



ALBUQUERQUE POLICE DEPARTMENT
PROCEDURAL ORDERS

SOP 2-83 (Formerly 2-11)

Effective: 01/19/2023 Review: 01/19/2024 Replaces: 09/29/2016

2-83 HOSPITAL PROCEDURES AND RULES

Related SOP(s), Form(s), Other Resource(s), and Rescinded Special Order(s):

A. Related SOP(s)

[2-16 Reports \(Formerly 1-05\)](#)

[2-78 Domestic Violence \(Formerly 4-25\)](#)

[2-82 Restraints and Transportation of Individuals \(Formerly 2-19\)](#)

B. Form(s)

Criminal Complaint

APD Pre-Booking Worksheet

C. Other Resource(s)

None

D. Rescinded Special Order(s)

SO 21-04 Hospital Guard Duty and Rotation Procedures

SO 22-08 Hospital Guard Duty and Rotation Procedures

2-83-1 Purpose

The purpose of this policy is to outline the procedures Albuquerque Police Department (Department) sworn personnel and Prisoner Transport Unit personnel must follow when taking in-custody individuals to a hospital, including those individuals who have been admitted into a hospital facility for an extended period of time.

2-83-2 Policy

It is the policy of the Department to ensure that medical care is provided to in-custody individuals and intoxicated persons when such care is needed based on approved medical and legal procedures.

N/A

2-83-3 Definition

A. Intoxicated Person

A person whose mental or physical functioning is substantially impaired due to the use of drugs and/or alcohol and the person has become disorderly or unable to care for their safety.

B. Guard



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For the purpose of this policy, sworn or Prisoner Transport Unit personnel who have been assigned to watch over an in-custody individual to prevent the in-custody individual from leaving hospital facilities and to control access to the in-custody individual from non-medical staff.

C. District Attorney Bridge Team

An Office of the Second Judicial District Attorney team that meets daily to review caseloads.

7 2-83-4 Rules

A. Hospital Guard Duty Call for Service Determination

N/A

1. Supervisors may consider having the arresting sworn personnel issue a criminal summons or submit the case to the District Attorney (DA)'s Office for prosecution as an alternative to guarding any non-violent in-custody individual suspected of committing a misdemeanor crime.
2. When sworn personnel transport an individual who is in-custody for a felony crime to a hospital facility for medical treatment and hospital staff informs the officer that they will admit the individual to the hospital facility, sworn personnel shall:
 - a. Notify their immediate supervisor; and
 - b. Complete a Pre-Booking Worksheet and Criminal Complaint form.
 - i. If applicable, sworn personnel shall have a copy of any confirmed warrants.
3. The immediate supervisor shall notify the on-duty Watch Commander of the in-custody individual's admission to a hospital facility.
4. The on-duty Watch Commander shall:
 - a. Determine if the individual shall remain in-custody if Department personnel transported them from the Prisoner Transport Center or other detention centers to a hospital facility, and Metropolitan Court personnel have stamped their Pre-Booking Worksheet as release on recognizance (ROR);
 - b. Contact the on-call DA and provide them with the following information and documentation:
 - i. The Criminal Complaint;
 - ii. The facts of the case;
 - iii. The severity of the crime;
 - iv. The individual's previous criminal history; and
 - v. Whether they believe the individual is a danger to the community based upon their current medical status.
 - c. If the on-duty Watch Commander wants an additional review, they may request a further review from the Office of the DA's Bridge Team (Bridge Team).

N/A



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N/A

i. The Bridge Team will determine whether the individual will remain in-custody.

d. If it is determined that the individual shall be released at the hospital, ensure the charging officer submits the case to the DA for prosecution before the end of their shift consistent with SOP Submission of Felony Cases to the District Attorney (refer to SOP Submission of Felony Cases to the District Attorney for sanction classifications and additional duties).

N/A

5. When the on-call DA does not feel comfortable making the decision whether to release the individual or maintain custody at the time that the in-custody individual is admitted into the hospital facility, the on-call DA will forward the information to the Bridge Team for their formal determination.

a. The Bridge Team meets daily and will be responsible for making the final determination.

b. If the Bridge Team advises that a hospital guard duty guard call for service is necessary, sworn personnel shall continue the hospital guard duty per the hospital duty on-call rotation listed in this Standard Operation Procedure (SOP).

c. If the Bridge Team advises that the in-custody individual's history and circumstances of their arrest do not necessitate a hospital guard duty call for service, Department personnel shall no longer be assigned to guard the individual, and the individual shall be released to the hospital facility.

6. If the on-duty Watch Commander and the on-call DA are unable to make a determination by the end of the on-duty Watch Commander's work shift, they shall notify the incoming Watch Commander for the affected area command.

a. The Watch Commander for the affected area command shall follow the above steps until the Bridge Team has made the final decision.

7. Sworn or Prisoner Transport Unit personnel shall notify the hospital facility charge nurse and security personnel when the individual is being released from police custody, and any police restrictions on the individual are lifted.

N/A

B. Domestic Violence

Department personnel shall not leave individual in-custody for domestic violence unguarded at a hospital facility as outlined in SOP Domestic Violence (refer to SOP Domestic Violence for sanction classifications and additional duties).

C. Hospital Guard Duty Rotation Cycle

1. The hospital guard-duty rotation schedule takes effect at midnight on the first of each month and shall rotate as follows:

a. January is the Northeast Area Command;



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- b. February is the Southeast Area Command;
- c. March is the Valley Area Command;
- d. April is the Northwest Area Command;
- e. May is the Southwest Area Command;
- f. June is the Foothills Area Command;
- g. July is the Northeast Area Command;
- h. August is the Southeast Area Command;
- i. September is the Valley Area Command;
- j. October is the Northwest Area Command;
- k. November is the Southwest Area Command; and
- l. December is the Foothills Area Command.

D. Hospital Guard Duty Assignments

1. Prisoner Transport Unit (PTU) personnel shall be responsible for the first (1st) in-custody individual admitted into any hospital or medical facility.
 - a. PTU personnel shall only assume guard duty once an in-custody individual has been admitted and moved to a hospital room.
 - b. When PTU personnel are unable to accommodate guard duty responsibilities due to staffing levels, area command personnel scheduled for hospital guard duty that month shall be responsible for guarding the in-custody individual until PTU personnel are able to cover the guard duty shift.
2. When a second (2nd) in-custody individual is taken to any hospital, the area command scheduled for hospital guard duty that month is responsible for guarding the second (2nd) in-custody individual.
3. If there is a third (3rd) in-custody individual taken to any hospital, area command personnel that are scheduled for the following month shall assume hospital guard duty for the third (3rd) prisoner.
 - a. This order shall continue for the fourth (4th) and subsequent in-custody individuals.
4. At no time shall area command personnel be responsible for more than one (1) in-custody individual in any given month.
5. If area command personnel for the current month are relieved of their hospital guard duty during their assigned month, and there are area command personnel from the following months that are guarding an in-custody individual, it is area command personnel who are responsible for that current month's hospital guard duty to relieve that area command's personnel.



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N/A

1. Sworn personnel shall transport the in-custody individual to a hospital within the Department's jurisdiction before booking. Sworn personnel shall follow the procedures outlined in SOP Restraints and Transportation of Individuals when transporting the in-custody individual (refer to SOP Restraints and Transportation of Individuals for sanction classifications and additional duties).

- a. If the in-custody individual has insurance that ensures their care at a specific hospital or prefers a particular hospital, sworn personnel shall transport the individual to that hospital. This procedure applies as long as the hospital is within the Department's jurisdiction.

B. In-Custody Individual Requiring Emergency Medical Treatment

1. Sworn personnel shall ensure when an in-custody individual needs emergency medical treatment, the in-custody individual is transported by ambulance only.
2. When possible, sworn personnel shall ensure that the in-custody individual's identification documentation is available for ambulance and hospital personnel.
 - a. If identification papers are unavailable, sworn personnel shall provide any available identification information, such as the in-custody individual's name and date of birth, to ambulance and hospital personnel.
3. In all cases involving emergency medical services (EMS) personnel, sworn personnel shall defer to their choice of a hospital.

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C. Securing Weapons at Hospitals

1. If sworn or Prisoner Transport Unit personnel are injured or wounded and are admitted to a hospital facility, their weapon(s) shall be secured by the accompanying sworn or Prisoner Transport Unit personnel or a supervisor.
2. If sworn or Prisoner Transport Unit personnel are called to a hospital for any event that requires them to take law enforcement action, they shall remain armed. This includes when they must enter the interior of the hospital.
3. If sworn or Prisoner Transport Unit personnel are not responding to a call at a hospital but are on official business, they shall remain armed.

D. Sworn or Prisoner Transport Unit Personnel's Responsibility While on Hospital Guard Duty Assignments

1. Sworn or Prisoner Transport Unit personnel who assume hospital guard duty shall:
 - a. Ensure that all arresting documentation is present at the start of their hospital guard duty shift;



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- b. If the arresting documentation is not with the in-custody individual, the sworn or Prisoner Transport Unit personnel who assume hospital guard duty shall contact the original arresting officer or detective to ensure those documents are on hand.
- c. Restrain in-custody individuals at all times, and this includes when hospital staff move the in-custody individual to another location within the hospital facility or when the individual uses the restroom and shower facilities;
 - i. Exceptions may be made for medical requirements, the elderly, or other individuals with physical handicaps that prevent using handcuffs.
 - ii. Department personnel shall carefully evaluate the circumstances when determining whether exceptions apply. The nature of an in-custody individual's illness, injury, or physical handicap when considering the level of threat the in-custody individual poses to Department personnel.
 - iii. Department personnel are reminded that partial restraint is preferred to having an in-custody individual not restrained at all.
- d. Prohibited in-custody individuals from using any hospital telephones or cell phones;
 - i. Sworn or Prisoner Transport Unit personnel shall ensure all telephones are removed from the hospital room;
- e. Verify that only plastic utensils are used for meals and shall ensure that they collect all utensils and straws at the end of each meal;
 - i. Department personnel shall only order meals for in-custody individuals in person through hospital personnel.
- f. Request to transfer the in-custody individual to another hospital room as soon as possible if the safety or security of an in-custody individual becomes compromised;
- g. Prohibit visits from the in-custody individual's family members, attorney(s) or friends; and
 - i. Unless exigent circumstances exist and the visit has been pre-approved by the Bureau Deputy Chief or the on-call duty Chief.
- h. Advise anyone who asks them to deviate from the requirements in this Standard Operating Procedure (SOP) that they are prohibited from doing so.

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- 2. Sworn personnel shall not leave an in-custody individual unattended at a hospital or medical facility.
 - a. When feasible, sworn personnel shall maintain line-of-sight supervision of the in-custody individual.
 - b. If the in-custody individual has a medical isolation order, sworn personnel shall perform visual checks of the in-custody individual every fifteen (15) minutes.

E. Protective Custody of Intoxicated Persons

N/A

- 1. Sworn personnel may transport intoxicated persons who have become disorderly to a health care facility for protective custody when it appears that the intoxicated person:



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- a. Has no local residence;
- b. The intoxicated person is unable to care for their safety; or
- c. Is a danger to others if not taken into protective custody.

N/A

2. Sworn personnel may transport intoxicated persons to the Comprehensive Assessment Recover through Excellence (CARE) Campus Detox (formerly Metropolitan Assessment and Treatment (MATS)) as long as they are non-violent and are medically cleared for admission.

- a. Intoxicated persons must be able to walk under their own power.

3. Sworn personnel shall take an individual to the nearest health care facility within Bernalillo County if an individual discloses that they are using prescription medication and do not have it in their possession.

N/A

4. Sworn personnel shall complete a Uniform Incident Report on all protective custody incidents by the end of their shift, consistent with SOP Reports (refer to SOP Reports for sanction classifications and additional duties).