

**OKLAHOMA DEPARTMENT OF CORRECTIONS
CERTIFICATION CHECKLIST FOR SAFE/THERAPEUTIC SECLUSION/RESTRAINT CELL**

Facility _____ Inspected by : _____
Facility Mental Health Authority

Cell Number & Location _____ Date _____

Description	Approved	Not Approved	Comments
The Inside of the Cell Door <ul style="list-style-type: none"> ▪ Standard – Must be smooth, no handles, knobs, and protruding objects to hang from. 			
The Window in the Cell Door <ul style="list-style-type: none"> ▪ Standard – Large enough to allow observation in the cell, the window can be no smaller than a total of 144 square inches; all seams filled with security caulk with no rough edges; the window must be Lexan, Polycarbonate, or Plexiglas. Scratches cannot obstruct the view of the inside of the cell. 			
The Space Under the Cell Door <ul style="list-style-type: none"> ▪ Standard –Threshold must be placed outside of door or directly underneath the door, the threshold will not be inside the cell door. 			
Food Pass Through <ul style="list-style-type: none"> ▪ Standard – Must open to the outside, be secured and locked when not in use, must be flush mounted with door, with no gaps or the lip of the door sticking on side of door to rest food tray on. 			
The Cell Floor <ul style="list-style-type: none"> ▪ Standard – No floor coverings, no paint, smooth, no tile, no baseboards. 			
Floor Drains <ul style="list-style-type: none"> ▪ Standard – The openings in the drain can be no larger than 1/4 inch, must be secured with security type screws, flush with floor if there is a floor drain. Any new cell construction prohibits floor drain. 			

**OKLAHOMA DEPARTMENT OF CORRECTIONS
CERTIFICATION CHECKLIST FOR SAFE/THERAPEUTIC SECLUSION/RESTRAINT CELL**

Description	Approved	Not Approved	Comments
Walls <ul style="list-style-type: none"> ▪ Standard – Smooth with rounded corners, no rough edges, sharp edges, exposed conduit, electrical receptacles, fixtures, or light switches. Latex paint only. 			
Ceilings <ul style="list-style-type: none"> ▪ Standard – Concrete, steel, smooth surface. No exposed conduit. 			
Sprinkler Heads <ul style="list-style-type: none"> ▪ Standard – Must be suicide-resistant, pop-out, breakaway, or recessed. 			
Smoke Detection <ul style="list-style-type: none"> ▪ Standard –Not accessible or over bed, sink, etc. Cover holes must be 3/16 or less, will be used to protect the system. 			
Lights <ul style="list-style-type: none"> ▪ Standard – Must be seamless and sealed; no sharp edges, ridges, or cracks between light and ceiling. Must be secured with security screws and polycarbonate lens. 			
Grill Vents <ul style="list-style-type: none"> ▪ Standards – Holes in vents must be 3/16 or less, and secured with security screws. No sharp edges, ridges or openings. Must be sealed, seamless, and use of security caulk is required. 			
Toilet and Sink <ul style="list-style-type: none"> ▪ Standard – Suicide-resistant combination unit, stainless steel, rounded corners, secured either to wall or floor or both when installed, and a space between toilet and wall that cannot be used for suicidal completion behavior. 			
Restraining Bed, if available/appropriate <ul style="list-style-type: none"> ▪ Standard – A manufactured restraining bed must be secured to floor, rounded corners, no lower than 10-1/2 inches off the floor. 			
Mattress, Blankets and Smocks <ul style="list-style-type: none"> ▪ Standard – Safety materials are utilized for mattress, blankets and smocks. 			

**OKLAHOMA DEPARTMENT OF CORRECTIONS
CERTIFICATION CHECKLIST FOR SAFE/THERAPEUTIC SECLUSION/RESTRAINT CELL**

Description	Approved	Not Approved	Comments
Location of Safe Cells <ul style="list-style-type: none"> ▪ Standard – To be placed as close to control room as possible with maximum observation. 			
Exterior Windows in Cell <ul style="list-style-type: none"> ▪ Standard – Bars must be made inaccessible with no protrusions to hang from, use Lexan, Polycarbonate, or Plexiglas must be shatter proof, seams covered with security caulk, and window must be inoperable. Replace window when scratches obstruct the view to the inside of the cell. 			
Control of Environment of Cell <ul style="list-style-type: none"> ▪ Standard – Electrical power shutoff is external, water shutoff is outside cell, no light switch in cell. 			
Temperature of Cells <ul style="list-style-type: none"> ▪ Standard – To be determined by each facility's medical unit based on type of inmate and medication issues and compliant with OP-130107 			
Cameras <ul style="list-style-type: none"> ▪ Standard – Full, clear view of the restraint bed, must have reasonable viewing of entire cell, must be made inaccessible, no seams, and no edges. 			
Spacing of Objects Inside of Cell <ul style="list-style-type: none"> ▪ Standard – Ensure objects are not spaced close enough together to allow an inmate to place head between objects. 			

Facility Mental Health Authority: _____
Signature

Date: _____

Cell is Certified: Yes ___ No ___

Facility Head Review of Completed Checklist: _____
Signature

Date: _____

Original is to be maintained by the Facility Mental Health Authority
Copy is to be forwarded to the Chief Mental Health Officer