# HOWARD COUNTY DEPARTMENT OF CORRECTIONS POLICY & PROCEDURE

	SUBJECT:	Inmate Rights, Discipline and Services		
	P & P #:	H-712		
OOWARA .	TITLE:	Inmate/Detainee Barber Sanitation and Operation		
COUNTY	EFFECTIVE DATE:	December 5, 2019		
DEPARTMENT 1975 COLUMN	REVIEWED BY:	Parm		
		Prince Asempa, Administrative Captain		
	REVIEWED BY:	ancher Hing Wesseld		
		Andrea King-Wessels, Deputy Director		
	AUTHORITY:	Just Havenay G		
		Jack Kavanagh, Director		

**POLICY:** It is the policy of the Howard County Department of Corrections to provide the basic barber services of haircuts and clipper shaves. The sanitation of barber operations is of the utmost concern because of the possible transfer of diseases. Barbering is generally done under the oversight of the 4 to 12 Shift Leader. For segregation inmates, the 8 to 4 Shift Leader is responsible for barber services. The Medical Department shall provide guidance as needed. Barbers as much as possible will be inmates having experience or demonstrated skills or abilities in the hair care professions as possible. Both the security of the barbering operation and health safety requirements are important elements of policy and practice.

**REFERENCES:** Maryland Commission on Correctional Standards – Adult Detention Centers Standard .05 J and Performance Based National Detention Standards 2011 Section 1.2.

#### **DEFINITIONS**:

<u>Tool Crib</u> – A stationary or mobile locked secure area used for tool control, storage, and issue.

#### **PROCEDURES**:

#### I. General Operations

- A. A barber room is located within the Resource Center and supplied with a sink and barber chairs. This room is used only at designated times under direct officer supervision.
- B. The haircut schedule generally provides for a haircut every other week. This is offered Monday thru Friday from 6:00 p.m. thru 10:00 p.m. for general population. ICE Detainees are scheduled on Fridays on the 8 to 4 Shift. For disciplinary segregation inmates, haircuts are offered once per month (1st weekend of month) during the 8:00 a.m. thru 4:00 p.m. time frame. For administrative segregation and Special Management Unit (SMU) the schedule is Saturday and Sunday every other

weekend on the 8 to 4 shift. The scheduled times are subject to change by a Shift Leader or higher authority due to operational needs of the facility.

#### II Barber Equipment

- A. The correctional officer assigned to barber shop post shall inspect and inventory all equipment for condition, serviceability and accountability. The accountability shall be conducted prior to the shop opening and end of closing. This shall be recorded on the Barber Shop Inventory HCDC Form H-712b attached as Appendix 2 then submitted to the Compliance Manager for review and audit compliance.
- B. A sufficient amount of barbicide shall be provided for maintaining sanitary conditions for each equipment use.
  - 1. The supervising officer shall ensure that the barbicide is used properly.
  - 2. A set of instructions shall be included.
  - 3. The assigned officer shall ensure the inmate barbers adhere to the instructions as follows:
    - a. Ensure all equipment is in good condition. Report any broken or damaged equipment to the Administrative Captain and supervising officer;
    - b. Clean clippers and combs before and, after use on each client;
    - c. Follow all sanitation and safety practices; and
    - d. Ensure clipper guards and combs are cleaned and sanitized prior to being returned in the drawers of the barber crib.
- C. The Hendricks Hall Officer shall inspect and inventory all equipment for accountability, condition, and service ability of the assigned Barber Kit prior to issuance. The Hendricks Hall Officer shall supervise all inmate haircuts.

#### **Barber Kit Supplies**

- 1. Barbicide:
- 2. Electric Clipper;
- 3. Mirror;
- 4. Clipper Guard;
- 5. Clipper Oil; and
- 6. Small Brush.

#### III. Record Keeping

A. An assigned housing unit officer shall be responsible for scanning an inmate/detainee identification card into the electronic SallyPort, Records, barber shop/haircut file.

- B. The Barber Haircut List is maintained on the SallyPort, in the format that is attached as Appendix 1. The attached form H-712a would be used only in the event of SallyPort outage.
- C. The correctional officer assigned to supervise all haircuts shall complete the Barber Shop Report, HCDC Form H-712c attached as Appendix 3.
- D. All required forms shall be forwarded to and maintained in the Compliance Office.

#### IV. Directors Prerogative

The Director has the authority to revise/change a policy or post order as needed to meet the operational demands of the Department. As the changes are initiated, they may be communicated by an email, memoranda or in rare circumstances verbal due to unforeseen situations.

**ATTACHMENTS:** Appendix 1, Barber Haircut List, HCDC Form H-712a.

Appendix 2, Barber Shop Inventory, HCDC Form H-712b.

Appendix 3, Barber Shop Report, HCDC Form H-712c.

**RESCISSIONS:** HCDC Policy H-712 Inmate/Detainee Barber Sanitation and Operations

effective December 4, 2018, December 4, 2017.

# **Howard County Department of Corrections**

### **Barber Haircut List**

Housing Unit:	Date:
Officer(s):	

Inmate/Detainee Name	ID Number		Comments	
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
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		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused
		Haircut	Clipper Shave	Refused

Note: Inmates/Detainees only receive one (1) haircut every other week.

# **Howard County Department of Corrections**

# **Barber Shop Inventory**

Officer in Charge: (Print)		Signature:			
Date:		Shift: (Circle One)			
	Amount	Items	Location	S (Satisfactory)	U (Unsatisfactory)
Top Level	2	Clipper #01 & #02	Barber Shop		(
	2	Trimmer #03 & #04			
	2	Set of Clipper Guard (Total 8)			
	2	Small Bottles of Barcide			
	2	Tubes of Clipper Oil			
Drawer #1					
	N/A	Neck Clothes			
	1	Bottle Disinfectant Spray			
		Neck Strips			
Drawer #2					
	1	Mirror			
Drawer #3					
Drawer #3	2	Capes			
		Сирся			
Drawer #4					
		Empty			
Comment: _					
_					

# **Howard County Department of Corrections**

# **Barber Shop Report**

(To be completed after each use)

Date:			
Time Opened:	a.m. / p.m. (circle one)	Time Closed:	a.m. / p.m. (circle one)
1.   I confirm all barber too	ls were cleane	d and sanitized.	
2. $\Box$ I confirm the inventory	was complete	and secured.	
3. $\square$ I confirm the barber she	op was cleane	d prior to securing the room	1.
Note any problems:			
Supervising Officer Signature		(Print name)	Shift
Shift Supervisor Review:	Signat	Date:	
	Signa	uic	