmate**, such as where they:

- are at risk of self-harm or suicide but are not a risk of harm to others or at risk from others
- have special needs including a medical condition or health issues (e.g. old age, disabled, ischaemic heart disease, chronic asthma, unstable diabetes, epilepsy)
- are experiencing distress and are a first time inmate, young, or Aboriginal; or are unable to speak English (it may be suitable to place the inmate with another inmate who is compatible (e.g. speaks the same language)).

A comprehensive overview of reasons for two-out placements is outlined in the *Cell placements decision guide*, however as an overview, the below table outlines general reasons for a two-out, when they may occur, and the duration it may be applied for:

Reason	When	Duration
<b>Police/court cell alert raised</b>	On reception (alert in OIMS and on IIO)	Approved by FM or OIC <b>temporarily</b> until assessed by JHNSW and RIT.
<b>ISP or RIT</b>		Approved by FM or OIC <b>temporarily</b> as an interim strategy for an ISP or RIT management plan. Once reviewed/reassessed by the RIT this placement may be terminated. However due consideration must be given to the ongoing management of the inmate in accordance with COPP section 3.7 <i>Management of inmates at risk of self-harm or suicide</i> .
<b>JHNSW recommendation</b>	At any time	May be approved by FM for a 3 month period. Prior to expiry, JHNSW must review the need for a two-out placement to continue. If there is a change in the inmate's clinical presentation prior to expiry, JHNSW may recommend an alternative cell-placement
<b>Special needs</b>	On reception or at any time	May be approved by FM for 6-month period. Prior to expiry, the FM must seek advice from the initiator to determine whether there is a need for a two-out placement to continue.

An inmate placed in this type of accommodation with another inmate due to being at risk of self-harm or suicide (as part of an ISP or in a RIT management plan) must agree to share the cell with the other inmate using the *Inmate undertaking to share accommodation*. The inmate's choice of cell-mate should be considered.

Inmates placed in a two-out due to risk factors must be assessed as compatible and not posing a risk to each other. Inmates must be advised on how to use a cell call alarm in the event of an emergency.

A mandatory two-out bed placement **must never lapse**; the inmate must never be locked in a cell alone, such as:

- when their **cell-mate is transferred or discharged or temporarily absent**, another compatible cell-mate must be assigned to the cell. Appropriate checks must be conducted.
- when the inmate is **sick in cell**, consideration must be given to assigning the inmate to a camera cell, or as a last resort an assessment cell.

Close monitoring of inmates with this placement must occur, particularly when there are frequent movements.

Two-out cell placements must be recorded in the Muster Book and local identifiers used on the cell-card (such as colour coding).

## 3 Temporary cell placements

### 3.1 Camera cells

A camera cell has Closed Circuit Television (CCTV) and is suitable for inmates who need to be monitored, including those:

- under the influence of alcohol or other drugs, or
- showing moderate symptoms of withdrawal, or
- having a history of seizures.

If the inmate is placed two-out in a camera cell because they are at risk of self-harm or suicide, the two-out placement must be part of an ISP or RIT Management Plan.

All inmates who are placed in a camera cell may be subject to regular observations by custodial staff in line with JHNSW recommendations in the HPNF and in consultation with the MOS, FM or assigned officer.

If an inmate requires observation by custodial staff while in a camera cell, JHNSW must state the frequency and type of observation. An electronic CCTV observation consists of observing physical movement or behaviour which requires intervention. (**refer to *Subsection 1.3 Observations recommended by JHNSW of this document for examples of behaviour which may require intervention***).

Correctional officers are to report any concerns identified from their observations to the relevant FM or OIC of the centre.

JHNSW staff are responsible for undertaking any medical/clinical observations that may be required. JHNSW are required to consult the FM or OIC of accommodation about

any physical medical observations conducted by JHNSW staff that will require CSNSW supervision.

### **3.2 Dry cells**

A dry cell is one with no toilet or running water. Placement in a dry cell may be suitable for an inmate suspected of concealing contraband within a body cavity or an inmate who has refused or failed to supply a urine sample.

Inmates must be assessed by JHNSW prior to placement in a dry cell. No inmate is to be placed in a dry cell for more than 24 hours (**refer to COPP section 17.4 Internal secretion of contraband**).

JHNSW will recommend appropriate management practices in these instances, which may include measures such as escort out to hospital for medical assessment, or observations.

The FM must ensure the inmate is supplied with food and drinking water. If the inmate requests to use a toilet, they must be escorted to a toilet and kept under observation until returned to the dry cell.

### **3.3 Transition cells (also known as step-down cells)**

A transition cell has reduced hanging points with fittings and fixtures designed to minimise opportunities to self-harm, but may not have CCTV monitoring.

Transition cells may be suitable for inmates who are considered to have a reduced risk of self-harm or suicide. If the inmate is placed two-out in a transition cell because they are at risk of self-harm or suicide, the two-out placement must be part of an ISP or RIT Management Plan.

### **3.4 Assessment cells**

An assessment cell offers fewer opportunities for an inmate to self-harm. All fixtures are recessed and all furniture is fixed to reduce the number of possible hanging points. Each assessment cell is equipped with CCTV and clear panels for observation purposes. An electronic CCTV observation consists of observing physical movement and any behaviour which requires intervention. (**refer to Subsection 1.3 Observations recommended by JHNSW of this document for examples of behaviour which may require intervention**).

Inmates who are identified at risk of self-harm or suicide can be held in an assessment cell but only under an ISP or RIT management plan (**refer to COPP section 3.7 Inmates at risk of self-harm or suicide**).

In addition, inmates may be placed in an assessment cell if they are assessed as being in distress or having:



- serious mental health symptom(s) that require observation
- moderate to severe symptoms of withdrawal from drug and/or alcohol misuse
- a history of seizures.

Custodial staff may be required to conduct physical observations of inmates. A physical observation consists of attending the cell, and observing for signs of life, including the rise and fall of the chest and physical movement, or behaviour which requires intervention. Any medical/clinical observations required must be conducted by JHNSW staff.

Authority to place an inmate in an assessment cell rests with the MOS, FM or OIC of the centre and must be reviewed every 24 hours. No inmate may be kept in an assessment cell for more than 48 hours without the approval of the Governor.

Where possible the decision for assessment cell placement should be made by a multi-disciplinary team (RIT/RAIT for inmates at risk of self-harm or the Governor/delegate in consultation with JHNSW).

Use of assessment cells and the resulting restricted access to amenities are management options of last resort.

### 3.5 Segregation cells

Inmates may be temporarily placed in segregation cells in accordance with policy outlined in **COPP section 3.1 Segregation of inmates**.

## 4 Applications to share cells

### 4.1 Policy

Inmates can apply to share accommodation with another inmate using the *Inmate application form*. This decision rests with the FM of the accommodation area.

Inmates who are co-accused are prohibited from sharing accommodation in a correctional centre until they are sentenced, unless an exemption is granted by the Commissioner of CSNSW or delegate.

Co-offenders who are sentenced for drug offences, violent offences, or sexual offences must never share accommodation unless an exception is granted by the Commissioner or delegate.

The Commissioner will only approve exemptions in exceptional circumstances, including but not limited to:

- the inmates being Aboriginal (in recognition of the findings of the Royal Commission into Aboriginal Deaths in Custody)
- an inmate at risk of self-harm or suicide
- the arrangement would be in the interest of the safety of an inmate or the security of a correctional centre.

Consideration may also be given to the fact that the inmates are family members (including a: spouse, de-facto partner, child, parent, sibling, aunt, uncle, cousin or grandparent).

## 4.2 Procedures for sharing of cells by co-accused/co-offenders

	Procedure	Responsibility
1.	Enter a placement alert in OIMS if it is identified that inmates are co-accused (or co-offenders sentenced for drug, violent, or sexual offences) that reads: <i>'MIN, NAME and MIN, NAME are not to be housed in the same cell or dormitory'</i>	FM/MOS or delegated officer
2.	Advise the Governor if the inmates request to be housed in the same cell or dormitory and any information exists that indicates an exemption may be appropriate	FM/MOS or delegated officer
3.	Seek endorsement by Assistant Commissioner, Custodial Corrections (ACCC) prior to forwarding request and associated documents to the Commissioner for approval, if an exemption is appropriate	Governor
4.	Ensure the previous placement alert is deactivated and a new alert is entered onto the OIMS, if approval is granted by the Commissioner, that reads: MIN, NAME and MIN, NAME were approved by the Commissioner on DATE to be housed in the same cell or dormitory.	Governor

## 5 Quick links

- [Related COPP](#)
- [Forms and annexures](#)
- [Related documents](#)

## 6 Definitions

Assigned Officer	Assigned officer refers to either: <ul style="list-style-type: none"> <li>• an individual officer or</li> <li>• an officer who is in a position (substantive or temporary) or a post that the Governor (or Manager of Security in Charge of a Correctional Centre) has assigned to perform a particular duty or task. The Governor (or MOS in charge) may delegate the role of assigning officers to perform duties to a Managers of Security, Functional Managers or Senior Correctional Officers or other officers who have direct reports. Assignment to a duty or task may be provided in Local Operating Procedures (LOPs), Statement of Duties, Local Orders, Post Duties, verbally or may be implied as a logical extension of the officer's post, position, or role.</li> </ul>
Authorised officer	The officer authorised by the Governor to perform the functions set out in this part of the Custodial Operations Policy and Procedures Manual.
ACC	Assistant Commissioner Custody (ACC).
Bed assignment	The bed an inmate is assigned within an accommodation area
CCTV	Closed Circuit Television
Cell Card	Document containing photo, name, DOB and MIN of inmate, displayed near the cell door
Cell placement decision	A decision made by an officer which determines an inmate's suitability to be placed with other inmates or in a cell type
Change in circumstances	A change in the inmates circumstance may include (but are not limited to): an acute crisis; issues with family or friends; health issues; mental health issues; drug/alcohol issues; incidents; information recieved from family or friends; a change in their legal status (e.g. becoming sentenced or following a court appearance); intelligence recieved. A change in an inmates behaviour should be considered relevant for assessing any risks posed to or from an inmate.
CMF	Case Management File
Compatibility	An inmate will be placed in a shared cell following confirmation of an inmate's suitability with this bed type, and confirmation that inmates are compatible for actual bed assignments together. Compatibility is confirmed by ensuring that there are no known factors that would

	preclude the inmate(s) sharing accommodation where an actual bed assignment for an inmate(s) is being made.
COPP	Custodial Operations Policy and Procedures
Delegated officer	Any officer who occupies or acts in the following positions which the Governor has delegated certain Governor's functions to deal with correctional centre offences: <ul style="list-style-type: none"> <li>• Manager of Security</li> <li>• Functional Manager.</li> </ul>
Dormitory	Open space environment with direct access to communal areas with separate lockable ablution booths containing shower, toilet and sink. Each inmate in a dormitory will have an individual cubicle with a bed, desk and lockable area for private property. Inmates also have access to digital TV's with earphones which are fitted within their cubicle.
DSR	Daily Security Reporting
FM	Functional Manager
HPNF	Health Problem Notification Form
ISP	Immediate Support Plan
JHNSW	Justice Health & Forensic Mental Health Network (JHNSW) is a division of NSW Health providing health services to inmates
LOP	Local Operating Procedure
MOS	Manager of Security
Must	Mandatory requirement to complete action.
OIC	Officer in Charge
OIMS	Offender Integrated Management System
RAIT	Risk Assessment Intervention Team
RIT	Risk Intervention Team
Room	In minimum security centres, inmates may be housed in a room. Rooms are different to cells, whereby inmates are secured at the unit level, rather than locked in a room. There may be multiple rooms for inmate housing which are not secured by staff.
Should	May be completed; however there must be a genuine and reasonable reason for why it has not occurred.
SDS	Statewide Disability Service

## 7 Document information

<b>Business centre:</b>	Statewide Operations	
<b>Approver:</b>	Dr Anne Marie Martin (Deputy Commissioner Security and Custody)	
<b>Date of effect:</b>	16 December 2017	
<b>EDRMS container:</b>	18/7141	
<b>Version</b>	<b>Date</b>	<b>Reason for amendment</b>
1.0	16/12/17	Initial publication ( <i>Replaces section 7.17 of the superseded Operations Procedures Manual</i> )
1.1	29/03/19	Insertion of [2.5] Rooms.
1.2	23/08/19	Clarification of responsibilities for determining cell placement. Further clarification included regarding factors that would preclude inmates sharing cells. Additional examples included regarding inmates suitable for sharing of a cell.
1.3	12/03/20	General formatting update and improvements
1.4	27/05/20	Policy reviewed and updated. Major policy updates include amended review time for two-out cell placements for inmates following recommendation after initial reception; and inclusion of reference to new annexure 'Cell placement decision guide'.
1.5	18/08/23	Updates in line with CSNSW restructure: deletion of reference to S&I; and renaming of Assistant Commissioner Custodial Corrections (ACCC) to Assistant Commissioner, Custody (ACC).
1.6	14/08/24	Policy reviewed and updated. Major policy updates include the introduction of 'Cell placement decisions', 'Cell placement decisions for new receptions to a correctional centre', 'Review of cell placement decision', 'Procedures for reviewing an inmates cell placement', 'Bed recommendations'. Additionally, the 'Cell placement decision guide has been updated, and includes 'Cell card colour coding system'. Changing of JH&FMHN to JHNSW.
1.7	03/09/24	Policy amended at 1.2 Information sources, to include Classification (security) rating.