

**CITIZENS' LAW ENFORCEMENT REVIEW BOARD
POLICY RECOMMENDATION**

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BACKGROUND:

The Citizen's Law Enforcement Review Board (CLERB) investigated several cases alleging deputies failed to obtain immediate and appropriate medical treatment for arrested individuals. The San Diego Sheriff's Office (SDSO) currently relies on Field Operations Manual Policy 25 D.1 – Prisoner Transportation to outline a deputies role and responsibility should an individual require medical attention during arrest and transport. SDSO P&P 11.24 - Aftercare outlines medical considerations following a use of force incident. A review of CA Government Codes 7286(b)(15) – Law Enforcement Use of Force Policies and 845.6 – Liability for Failure to Furnish Medical Care to Prisoners, California Penal Code 4015(b), along with three separate CLERB investigations identified the need for these policies to be refined.

GC 7286(b) states, *"Each law enforcement agency shall, by no later than January 1, 2021, maintain a policy that provides a minimum standard on the use of force. Each agency's policy shall include all of the following: (15) A requirement that officers promptly provide, if properly trained, or otherwise promptly procure medical assistance for persons injured in a use of force incident, when reasonable and safe to do so."*

GC 845.6 states, *"Neither a public entity nor a public employee is liable for injury proximately caused by the failure of the employee to furnish or obtain medical care for a prisoner in his custody; but, except as otherwise provided by Sections 855.8 and 856, a public employee, and the public entity where the employee is acting within the scope of his employment, is liable if the employee knows or has reason to know that the prisoner is in need of immediate medical care and he fails to take reasonable action to summon such medical care. Nothing in this section exonerates a public employee who is lawfully engaged in the practice of one of the healing arts under any law of this state from liability for injury proximately caused by malpractice or exonerates the public entity from its obligation to pay any judgement, compromise, or settlement that is required to pay under subdivision (d) of Section 844.6."*

Per SDSO's Field Operations Policy 25, Section D.1, *"If, during the arrest and transportation, a prisoner becomes sick or injured, the transporting deputy shall immediately seek medical attention for the prisoner."*

Per SDSO's P&P 11.24, Aftercare, *"Whenever a subject requires or reasonably requests medical attention after a use of force incident, a deputy shall promptly provide medical attention, request medical aid, and/or transport them to an emergency medical facility when safe to do so. Medical assistance should be obtained for any subject who exhibits signs of physical distress, visible injury, alleged injury or complaint of pain, lack of consciousness, or any other reason the deputy may deem necessary, based on their training and experience. Deputies should continuously monitor a subject until a medical assessment has been provided by a trained medical professional. If a subject refuses medical attention, the refusal should be fully documented in any related reports and, whenever practicable, should be recorded or witnessed by another deputy and/or medical personnel. The primary deputy should ensure that anyone providing medical assistance or receiving custody of a subject, is informed the individual was subjected to force. Notification should include all relevant information, including the type of force used, duration of the force or struggle, visible injuries, respiration impairment, and any other information that could be relevant to the health and safety of the subject. All use of force incidents involving incarcerated persons require the individual be medically evaluated."*

In CLERB Case [REDACTED], Body Worn Camera (BWC) footage showed [REDACTED] made repeated and consistent complaints of pain during his arrest, transport to jail, and while in the jail sallyport. Although deputies acknowledged [REDACTED] complaints, they did not call for paramedics, nor did they transport him to a hospital to be evaluated. [REDACTED] was instead screened by medical staff during intake at Vista Detention Facility (VDF). Following his release from custody, [REDACTED] sought medical attention at a hospital and had documented injuries.

In CLERB Case [REDACTED], BWC footage showed following a use of force, [REDACTED] complained of pain and requested to be treated by paramedics on scene. Deputies acknowledged [REDACTED] request but did not ensure that paramedics evaluated him on scene and did not transport him to a medical facility for treatment. [REDACTED] was instead screened by medical staff during the intake process at VDF.

In CLERB Case [REDACTED], following a use of force, BWC footage showed [REDACTED] made consistent complaints of pain. Deputies did not request paramedics, nor did they transport her to a hospital to be evaluated. [REDACTED] was instead medically screened by jail staff during the intake process at VDF and was later transported to a hospital for further evaluation.

The above cases occurred in North County San Diego and involved the Vista Detention Facility. The injuries ranged from a [REDACTED] to a [REDACTED]. CLERB's investigations determined that in all three cases, deputies relied on the jail's intake medical screening as the sole method for obtaining medical care for injured arrestees. These cases highlight the need for reinforced training and clearer operational guidance to ensure that deputies understand their responsibility to secure the appropriate medical evaluation prior to booking.

CLERB has identified gaps within SDSO P&P 11.24 and SDSO Policy 25 Section D.1. Both policies are clear in that if a subject requires or requests "*medical attention*" it shall be promptly provided. However, neither policy clearly defines what qualifies as "*medical attention*." This ambiguity leaves interpretation to individual deputies which can result in delayed access to necessary medical care, missed medical emergencies, and exposes deputies, jail medical staff, and the department to liability.

CLERB reviewed several California Police and Sheriff Departments and their policies relating to Sick/Injured Arrestees and Use of Force Aftercare. The results showed that many agencies throughout California rely on Lexipol's standardized California specific template as a foundation for their Medical Aid and Response Policies. An example of Lexipol-based language can be seen in the Riverside County Sheriff's Department Standards Manual (DSM).

Riverside Sheriff Department DSM 414.17 – Sick or Injured Arrestees:

"If an arrestee appears ill or injured, or claims illness or injury, the arrestee should be medically cleared prior to booking. If the deputy has reason to believe the arrestee is feigning injury or illness, the deputy should contact a supervisor, who will determine whether medical clearance will be obtained prior to booking. If the jail or detention facility refuses to accept custody of an arrestee based on medical screening, the deputy should note the name of the facility person refusing to accept custody and the reason for refusal, and should notify a supervisor to determine the appropriate action. Arrestees who appear to have a serious medical issue should be transported by ambulance to an appropriate medical facility. Nothing in this section should delay a deputy from requesting EMS when an arrestee reasonably appears to be exhibiting symptoms that appear to be life threatening, including breathing problems or an altered level of consciousness, or is claiming an illness or injury that reasonably warrants an EMS response in accordance with the deputy's training." (06/18/2026)

POLICY RECOMMENDATIONS:

1. It is recommended SDSO add policy language to P&P 11.24 and Field Operations Manual Policy 25 D.1, stating, medical attention for sick and/or injured arrestees "*shall occur prior to the intake booking process.*" This clarification will help ensure that deputies do not rely on the intake medical screening during the booking process as the sole means of providing medical attention to arrestees.
2. It is recommended SDSO revise their policy to clearly define what constitutes acceptable medical attention. For example, "*Appropriate medical attention may consist of examination by fire personnel, paramedics, or hospital medical staff.*" This clarification will reduce subjective interpretations and ensure deputies understand when and how medical care must be provided.

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