

 <i>Peumansend Creek Regional Jail</i>	Chapter: Special Management	Number: PCRJ 1500.10
	Subject: Gender Identity Disorder	Standards: ACA: VDOC: CI:

I. POLICY

Understanding, classifying, treating and housing gender identity disorder, known as GID, inmates are very real and complicated issues for the staff at PCRJ. Both sensitivity to the medical condition and the need to balance safety and security concerns are critical issues. GID inmates include transsexuals or hermaphrodites.

II. DEFINITIONS

As used in this document, the following definition(s) shall apply:

- A. Gender Identity Disorder (GID) – A rare psychiatric disorder in which a person feels persistently uncomfortable about his or her anatomical sex and who typically seeks medical treatment, including hormonal therapy and surgery to bring about a permanent sex change. ~ American Medical Association Encyclopedia of Medicine, 1989
- B. Hermaphrodite – A person who has the sex organs and many of the secondary sex characteristics of both male and female.
- C. Transsexual – A person predisposed to become a member of the opposite gender or a person who has been surgically or chemically altered to become the opposite gender.

III. PROCEDURES

A. Intake

1. An officer of the same sex as the inmate declares will perform the visual body examination.
2. If the gender of the inmate is different from what the inmate declares, an officer of the same gender will continue the visual body examination.

B. Housing Decisions

The duty to protect issue is not put aside because of the inmate's medical condition. Factors to consider when housing a GID inmate are:

1. Length of stay;
2. The anatomical body function;
3. Inmate's identity preference;

4. Charge;
5. Institutional history (discipline, predator or prey behavior);
6. Medical health input and plan;
7. Segregation housing may not be mandatory or considered automatic;
8. Be made on a case by case basis with security remaining paramount.

C. Medical Treatment

1. As GID is recognized as a serious medical condition, decisions as to whether to treat and what form of treatment is required are medically based.
2. Security issues in housing the inmate remain paramount, even superseding medical. However, the decision to treat an inmate and the type of treatment provided a GID inmate must be based on the severity of the diagnosis.

D. Searches of Transgender Inmates

1. If the inmate is housed with the female population, the inmate will be pat searched by female staff only.
2. If the inmate is housed with the male population, the inmate may be searched by male or female staff.

E. Notification

1. When GID inmates are admitted to the facility, the classification counselor will notify the Deputy Superintendent of Programs for consultation for housing and program assignment.
2. The intake nurse will notify the Health Services Administrator for follow-up treatment.
3. The Deputy Superintendent of Programs and Health Services Administrator will meet with the Deputy Superintendent of Security and Superintendent for consultation strategies for managing the GID inmate.

IV. REFERENCE

Questions or suggestions regarding this policy should be addressed to the Deputy Superintendent of Programs.

APPROVED: *Sandra Denise Thurman*
Superintendent

DATE: 10-01-08

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