

POLICY & PROCEDURES

CHAPTER:	3	Institutional Operations	3. 2. 10
SECTION:	2	Safety and Emergency Procedures	EFFECTIVE DATE: 7 / 21 / 2020
SUBJECT:	10	Hostage Situation Plan	
STANDARDS: ACA – 4 – ALDF: 1C-01 (M), 1C-05 (M)			
APPROVED: _____			REVIEW DATE: 7 / 21 / 20
Dale Glass COMMISSIONER OF CORRECTIONS			REVISION DATE: 7 / 30 / 20
Rescind: 3.2.10 dated 5/11/16 Cancel:			

I. POLICY

It is the policy of the St. Louis City Division of Corrections to suppress hostage situations as quickly as possible with the necessary amount of force without permitting inmate escape or release from custody.

II. RESPONSIBILITIES

All Division of Corrections staff, contractors and volunteers are responsible for adhering to the following procedures.

III. DEFINITIONS

Correctional Staff: Unless otherwise qualified, the term "Correctional staff" includes contracted staff and volunteers.

Division; Division of Corrections: Means the St. Louis City Division of Corrections.

Hostage: Any act whereby an individual or group of individuals is held against their will.

Hostage-taker: Any person(s) who holds another person(s) against their will.

Stockholm Bonding: Bonding born out of traumatic conditions or out of feeling of helplessness or fear of losing one's life, etc., this often gives the upper hand to the perpetrator.

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IV. PROCEDURES

A. General Information

1. Any Correctional Staff taken hostage relinquishes all authority or control.
2. Negotiators will not make concessions that allow inmates to escape or be released or avoid criminal prosecution for their actions.
3. Hostage Safety Guidelines:

The Do's and Don'ts for the Person(s) Held Hostage

- 1) Be a good listener. Limit your conversation, especially philosophical discussions.
- 3) Do maintain eye contact. Don't stare.
- 4) Do follow orders to the best of your ability but, don't be a go-fer by joining the side of the hostage taker.
- 5) Do rest as much as possible. It is important that you rest and eat to keep up strength for the rescue phase.
- 6) Do remain alert. Be acutely aware of circumstances within the area of captivity as well as remaining alert to outside cues signaling rescue plans or clear opportunities for escape.
- 7) Do be a calming agent. Remain calm and, ideally, have a calming effect on the hostage-taker and other hostages.
- 8) Do accept the situation. Recognize and accept the role of person being held hostage.
- 9) Do state Medical Condition. Make hostage-taker aware of your medical condition if any.
- 10) Don't be a hero. You should not try to be the rescuer or the negotiator. Others are trained and are working for your safe release.
- 11) Don't attempt to escape. Unless you are 100 percent sure you will be successful.
- 12) Don't attempt to hide. Stay in plain view of the hostage-taker.

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- 13) Don't negotiate. Never try to be a negotiator while you are a hostage.
4. The person(s) held hostage is of primary concern. Demands made by the hostage-taker are heard and carefully considered. If the demands of the hostage-taker do not further endanger the lives of the hostage or others, the negotiator uses demands as a negotiating point to gain the hostage-taker's confidence, buy time, and gain the release of the hostage.

B. Hostage Plan

1. The Correctional Staff recognizes that a person(s) has been taken hostage and notifies the immediate Supervisor of the location, the number and identity of inmates involved, and the victim(s) if known.
2. The person(s) held hostage follows the Do's and Don'ts of being a hostage.
3. The Supervisor takes steps to secure the immediate area of the hostage situation, move any other potential hostages to safety, and establish an inner perimeter. The Supervisor implements policy #3.1.10: Incident Reporting.
4. The Supervisor assigns a custody staff to maintain visual observation and/or conversation with the hostage taker until a Hostage Negotiator arrives.
5. The Supervisor in charge notifies all other Supervisors by telephone of the hostage situation, the location and number of inmates involved, and directs all areas of the facility to lock down.
6. The Supervisor assigns a custody staff to escort all the visitors out of the facility, and have all the entrances electronically or manually locked and secured. Only authorized personnel are allowed entry. (See DOC policy # 3.1.17 Lockdown/Unlock).
7. All Housing/dormitory unit Officers radio the Area Supervisor when their Housing Unit is locked down. The Shift/Area Supervisor directs available staff to secure facility perimeters. The Housing/dormitory unit Officers stays in the Units if it is safe to do so.
8. The highest ranking administrative personnel arriving in the facility assumes duty as the Incident Commander after being briefed by a ranking staff in the facility.
9. Upon arrival, the Hostage Negotiator is briefed by the Incident Commander and provided with any requested resources or information.
10. If person(s) held hostage is physically threatened, or if the situation is not resolved through the Hostage Negotiator, the Incident Commander in consultation

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11. with the Appointing Authority/designee makes the decision to use physical force.
12. When the situation is resolved and inmates have been restrained, the Correctional Officers conduct a strip search of the inmates and place them in Disciplinary Housing, until seen by mental health staff. (See DOC #3.1.11 Inmate Searches; 3.3.6 Major Violations & Disciplinary Hearing; 3.4.4: Disciplinary Segregation; and 4.2.13: Suicide Watch). Staff takes head count once situation is resolved, (See DOC #3.1.6: Inmate Counts).
13. Injury to staff will be photographed by a Supervisor and made part of an injury report and preserved for court prosecution. The injured employees will be transported to medical facility, if necessary. (See policy #1.3.20: Staff on the Job Injury and Fit for Duty Assignment). Copies of all reports will be forwarded to Record Retention Supervisor as soon as possible. (See DOC 1.1.21: Records Retention and Release of public Records).
14. Inmates will be photographed by a Supervisor if force was used to subdue the inmate perpetrator(s), and is made part of Disciplinary Report and retained for court prosecution. Inmates who are injured will be evaluated by contracted medical staff for further medical needs and make recommendations. (See policy #3.2.20: Emergency Medical Response). Copies of all Disciplinary reports including medical evaluation and recommendations will be forwarded to Record Retention Supervisor as soon as possible. (See DOC 1.1.21: Records Retention and Release of public Records).
15. The area of the incident will be preserved for criminal investigation. When the criminal investigation is complete, Correctional Officers will search the area. (See policy #3.1.28: Crime Scene Management and #3.1.12 Control of Contraband).
16. All Correctional Staff involved will complete Incident Reports to include injury report. (See policy #3.1.10 Incident Reporting). The incident is documented in IJMS/Event Log.
17. The Correctional Staff resume the normal operation at the directive of the Appointing Authority/designee.
18. The Appointing Authority/designee arranges a debriefing.