Ohio	Department of Rehabilitation & Correction
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SUBJECT: Execution	PAGE <u>1</u> OF <u>21</u> .
LACCULION	
	NUMBER: 01-COM-11
RULE/CODE REFERENCE: ORC 2949.22; 2949.25	SUPERSEDES: 01-COM-11 dated 06/29/15
RELATED ACA STANDARDS:	EFFECTIVE DATE: October 7, 2016
	APPROVED:

#### I. AUTHORITY

This policy is issued in compliance with Ohio Revised Code 5120.01 which delegates to the Director of the Department of Rehabilitation and Correction the authority to manage and direct the total operations of the Department and to establish such rules and regulations as the Director prescribes.

#### II. PURPOSE

The purpose of this policy is to establish guidelines for carrying out a court-ordered sentence of death.

#### III. APPLICABILITY

This policy applies to all individuals involved in carrying out a court-ordered death sentence in accordance with all applicable policies, administrative regulations, and statutes.

### IV. DEFINITIONS

<u>Auxiliary Team Member</u> - A physician, advanced level provider or registered nurse who has been designated by the Director to provide advice and consultation as described in this policy.

<u>Critical Incident Debriefing Team</u> - A group selected by the Warden, and including the Religious Services Administrator, available to assist any persons involved in the execution process. A psychological debriefing process is available via DRC clinical staff and others to recognize stressors associated with executions and to work through them with affected staff as follows:

- Worker's own experiences of the execution including reactions and perceptions.
- Review any negative aspects and feelings.
- Review any positive aspects and feelings.
- Relationships with workers and/or family.
- Empathy (sharing) with others.
- Disengagement from execution experience.
- Integration of this experience into the professional work role for a positive future contribution to the overall team effort.
- Exploring religious convictions and feelings.

<u>Death House</u> - A physical location within the Southern Ohio Correctional Facility (SOCF) used for the execution of a death-sentenced prisoner.

<u>Death Row</u> - (1) A housing area at the Chillicothe Correctional Institution (CCI) or Ohio State Penitentiary (OSP) that has been designated by the Director of the Ohio Department of Rehabilitation and Correction to house male prisoners who are committed to the Department with a sentence of death; (2) A housing area at the Ohio Reformatory for Women (ORW) that is similarly designated to house female prisoners committed to the Department with a sentence of death; (3) A housing area at the Franklin Medical Center (FMC) that has been designated by the Director of the Ohio Department of Rehabilitation and Correction to house male or female prisoners whose medical needs are inconsistent with assignment to CCI, ORW, or OSP pursuant to DRC policy 68-MED-13, Medical Classification; or such other facility as may be deemed appropriate by the Director. Death Row is also a reference to a housing status for prisoners sentenced to death; it is not a security classification.

<u>Director</u> - As used in the policy, the term "Director" refers to the current Director of the Ohio Department of Rehabilitation and Correction (DRC) or the Director's designee.

<u>Drug Administrator</u> - Any qualified member of the Medical Team who administers any execution drug or witnesses the preparation and administration of any execution drug. A Drug Administrator shall be currently qualified under Ohio Law to administer and prepare drugs for intravenous injections. A Drug Administrator may also establish, or assist in, establishing, or assess, IV connections.

<u>Execution Drugs</u> - As used in this policy, the terms "Execution Drugs" means any of the following three options, under whatever names those drugs may be available to DRC from a pharmacy, manufacturer, supplier, wholesaler, distributor, pharmacist, or compounding pharmacy:

- 1) Pentobarbital; or
- 2) Thiopental sodium; or
- 3) A three-drug combination of:
  - a. Midazolam Hydrochloride; and
  - b. One of the following three drugs:
    - i. Vecuronium bromide; or
    - ii. Pancuronium bromide; or
    - iii. Rocuronium bromide; and
  - c. Potassium Chloride.

**Execution Team** - A group consisting of no less than twelve (12) members designated by the Warden of the Southern Ohio Correctional Facility (SOCF) to carry out court-ordered executions. The Warden shall designate one team member to be the Team Leader who shall communicate with the Warden and the Director as necessary to carry out the terms of this Policy. The Team's duties also include preparation and testing of equipment, carrying out pre- and post-execution activities, and counseling with the prisoner.

**Execution Timeline** - A record of events before and during an execution to include the specific information required to be recorded by this policy and other information at the discretion of the Execution Team.

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<u>Medical Team Member</u> - A person who is a member of the Execution Team and who is currently qualified under Ohio Law to administer and prepare drugs for intravenous injections, or who has at least one year experience as a certified medical assistant, phlebotomist, EMT, paramedic, or military corpsman, or who is currently certified or licensed within the United States as a registered nurse or nurse practitioner.

<u>Religious Services Administrator (RSA)</u> - The Religious Services Administrator is the coordinator and administrator for religious services for the Ohio Department of Rehabilitation and Correction (DRC). The RSA will provide counseling and support services for the offender and others consistent with the provisions of this policy.

**Reprieve** - The postponement of an execution.

<u>Stay</u> - A court-ordered suspension or postponement of a legal execution.

<u>Support Staff</u> - Support Staff shall mean those individuals who have specified roles in this policy including, but not limited to, medical staff, mental health staff, Health Care Administrators (HCAs), appointed designees, correction officers at DRC institutions, the RSA, SOCF Chief of Security or his/her designee, SOCF Deputy Warden(s), the Special Assistant designated in this policy, and/or other general DRC staff. Support Staff are not members of the Execution Team. Overhead management staff at DRC are not Support Staff, and not members of the Execution Team. As defined above in this section IV, only those individuals designated by the Warden to carry out court-ordered executions shall be Execution Team members. The Director and the Warden(s) are not members of the Execution Team.

<u>Warden</u> - As used in the policy, the term "Warden" refers to the current Warden of the Southern Ohio Correctional Facility (SOCF), or his or her current Deputy Warden, or the Director's designee, unless the policy uses language which indicates another Warden of another institution.

### V. POLICY

It is the policy of the Ohio Department of Rehabilitation and Correction (DRC) to carry out the death penalty in a constitutional manner and as directed by Ohio Courts of Law. All execution processes shall be performed in a professional, humane, sensitive, and dignified manner. It is the responsibility of the Director to designate a penal institution where death sentences shall be executed. The Warden of that facility, or Deputy Warden in the absence of the Warden, is responsible for carrying out the death sentence on the date established by the Ohio Supreme Court.

The procedures set forth in this policy are to be strictly followed. Any situation that arises that would make following these policies difficult, impractical, or impossible shall be immediately reported to the Director or the Warden. Any variations of a substantial nature must be approved by the Director as described in this policy.

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There will be no variations from the following requirements:

1. At least three (3) Medical Team Members, two (2) of whom are authorized to administer drugs under Ohio law, shall be used in the conduct of court-ordered executions.

- 2. The drugs required by this policy shall be used.
- 3. Functions required to be performed by medically-qualified persons, as described in this policy, shall be performed by Medical Team Members.
- 4. All Execution Team functions shall be performed by appropriately trained and qualified members of the Execution Team.
- 5. Only the Director can authorize a variation from the procedures stated in this policy but not a variation from the four requirements listed immediately above in subsections V.1.2.3 and 4 of this policy.

#### VI. PROCEDURES

### A. General Guidelines

- 1. All prisoners sentenced to death by a court of law shall be transported to a reception center within the Ohio Department of Rehabilitation and Correction (DRC) for initial processing. Upon completion of the reception process, the prisoner shall immediately be transferred to the designated institution: CCI or OSP for male prisoners or ORW for female prisoners. The Director may designate FMC or another appropriate DRC institution as necessary.
- 2. All court-ordered executions shall be carried out at the Southern Ohio Correctional Facility (SOCF) and will be planned to commence at approximately 10:00 a.m. on the scheduled execution date, subject to developing circumstances.
- 3. Unless otherwise designated by the Director/designee, the prisoner shall remain on Death Row until transferred to the Death House for scheduled execution.
- 4. The Ohio Supreme Court shall designate the date of execution. Upon receipt of a scheduled execution date, the Warden of the institution housing the prisoner shall notify the Director, the RSA, and the Warden at SOCF.
- 5. Attendance at the execution is governed by Ohio Revised Code section 2949.25 and includes:
  - a. The Warden or Acting Warden of the institution where the execution is to be conducted and such number of correction officers or other persons as the Warden or Acting Warden thinks necessary to carry out the death sentence.
  - b. The sheriff of the county in which the prisoner was tried and convicted.

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- c. The Director of the Ohio Department of Rehabilitation and Correction (DRC), or designee, and any other person selected by the Director/designee to ensure that the death sentence is carried out.
- d. Any Auxiliary Team Member whose role will be to provide consultation or advice as may be necessary. An Auxiliary Team Member shall attend such number of execution rehearsals as the Warden may consider necessary, but no less than one rehearsal per execution. An Auxiliary Team Member shall attend training sessions on topics identified in subsection VI.B.4.b of this policy, below. An Auxiliary Team Member shall not be required to attend an execution, but may, at the discretion of the Warden, attend an execution and provide consultation or advice to the Warden, the Director and the Medical Team.
- e. The prisoner may select one or two of the following persons: the RSA, minister-of-record, clergy, rabbi, priest, imam, or regularly ordained, accredited, or licensed minister of an established and legally cognizable church, denomination or sect, subject to the approval of the Warden.
- f. Three (3) persons designated by the prisoner who are not confined in any state institution subject to the approval of the Warden or Acting Warden based on security considerations. The prisoner may also request that one or two attorneys attend the execution.
- g. Three (3) persons designated by the immediate family of the victim, subject to the approval of the Warden or Acting Warden based on security consideration, as detailed in DRC policy 03-OVS-06, Victim Involvement in the Execution Process.
- h. Representatives of the news media who are authorized by the Director, which may include representatives of the following: a newspaper, a television station, and a radio station.
- 6. Given the gravity of the sentence to be carried out, it is imperative that these procedures be strictly adhered to and all actions by Department personnel in carrying out the sentence be fully documented as required by this policy. However, due to the difficult and sometimes unpredictable nature of the tasks to be performed in carrying out the sentence it may not always be possible to follow these procedures to the letter. Thus, variations from the requirements of the policy may sometimes be necessary. Any Support Staff, overhead management staff at DRC, or member of the Execution Team who determines for any reason it is difficult, impractical, or impossible to strictly follow the procedures in this policy shall immediately report the same to the Warden or to the Director. The Director may then consult with the Warden and others as appropriate. Only the Director may authorize a variation from the procedures in this policy. Any such variation shall be documented as soon as possible.

# B. Execution Preparation – Approximately thirty (30) days prior to the scheduled execution date

#### 1. Notification

The Warden of the institution where the prisoner is housed shall notify the Director of an upcoming scheduled execution date. Notification may also be provided to the supervising Regional Director of SOCF, DRC Chief Counsel, DRC Managing Director of Operations, the Adult Parole Authority (APA), the Ohio State Highway Patrol (Portsmouth and Jackson), and the Office of Victim Services.

# 2. Execution Drugs

- a. The Warden shall determine whether there will be sufficient quantities of the Execution Drugs available for the scheduled execution and report those findings to the Director.
- b. The Warden's assessment of what constitutes a sufficient quantity of Execution Drugs shall include ensuring a sufficient amount for a contingency against contamination or inadvertent loss.
- c. At his discretion, the Warden may, at any time, direct the SOCF HCA, the HCA's designee, or SOCF's responsible pharmacist, to order Execution Drugs from the Ohio Pharmacy Services of the Ohio Department of Mental Health and Addiction Services, or from a pharmacy, manufacturer, supplier, wholesaler or distributor, or from any other licensed pharmacist.
- d. All Execution Drugs delivered to SOCF shall be maintained in a secured location.
- e. If compounded Execution Drugs are to be used, a sample from the batch of those drugs will be analytically tested before they are used. The sample will be tested for identity and potency, pursuant to the applicable USP/NF monograph. DRC will only use the batch of compounded drugs if its sample is properly identified as the intended drug and its tested potency is within the applicable monograph standard. At the discretion of the Director, a sample of non-compounded Execution Drugs may also be tested for identity and potency pursuant to the applicable monograph standard.

### 3. Assessment of Prisoner

a. Every possible effort shall be made to anticipate and plan for foreseeable difficulties in establishing and maintaining the intravenous (IV) lines. The prisoner shall be evaluated by appropriately trained medical staff approximately twenty-one (21) days prior to the execution to evaluate the prisoner's veins and plan for the insertion of the IV lines. This evaluation shall include a "hands-on" examination as well as a review of the medical chart to establish any unique factors which may impact the manner in which the Execution Team carries out the execution. Potential problems shall be noted and discussed, and potential solutions considered, in advance of the execution. Concerns or potential issues shall be communicated to the Warden or designee at

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SOCF as soon as possible. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.

- b. Any evaluation that is conducted by medical staff pursuant to subsection VI.B.3.a of this policy, above shall be noted in the prisoner's medical chart.
- c. The prisoner's medical condition shall be assessed in order to identify any necessary accommodations or contingencies that may arise from the prisoner's medical condition or history. Any medical condition or history that may affect the performance of the execution shall be communicated as soon as possible to the Warden of SOCF, who shall confer with others as necessary to plan such accommodations or contingencies. The fact of the assessment and any conclusions shall be documented in the prisoner's medical chart. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.
- d. Any concerns for establishing or maintaining IV lines and any concerns or plans for medical accommodations or contingencies shall be communicated to the Execution Team in order that these things may be discussed and addressed in execution trainings or rehearsals.
- e. An appropriate member of the mental health staff shall evaluate the prisoner approximately twenty-one (21) days prior to the execution to evaluate his or her stability and mental health in light of the scheduled execution. Any concerns or contingencies affecting the execution process shall be communicated to the Warden of SOCF as soon as possible. The fact of the assessment and any conclusions shall be documented in the prisoner's mental health record. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.
- f. Beginning approximately thirty (30) days prior to the scheduled execution date until the prisoner's transfer from Death Row to SOCF, the prisoner shall be evaluated by mental health staff to determine the prisoner's appropriate observation level, housing status, and access to personal property. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.

## 4. Training

- a. The Execution Team shall begin conducting weekly training sessions at least thirty (30) days before the scheduled date of execution. The training shall address any accommodations or contingencies that might be identified or anticipated.
- b. Training in the following topics shall be provided for every member of the Execution Team, and any Auxiliary Team Member designated by the Director, prior to service and at least once per year thereafter:
  - i. The general nature and effects of the Execution Drugs that are used during the execution process;

- ii. Drug administration procedures, including the insertion of the IV needles and administration of injections;
- iii. Signs or symptoms of problems when administering the Execution Drugs; and
- iv. Any legal developments of significance.

## 5. Other Preparations

- a. The RSA shall make contact with the prisoner to establish counseling and family contact information.
- b. Prior to commencement of the initial training session, the Warden or the Team Leader shall verify and document the qualifications of the Medical Team members. Medical team members shall provide evidence of certification status at least once per year and upon any change in status.
- c. The Team Leader shall ensure that each member of the Execution Team has received a copy of the current version of this execution policy. Each member of the Execution Team shall sign for its receipt.

# C. Execution Preparation - Approximately fourteen (14) days prior to the execution

- 1. The Warden of the institution where the prisoner is housed shall have the Execution Information Release (DRC1808) completed by the prisoner. This form will verify information on the prisoner, visitors, witnesses, spiritual advisor, attorney, requested witness, property, and funeral arrangements.
- 2. The names of official witnesses/media witnesses shall be supplied to the Warden, as outlined in this policy.
- 3. The names and relationships of the victim's witnesses shall be supplied to the Warden.
- 4. The RSA shall provide family information from the prisoner to the Warden.
- 5. Approximately fourteen (14) days prior to the execution, the Warden shall determine whether a sufficient quantity of Execution Drugs is available for use at the scheduled execution.
  - a. If a sufficient quantity of the Execution Drugs is available, then the Warden shall select one of the following drug options to be intravenously administered at the scheduled execution:
    - i. Pentobarbital; or
    - ii. Thiopental sodium; or
    - iii. A three-drug combination of:
      - (a) Midazolam Hydrochloride; and
      - (b) One of the following three drugs:

- (i) Vecuronium Bromide; or
- (ii) Pancuronium Bromide; or
- (iii) Rocuronium Bromide; and
- (c) Potassium Chloride.
- b. If a sufficient quantity of the Execution Drugs is not available, or if at any time any of the selected Execution Drugs is deemed unsuitable or unusable by the Medical Team, then the Warden shall consult with the Director and they shall notify the Governor.
- c. Notice of the Warden's determination, concerning the selection of Execution Drugs or insufficient quantities of such drugs to be used for intravenous administration, shall be provided to the prisoner.
- d. If the scheduled execution date is postponed for any reason, and:
  - i. Such postponement is less than ten (10) days, then no later than four (4) days prior to the re-scheduled execution date, the Warden shall make the determination set forth above in subsection VI.C.5 of this policy.
  - ii. Such postponement is between ten (10) and thirty (30) days, then no later than seven (7) days prior to the re-scheduled execution date, the Warden shall make the determination set forth above in subsection VI.C.5 of this policy.
  - iii. Such postponement is more than thirty (30) days, then approximately fourteen (14) days prior to the re-scheduled execution date, the Warden shall make the determination set forth above in subsection VI.C.5 of this policy.
- e. The Warden shall ensure that sufficient quantities of the execution drugs, which have been determined to be used for the scheduled execution, have been delivered to SOCF and stocked within an appropriate secured location and then notify the Director.

# D. Execution Preparation - Approximately twenty-four (24) hours prior to the scheduled execution

- 1. The prisoner shall be transferred from Death Row and housed in the Death House at SOCF. The prisoner shall be constantly monitored by at least three (3) members of the Execution Team. An Execution Timeline shall be maintained.
- 2. An Authorized Independently Licensed Mental Health Professional shall interview the prisoner periodically and submit progress reports to the Warden. All prisoner files shall be maintained in the Warden's office at SOCF, unless otherwise directed by the Warden.
- 3. The Warden shall establish a line of communication with DRC legal staff, the Attorney General's Office, and the Governor's Office for notice of case status and/or other significant legal changes.
- 4. The RSA shall provide counseling and spiritual support unless the prisoner requests not to have such contact.

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5. Beginning with his/her arrival at SOCF, the prisoner shall not be forced to meet with non-staff visitors that he or she does not wish to see.

# E. Execution Preparation - The following events shall take place upon the prisoner's arrival at the Death House

1. Once the prisoner is at SOCF, the Death House shall be restricted to the following:

Director or his/her designee;

Warden:

Members of the Execution Team;

Managing Directors or Regional Directors;

Communications Chief or his/her designee;

Institution Deputy Warden;

Administrative Assistant to the Warden;

Chaplain;

Physician;

Independently Licensed Mental Health Professional;

Chief of Security;

Maintenance Superintendent;

Any other person as deemed necessary by the Warden or Director.

- 2. The prisoner shall be evaluated by medical staff on the day of arrival at SOCF to evaluate the prisoner's veins and plan for the insertion of the IV lines. This initial evaluation shall include a "hands-on" examination as well as a review of the medical chart. At a minimum, a "hands-on" examination shall also occur later that evening. Potential problems shall be discussed, and potential solutions considered. The performance of these two evaluations shall be noted in the Execution Timeline. Any relevant portion of the medical file may be kept in the Death House for appropriate reference as needed. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.
- 3. SOCF chaplains shall make periodic visits to the prisoner, if requested by the prisoner.
- 4. The Deputy Warden shall assign security personnel to staff entrances, checkpoints, and to assist the Ohio State Highway Patrol (OSHP).
- 5. The Team Leader shall ensure that the prisoner's property is inventoried in front of the prisoner. The prisoner will have previously, pursuant to subsection VI.C.1 of this policy above, specified who is to receive his or her personal effects. The Team Leader shall ensure that the Inmate Property Record Disposition and Release (DRC2055), correctly specifies this information, and the Team Leader shall sign it to confirm the review.
- 6. The prisoner shall, pursuant to subsection VI.C.1 of this policy above, specify in writing his/her request for funeral arrangements, which shall be recorded in the Execution Information Release, (DRC1808).

- 7. The prisoner shall be allowed contact visits with family, friends and/or private clergy, as approved by the Warden, between approximately 4:30 p.m. and 7:30 p.m. on the day prior to the scheduled execution. If the prisoner requests an attorney meeting, the prisoner shall be allowed one confidential attorney-client meeting, not to exceed an hour, on the day prior to the execution, following the prisoner's intake at SOCF. This visit will take place in an area where conversation is not audible to DRC staff. The visit will be visually monitored and recorded on video only. Before such meeting, all attorneys shall be subject to a thorough, gender-specific search of their person and property. Cell front visits as approved by the Warden shall be permitted between approximately 6:30 a.m. and 8:00 a.m. on the day of the scheduled execution. The attorney and spiritual advisor may continue to visit with the prisoner until approximately 8:45 a.m. The Warden may modify the frequency and duration of the visiting opportunities at his or her discretion.
- 8. The Team Leader shall ask the prisoner to identify his or her special meal request. The special meal shall be served the day prior to the scheduled execution at a time to be determined by the Warden.
- 9. The Warden shall brief key personnel, to include medical and mental health staff, in order to allow intake information to be obtained.
- 10. The Warden shall receive updates from security personnel and the OSHP on crowd control, demonstrations, pickets, etc.
- 11. The Chief of Security or designee shall brief the Warden on the level of tension within the remainder of the prison population.
- 12. The Warden shall relay any out of the ordinary activity to the Regional Director supervising SOCF.
- 13. The Execution Team shall continue to prepare as needed.

# F. Execution Preparation – Morning of Execution Day. At any time, as determined by the Team Leader, on the morning of the execution:

- 1. The prisoner shall be permitted to take a shower and dress in the designated clothing the morning of the execution.
- 2. Vein Assessment

A "hands-on" examination of the prisoner's veins shall be made by a Medical Team Member before the IV is established. If any potential problems are identified they shall be discussed between the Medical Team, the Warden, the Director, and any Auxiliary Team Member, and potential solutions shall be considered. The performance of this evaluation shall be noted in the Execution Timeline.

3. Possession of Execution Drugs

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A Drug Administrator, in the presence of a second Drug Administrator, shall take possession of the Execution Drugs from the SOCF responsible pharmacist or another appropriately licensed pharmacist at the secured pharmacy storage area, and shall document possession of the Execution Drugs by signing form Order for Execution Medications (DRC2001). The Drug Administrator taking possession of the Execution Drugs, accompanied by a second Drug Administrator shall deliver the Execution Drugs to the Death House. These persons shall complete form Order for Execution medications (DRC2001).

## 4. Drug Preparation

- a. The Execution Drugs shall be prepared for injection by a Drug Administrator. The preparation of the drugs shall be monitored by a second Drug Administrator who shall independently verify the preparation and dosage of the Execution Drugs. Both Drug Administrators shall complete form Order for Execution Medications (DRC2001).
- b. If the Warden determines that a sufficient quantity of pentobarbital is available and has been selected to be used, then a Drug Administrator shall prepare the drug as follows:
  - i. Syringes 1 and 2: Five (5) grams of pentobarbital shall be withdrawn and divided into two (2) syringes labeled "1" and "2".
  - ii. Syringes 3 and 4: Five (5) additional grams of pentobarbital shall be obtained and kept available in the Equipment Room, but need not be withdrawn into syringes unless the primary dose of five (5) grams proves to be insufficient for the procedure. If prepared, these two (2) additional syringes shall be labeled "3" and "4".
- c. If the Warden determines that a sufficient quantity of thiopental sodium is available and has been selected to be used, then a Drug Administrator shall prepare the drug as follows:
  - i. Syringes 1, 2, 3, 4 and 5: Five (5) grams of thiopental sodium shall be withdrawn and divided into five (5) separate syringes, labeled "1", "2", "3", "4" and "5".
  - ii. Syringes 6, 7, 8, 9 and 10: Five (5) additional grams of thiopental sodium shall be obtained and kept available in the Equipment Room, but need not be withdrawn into syringes unless the primary dose of five grams proves to be insufficient for the procedure. If prepared, these five (5) additional syringes shall be labeled "6", "7", "8", "9" and "10".

d. If the Warden determines that a sufficient quantity of the three-drug combination is available and has been selected to be used, then a Drug Administrator shall prepare those three drugs as follows:

### FIRST DRUG:

- i. Syringes 1 and 2: The first drug shall be prepared as follows: Five hundred (500) milligrams of midazolam hydrochloride shall be withdrawn and divided into two separate syringes, labeled "1" and "2".
- ii. Syringes A and B: If needed for contingent use, an additional amount of the first drug shall be prepared as follows: Five hundred (500) milligrams of midazolam hydrochloride shall be obtained and kept available in the Equipment Room, but need not be withdrawn into syringes unless directed by the Warden or the primary dose of 500 milligrams of midazolam hydrochloride proves to be insufficient for the procedure. If prepared, these two (2) additional syringes shall be labeled "A" and "B".

### SECOND DRUG:

- i. Syringes 3 and 4: The second drug shall be prepared as follows:
  - a) If the Warden has selected Vecuronium Bromide, then one hundred (100) milligrams of Vecuronium Bromide shall be withdrawn and divided into two separate syringes, labeled "3 and "4".
  - b) If the Warden has selected Pancuronium Bromide, then one hundred (100) milligrams of Pancuronium Bromide shall be withdrawn and divided into two separate syringes, labeled "3 and "4".
  - c) If the Warden has selected Rocuronium Bromide, then one thousand (1000) milligrams of Rocuronium Bromide shall be withdrawn and divided into two separate syringes, labeled "3 and "4".

### THIRD DRUG:

- i. Syringes 5 and 6: The third drug shall be prepared as follows: Two hundred forty (240) milliequivalents of Potassium Chloride shall be withdrawn and divided into two separate syringes, labeled "5" and "6".
- e. The drug preparation shall be documented as follows:
  - i. The Drug Administrator who prepared the Execution Drugs and the Drug Administrator who witnessed the preparation shall complete form Order for Execution Medications (DRC2001).

- ii. A Drug Administrator shall inform the Command Center of the time when all of the Execution Drugs have been prepared, and the Command Center shall record in the Execution Timeline the time that the all of the drugs were prepared.
- 5. Official witnesses to the execution will report to the institution. The victim's witnesses shall report to the Portsmouth Highway Patrol Post, or other Post or location designated by the Highway Patrol, for escort to the institution by designated SOCF personnel.
- 6. The prisoner shall be allowed to have visits as described in subsection VI.E.7 of this policy, above.
- 7. The RSA shall be present to counsel and provide spiritual support to the prisoner and staff.
- 8. All communication equipment shall be tested, including primary and secondary communication, with both the Governor's Office and the Office of the Attorney General.
  - a. Primary communications shall be via a telephone line opened directly to the Command Center from the execution chamber. This line shall be tested one (1) hour prior to the scheduled execution. Other than testing, this line shall remain open.
  - b. Secondary communications shall be via cellular telephone.
  - c. In the event that both the primary and secondary communications are inoperable, the execution shall be delayed until communications are established.

# G. Execution Preparation - Approximately fifteen (15) minutes prior to the scheduled execution

1. Witnesses Transported to Death House.

All authorized witness groups shall be escorted to the Death House separately by designated staff. Witnesses shall be escorted to viewing rooms before the death warrant is read.

2. Phone for Prisoner's Counsel

If the prisoner chooses to have his or her counsel as a witness, at all times after counsel enters the witness room, counsel shall have free access to the phone near the entrance door of the Death House.

a. The phone in the Death House foyer will enable counsel to call into the waiting room for prisoner's counsel in the prison compound where another person, whose presence is arranged by counsel for the prisoner and whose presence satisfies the prison's security concerns, and which person is acting on behalf of the prisoner and his or her counsel, will be situated during all times after the death warrant is read.

b. The Warden shall allow this other person to have access to his or her own laptop computer and to a phone that can connect that person to an outside line.

#### 3. Death Warrant

The Warden shall read the death warrant to the prisoner.

### 4. Closed-Circuit Camera Activated

Immediately after the death warrant is read, the closed-circuit camera in the execution chamber shall be turned on so that witnesses in the witness rooms can view the subsequent activities in the execution chamber on the television screen in those rooms.

### 5. Prisoner Enters Execution Chamber

The Warden and Execution Team shall escort the prisoner to the execution chamber, assist the prisoner onto the bed and secure the straps. The team shall roll up the prisoner's sleeves or take other steps to ensure that the arms are plainly visible to persons in the chamber and to those in the equipment room.

#### 6. Curtain Closed

Once the prisoner is secured to the bed, the curtain shall be closed prior to the insertion of the IV needles. The closed-circuit camera shall remain on to allow the witnesses to view the establishment of IV site(s).

## 7. IV Site(s) Preparation & Establishment

- a. The Medical Team shall enter the Execution Chamber to prepare IV site(s).
- b. The Medical Team shall establish one or two viable IV sites.
  - i. The arm veins near the joint between the upper and lower arm shall be utilized as the preferred site for the IV injection.
  - ii. In the event that the Medical Team member is unable to establish an IV at a preferred site, the Medical Team member(s) may establish an IV at alternative site(s) for use by the Drug Administrator when administering execution drugs.
  - iii. The Execution Team may utilize any non-invasive device such as a light, illuminator or ultrasound device, if desired, to assist in locating a vein.
- c. The Medical Team member(s) shall be allowed as much time as is necessary to establish viable IV site(s).
- d. If the Medical Team member(s) are unable to establish viable IV site(s), the Medical Team members shall consult with the Warden, the Director, and any Auxiliary Team

Member for the purpose of determining whether or how long to continue efforts to establish viable IV site(s).

## 8. Confirming & Recording Establishment of IV Site(s)

- a. A Medical Team member shall test the viability of the IV site with a low-pressure saline drip through IV tubing. If necessary, a heparin lock may be attached to the IV needle as an alternative to the saline drip.
- b. The Warden, Team Leader, and a Drug Administrator shall all confirm the visibility of the IV sites.
- c. The Medical Team member(s) shall exit the Execution Chamber and shall announce the number of attempts made to establish viable IV site(s) to the Command Center contact who shall then inform the Command Center, for capture on the Execution Timeline.
- d. The Command Center shall record in the Execution Timeline the number of attempts.

## 9. Curtain Opened

The curtain shall be opened after the establishment of viable IV site(s). The curtain shall remain open during the remainder of the execution until the examination for the pronouncement of death, unless the execution is abandoned or halted.

#### 10. Last Words

The Warden shall ask the prisoner if he or she has any last words. If the prisoner has a last statement, he or she will be allowed to make it while the witnesses are present in the adjacent viewing rooms, and are able to see him or her and hear him or her via microphone.

- a. There shall generally be no restriction on the content of the prisoner's statement and no unreasonable restriction on the duration of the prisoner's last statement.
- b. The Warden may impose reasonable restrictions on the length of the statement. The Warden may also terminate a statement that he or she believes is intentionally offensive to the witnesses.

## H. Commencement of Execution

### 1. Execution by IV Injection

a. If the Warden has decided, pursuant to subsection VI.C.5 of this policy above, to proceed with pentobarbital, then upon the Warden's signal, a Drug Administrator shall intravenously administer the previously prepared syringes 1 and 2 of pentobarbital.

- b. Alternatively, if the Warden has decided, pursuant to subsection VI.C.5 of this policy above, to proceed with thiopental sodium, then upon the Warden's signal, a Drug Administrator shall intravenously administer the previously prepared syringes 1, 2, 3, 4 and 5 of thiopental sodium.
- c. Alternatively, if the Warden has decided, pursuant to subsection VI.C.5 of this policy above, to proceed with the three-drug combination, then upon the Warden's signal, a Drug Administrator shall proceed as follows:
  - i. <u>FIRST DRUG</u>: intravenously administer the previously prepared syringes 1 and 2 of midazolam hydrochloride.
  - ii. Following administration of syringes 1 and 2 and before the administration of the second and third drugs described in this subsection below, a Drug Administrator shall reenter the Execution Chamber to assess the prisoner's consciousness.
    - (a) If the prisoner is found to be unconscious, then the process shall continue with the administration of the second and third drugs, as described below.
    - (b) If the prisoner is found to be conscious, then the Drug Administrator shall consult with a Second Drug Administrator, the Warden and the Director, and any Auxiliary Team Member. After consultation, the IV sites may be checked and changed. The Warden shall decide how to proceed, including but not limited to waiting for the passage of time, requesting an additional assessment by a Drug Administrator, and/or directing the administration of contingency-use syringes A and B.
    - (c) If syringes A and B are administered, a Drug Administrator shall reenter the Execution Chamber following administration and assess the prisoner's consciousness.
      - (i) If the prisoner is found to be unconscious, then the process shall continue with the administration of the second and third drugs, as described below.
      - (ii) If the prisoner is found to be conscious, then the Drug Administrator shall consult with a Second Drug Administrator, the Warden and the Director, and any Auxiliary Team Member. After consultation, the IV sites may be checked and changed. The Warden shall decide how to proceed, including but not limited to waiting for the passage of time, requesting an additional assessment by a Drug Administrator, and/or directing the administration of additional syringes of the first drug. If requested, additional syringes of the first drug shall be prepared by a Drug Administrator, in the same manner as contingent syringes A and B, with new consecutively lettered labels.
  - iii. <u>SECOND DRUG:</u> Following administration of the first drug and confirmation that the prisoner is unconscious, the Drug Administrator shall intravenously administer the previously prepared syringes 3 and 4 of the selected drug.

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- iv. <u>THIRD DRUG:</u> Following administration of the first and second drugs, the Drug Administrator shall intravenously administer the previously prepared syringes 5 and 6 of potassium chloride.
- d. The low-pressure saline drip shall be allowed to flush saline through the line(s) during and following completion of the IV drug administration.
- e. A second Drug Administrator shall be present in the equipment room to observe the administration of the Execution Drugs. This Drug Administrator shall announce the start and finish times of each injection to the Command Center contact who shall then inform the Command Center for capture on the Execution Timeline.
- f. The Command Center shall record in the Execution Timeline the start and finish times of each injection.
- g. Following administration of all of the Execution Drugs, a Drug Administrator shall reenter the Execution Chamber to inspect the IV site for evidence of incontinence or infiltration and to listen to the prisoner for breathing and heart sounds.
- h. If a sufficient time for death to occur has passed but the prisoner has not died, a Drug Administrator shall consult with a second Drug Administrator, the Warden and the Director, and any Auxiliary Team Member. The Warden, after consultation with the Director, shall determine whether to proceed with any additional syringes of Execution Drugs, and may order a Drug Administrator to prepare such additional syringes, as necessary, and intravenously administer them, in accordance with the terms of this policy, above.
- i. At the completion of the process and after a sufficient time for death to have occurred, the curtain shall be closed and an appropriate medical professional shall evaluate the prisoner to confirm death. The curtain shall then be re-opened and the Warden shall announce the time of death. In the event that the appropriate medical professional cannot confirm that death has occurred, the curtain shall be reopened until an appropriate time has passed to reevaluate the prisoner.

## 2. Using Alternative IV Sites

- a. The Team Leader, a Medical Team member, and the Warden shall observe the prisoner during the injection process to look for signs of swelling or infiltration at the IV site, blood in the catheter, and leakage from the lines and other unusual signs or symptoms.
- b. The Execution Team shall communicate to the Drug Administrators any problems detected during the administration of the Execution Drugs.
- c. The Drug Administrator who is administering the Execution Drugs shall determine whether it is necessary to use another viable IV site.

- d. In the event that the Drug Administrator who is administering the Execution Drugs detects a problem in the administration of the drugs, the Drug Administrator shall use any other viable IV site. No prior consultation with the Warden or other members of the Execution Team is required.
- e. Whenever it is necessary to change IV sites, the Drug Administrator shall administer a full dosage of the Execution Drugs through the alternate, viable IV site using additional syringes, as necessary, prepared in accordance with the terms of this policy, above.
- f. In the event the Drug Administrator changes to another viable IV site, the Drug Administrator shall inform the Command Center contact, who shall then inform the Command Center for capture on the Execution Timeline. The Command Center shall record in the Execution Timeline any change in IV site(s).

# 3. Establishing Other IV Sites(s)

- a. In the event there is no alternative viable IV site, the Medical Team shall consult with the Warden and Director.
- b. The Warden, following consultation with the Director, shall determine whether to proceed with execution by IV injection.
- c. In the event the Warden determines to proceed with execution by IV injection, the Execution Team shall repeat the steps in subsections VI.G.6-8 of this policy, above, and continue with the execution as provided for in subsection VI.H of this policy, above.
- d. The Warden shall ensure the Command Center is informed of his decision. The Command Center shall record the Warden's decision in the Execution Timeline.

#### I. Post-Execution

- 1. The Warden, or his/her designee, shall notify the Director that the execution has been carried out.
- 2. The Medical Team shall remove the IV equipment and clean the IV sites.
- 3. The RSA or the prisoner's Spiritual Advisor shall anoint the body of the prisoner if requested by the prisoner.
- 4. The RSA shall coordinate the burial of the prisoner's body with local chaplains if the prisoner's family does not want the body.
- 5. The Execution Team shall remove the deceased from the execution bed and place him or her on a gurney.

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- 6. Disposition of the body shall be in accordance with arrangements made prior to the execution at the prisoner's request.
- 7. The Warden shall sign and return the death warrant to the Court, indicating the execution has been carried out.

# 8. Prepared Execution Drugs

- a. A Drug Administrator shall properly dispose of any Execution Drugs that have been prepared for administration but not been utilized.
- b. A Second Drug Administrator shall witness the disposal.
- c. Both Drug Administrators shall document the disposal in form Order for Execution Medications (DRC2001).

# 9. Unprepared Execution Drugs

- a. A Drug Administrator shall properly return any unprepared Execution Drugs to the secured pharmacy storage area.
- b. A Second Drug Administrator shall witness the return of the unprepared Execution Drugs.
- c. Both Drug Administrators shall document the return of the unprepared Execution Drugs in form Order for Execution Medications (DRC2001).

### 10. Recording Used Execution Drugs

- a. A Drug Administrator shall document the name or description, and any expiration date or beyond use date, of the Execution Drugs used, in form Order for Execution medications (DRC2001).
- b. An Execution Team member shall save the packaging of the used Execution Drugs or take photographs of such packaging. None of the functions described in this subsection shall be governed by subsection V.3 of this policy, above.

#### 11. After-Action Review

Immediately following an execution, the Execution Team and the on-site administrators directly involved in the execution process shall meet to review the process of the execution. Any unique or unusual events shall be discussed, as well as opportunities for improvement and successful procedures. Actions and documentation of the events shall be reviewed to identify any discrepancies. Discrepancies from the policy shall be clearly described and noted in a written record. The record shall be signed and dated by the Warden.

## 12. Critical Incident Debriefing

- a. The Warden shall ensure that critical incident debriefings are available for the Execution Team and staff participants immediately following the execution.
- b. The Critical Incident Debriefing team shall conduct interviews in accordance with CIM guidelines.
- c. The RSA shall be available for debriefing for the family of the prisoner.

# 13. Quality Assurance Review

The Director shall designate a Special Assistant for Execution Policy and Procedures. The Special Assistant shall evaluate the performance of the Execution Team, review the conduct of court-ordered executions and report to the Director of the Department. His or her duties will consist of reviewing documentation, training, and professional qualifications, to ensure compliance with the written policy. The Special Assistant may utilize assistants as necessary to compile or assess the information, and may consult with others consistent with the confidentiality of the process. Whenever appropriate, the Special Assistant shall consult with a properly trained medical person when reviewing the medical aspects of the execution procedures. The Special Assistant will also provide consultation and advice concerning modifications in the written policy. The Special Assistant will prepare a report to the Director following each execution, with any suggestions or recommendations that are appropriate.

# **Related Department Forms:**

Execution Information Release DRC1808
Order for Execution Medications DRC2001
Inmate Property Record Disposition and Release DRC2055