



**MARK S. INCH  
SECRETARY**

**PROCEDURE NUMBER: 404.002**

**PROCEDURE TITLE: ISOLATION MANAGEMENT ROOMS AND  
OBSERVATION CELLS**

**RESPONSIBLE AUTHORITY: OFFICE OF HEALTH SERVICES**

**EFFECTIVE DATE: JUNE 19, 2020**

**INITIAL ISSUE DATE: NOVEMBER 19, 2002**

**SUPERSEDES: HSB 15.03.14 AND HCS 25.02.01**

**RELEVANT DC FORMS: DC4-527 AND DC4-650**

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**ACA/CAC STANDARDS: NONE**

**STATE/FEDERAL STATUTES: SECTION 945.42, F.S.**

**FLORIDA ADMINISTRATIVE CODE: RULES 33-404.103(9), 33-404.106, AND 33-602.222(7)(b), F.A.C.**

**PURPOSE:** To establish standards and guidelines for the certification of isolation management rooms and observation cells.

**DEFINITIONS:**

- (1) **Comprehensive Health Care Contractor (CHCC)**, where used herein, refers to contracted staff that has been designated by the Department to provide medical, dental, and mental health services at designated institutions within a particular region.
  - (2) **Isolation Management Room**, where used herein, as defined in Rule 33-404.103(9), F.A.C., refers to a cell in an infirmary mental health care unit or inpatient mental health care unit that has been certified as being suitable for housing inmates with acute psychological impairment or inmates who are at risk for self-injury.
  - (3) **Observation Cells**, where used herein, refers to cells in areas outside of an infirmary/inpatient mental health unit that meet the safety and custodial standards of an isolation management room.
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**SPECIFIC PROCEDURES:**

*These standards and responsibilities apply to both Department staff and Comprehensive Health Care Contractor (CHCC) staff.*

- (1) Observation cells may be used as overflow at major institutions when the need for isolation management rooms exceeds availability. Accordingly, observation cells will be used as part of healthcare delivery when the inmate needs an isolation management room (as determined by medical or mental health staff) and one is not available at the institution of residence. Otherwise, these cells will be used for security purposes.
- (2) Each major institution will maintain the isolation management rooms and/or observation cells in accordance with this procedure. At least one isolation management room will be maintained at each major institution having an inmate population of more than 500.
- (3) The Institutional Health Services Administrator will maintain a current list of isolation management rooms and observation cells. S/he will also submit a quarterly report to the CHCC's regional health services administration authority. The report will contain the following information:
  - (a) cells designated for use as isolation management rooms and their certification status;
  - (b) cells designated for use as observation cells and their certification status; and
  - (c) number of serviceable suicide prevention garments, blankets, and mattresses (as noted in sections [5][1] and [5][m] of this procedure) available for immediate use at the institution.

**Note:** If a cell designated for use as an isolation management room/observation cell is not certified, the report will note any impediments to certification or justification for the choice not to certify the cell.

- (4) The CHCC's regional health services administration authority or designee will provide regional isolation management room/observation cells status summary reports quarterly to the Regional Medical Director, the Regional Mental Health Director, and the Department's Chief of Mental Health Services or designee.

(5) **ISOLATION MANAGEMENT ROOM/OBSERVATION CELL STANDARDS:**

(a) **Doors:**

1. Doors will be made of solid-core hardwood, metal, or other hard, shatter-resistant, and tamper-resistant material and will have a window that will permit scanning of the room when the door is closed.
2. A standard cell door (with bars) or expanded metal door is acceptable, provided that the bars are shielded from the inside with shatter-resistant material in a manner preventing the anchoring of a noose.
3. Doors may open outward or inward. Outward opening doors are preferable, but not required. Inward opening doors will have flush, beveled, or retractable type hinges, or have been modified to keep the patient from utilizing it to securely anchor any kind of noose. The door will have no other accessible features greater than 18" from the floor to which material may be securely hung or tied.
4. A sliding door is acceptable if the track cannot be easily blocked and if the door cannot be tied shut.

- (b) **Floors/Walls:** Floors/walls will be solid, smooth, and high impact resistant without metal or other protrusions. Walls will lack features that are higher than 18" from the floor to which material may be securely hung or tied. Floor tile and baseboards (plastic) are acceptable if attached securely to the floor and walls.

- (c) **Ceilings:** Ceilings will be solid with no appendages that can be securely grasped or tied onto with material or, if present, such features are at least ten feet above the floor.

- (d) **Vents:** Vents will be covered with small wire mesh or a shatter resistant material in such a way that one would be unable to securely tie or hang cloth or other material from the vent. The holes in the mesh or other material will not exceed 1/4". Space around the vent frame is sealed to prevent placing material between the vent frame and the wall or ceiling. Vents will have no exposed sharp edges, or if present, such features will be at least ten feet above the floor.

- (e) **Lighting:** Lighting will be recessed and covered with shatter-resistant material. The lighting fixture need not be recessed if the lighting fixture is security-rated and has a shatter-resistant cover. The lighting fixture will have no exposed sharp edges and will lack space between it and the ceiling (or other mounting surface). The fixture will not possess features to which material can be securely tied/hung or, if such features are present, they are at least ten feet above the floor.

- (f) **Sprinklers:** Sprinklers must be inaccessible to the inmate (i.e., at least ten feet above floor) or recessed inside a cone-shaped or other suitable housing onto which no material can be securely tied/hung. There must be no space between the base of the housing and the surface to which it is attached. It is acceptable to use a sprinkler not recessed in a cone-shaped or

other suitable housing if it is out of the inmate's reach (i.e., at least ten feet above floor) and if it is connected to a coupling that would separate under 70 pounds of weight. Material used to fill space between the fixture and ceiling will be hard epoxy or other material that cannot be easily removed.

- (g) **Windows:** Windows must be made of shatter-resistant material. Any existing glass window that is not shatter resistant must be covered with a security-rated screen or other material that prevents access to the glass. Window cranks, when present, will be flush with the window frame. An observation window located in the door or a wall will be large enough to permit scanning of the room. Devices such as convex mirrors, video monitors, etc., may be used to facilitate observation of the cell. Such a device will have no exposed sharp edges and will lack space between it and the ceiling (or other mounting surface). The fixture will not possess features to which material can be securely tied/hung.
- (h) **Toilet/Sink:** Toilet/sink fixtures will be made of metal and will be smooth and devoid of handles or parts to which material could be securely tied or hung. The fixture will be mounted against the wall with the water shut-off valve located outside the room. While the toilet and sink are typically installed as a single, combined unit, the two may be installed as units to accommodate inmates who require use of a wheelchair.
- (i) **Smoke Detectors:** Smoke detectors, when present, will be:
  - 1. at least ten feet above the floor;
  - 2. recessed in the wall/ceiling; or
  - 3. enclosed in small wire mesh or other suitable housing that prevents access to the smoke detector. The wire mesh or other enclosure will have holes that are not larger than ¼” and lack features to which material can be securely tied/hung.
- (j) **Electrical Outlets:** Electrical outlets are not permitted. Electrical switches; e.g., to adjust lighting, are permissible if switches cannot be removed by the inmate or otherwise manipulated to gain access to the wiring. Switches will not protrude so far as to be used to inflict serious self-injury.
- (k) **Beds:**
  - 1. Beds are not required. However, metal, heavy molded plastic, or solid concrete structures/beds are all acceptable.
  - 2. All surfaces must be smooth so that cloth or other material cannot be securely tied to such.
  - 3. The bed must be secured to the floor or wall to prevent the inmate from standing it upright and using it as a prop.
  - 4. If the bed has features to which cloth or other material can be securely tied, it must not be more than 18” above the floor.
  - 5. Holes around the edges of the bed (to secure restraints) are acceptable if the holes are not more than 18” above the floor.
- (l) **Mattresses:** One plastic/vinyl-covered, triple-stitched or sealed seam mattress will be immediately available for each isolation management room and observation cell. Use of a cloth mattress, without plastic/vinyl covers, is expressly prohibited when the cell is being used for a self-harm observation status admission.

- (m) **Blankets/Garments:** Suicide prevention blankets and garments will be immediately available for each isolation management room/observation cell at each institution. These blankets and garments will be triple-stitched and made from heavy canvas (weight #12) or other tear-resistant material.
- (n) Gowns or other garments providing for adequate coverage of the upper and lower torso will be used at institutions housing female inmates. Thirty-inch wide wraps or other garments will be used at institutions housing male inmates. The facility will maintain a sufficient supply of suicide prevention blankets and garments that will be immediately available for each isolation management room and observation cell. At a minimum, the following will be immediately available:
  - 1. three blankets and garments per each isolation management room and observation cell at mental health outpatient facilities; and
  - 2. two blankets and garments per each isolation management room in a mental health inpatient unit (i.e., crisis stabilization unit, transitional care unit, or corrections mental health treatment facility).

(6) **MAINTENANCE OF APPROVED MATTRESSES, BLANKETS, AND SUICIDE PREVENTION GARMENTS:**

- (a) Security staff will inspect the condition of each mattress, blanket, and privacy apparel in use at least every 24 hours.
  - 1. All items with tears, loose stitching, or other significant defects will be replaced immediately.
  - 2. The inspection will be recorded on the "Observation Checklist," DC4-650.
- (b) Security staff will also replace cloth blankets and privacy apparel in use:
  - 1. when soiled,
  - 2. after three continuous days of use, and
  - 3. as requested by mental health or medical staff.
- (c) Each replacement of blanket or apparel will be recorded on the DC4-650.
- (d) Each institution will ensure blankets and privacy garments are cleaned and treated for fire retardation after each episode of use or after three consecutive days of use. Application of fire retarding chemicals is not required on blankets/garments made of fire-resistant materials (as reported by the manufactures).
- (e) The Institutional Health Services Administrator will maintain an inventory of approved mattresses, blankets, and privacy apparel; and will ensure that sufficient numbers of each are immediately available on site at all times.

(7) **CERTIFICATION OF ISOLATION MANAGEMENT ROOMS AND OBSERVATION CELLS:**

- (a) Prior to use, each isolation management room/observation cell will be certified using the "Checklist for Review of Isolation Management Room/Observation Cell," DC4-527.

- (b) Each isolation management room and observation cell will be inspected and certified at least yearly and at any time damage or a structural change occurs that affects one or more of the criteria listed in this procedure.
- (c) Isolation management room/observation cell certification will be the responsibility of the Regional Mental Health Director or the CHCC's Director of Mental Health Services (DMHS).
- (d) In addition, the Department's Chief of Mental Health Services, or her/his designee, or a Psychologist designated by the Department's Chief of Mental Health Services as having sufficient expertise for this specific purpose, can inspect and certify isolation management rooms/observation cells. A Psychologist designated by the Department's Chief of Mental Health Services to certify these cells is granted that authority only for a specific institution and only for the occasion on which the designee is assigned this task by the Department's Chief of Mental Health Services.
- (e) The Regional Mental Health Director, the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee will:
  - 1. inspect each isolation management room/observation cell for compliance with all applicable standards;
  - 2. complete the DC4-527; and
  - 3. provide the original to the Health Services Administrator at the institution where the isolation management room/observation cell is located.
- (f) The Regional Mental Health Director or the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee will inform the Warden, in writing, if the isolation management room/observation cell is non-compliant with applicable standards and will list the modification(s) required for compliance.
- (g) In the event that an isolation management room/observation cell is structurally altered or significantly damaged, the Chief Health Officer/Institutional Medical Director will notify the Regional Mental Health Director, the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee. If the isolation management room/observation cell fails to meet all applicable certification standards, the Chief Health Officer/Institutional Medical Director will decertify the isolation management room/observation cell. The isolation management room/observation cell will remain decertified until inspected and re-certified by the Regional Mental Health Director, the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee. While decertified, the room may be used with self-injurious inmates and other inmates in need of observation for mental health reasons provided the Chief Health Officer/Institutional Medical Director approves such use, and the inmate patient is observed continuously. The observations will be recorded on the DC4-650.
- (h) The Chief Health Officer/Institutional Medical Director will provide written notification to the Regional Mental Health Director, the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee when repairs have been completed.

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- (i) The Regional Mental Health Director, the CHCC's DMHS, or the Department's Chief of Mental Health Services or her/his designee will inspect the isolation management room/observation cell within seven calendar days of notification.

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Chief of Staff