

THE CORRECTIONAL NURSE

Inspiring

Professional Correctional Nursing Practice

June 2022

Recently I was asked by colleagues at the Free Clinic who have never worked in a correctional environment how it was possible for an officer like White to aid and abet a murder suspect's escape. Around the same time, I heard about four different situations where correctional nurses lost their jobs because they either brought in contraband, accepted money and gifts, or became involved in a physical relationship with an incarcerated individual. It seems that no matter how much is covered in orientation about fraternization, individuals think it cannot happen to them – but it does. So, how is this possible?

Incarcerated individuals are well-versed in the art of manipulation. They use such techniques as flattery, helplessness, sympathy, empathy, sensitivity, confidentiality, isolate and protect, touching, sexual references, and coercion and intimidation to get close to their victims. They categorize individuals as either soft, mellow, or hard. They usually target the soft individuals, as they are seen as trusting and wanting to be liked. The soft individuals also are perceived as having a difficult time saying no. The hard individuals are targeted because it is believed that they are trying to hide a weakness with their "by the book" attitude. The mellow individuals are usually not pursued, not because they are perceived as not being able to be turned, but because it would take more time than the incarcerated person is willing to invest in the game.

There are three processes in the Manipulation Game -Techniques, Tools, and Turn-outs. During the Techniques phase, the inmate observes, chooses the victim, and tests the limits. Using various Tools, the inmate gets close to the victim and isolates them from others. Tools used include "the support system", "empathy/sympathy", "plea for help", "we/they syndrome", "offer of protection", "allusion to sex", "the touch system", and "the rumor clinic". Finally, the third process occurs when the victim is Turned-out. The incarcerated person must risk something at this point to verify that the victim can be controlled. Usually, a request for the victim to bring in contraband is made, and the lever is used to ensure that the victim will comply. The lever is that information, usually given to the person by the victim, or actions done by the victim for the incarcerated person that the victim does not want reported. At this point, the victim realizes that he/she/they have been manipulated by the person. The sting occurs when the victim succumbs to the demands. There are options that can be chosen, but at this point, it is a lose/lose situation for the victim.

There are ways to protect yourself from becoming the victim. Understand that the manipulation game is in every facility, large or small. Always remain professional. Do not share personal information with incarcerated persons and be keenly aware of who is listening if you must discuss personal business at the facility. Watch the incarcerated persons and notice who is particularly interested in you. Always be firm, fair, and consistent. Be comfortable with saying "no" if you are asked to go against policy and procedures. Inform a supervisor if you encounter a problem or an unusual situation with an incarcerated person. Ask for immediate help if necessary. Document all incidents appropriately and be sure to keep a copy or make notes for your personal file.

Because this is such a serious issue for correctional nurses both personally and professionally, I am offering The Correctional Nurse Educator class entitled *Inmate Manipulation for the Correctional Nurse* **FREE** from June 6^{th} – June 13th for newsletter readers. This class is usually \$24.95 and awards 2 continuing education hours. You must be enrolled (free) at The Correctional Nurse Educator, and then you can select the *Inmate Manipulation for the Correctional Nurse* class for free. Be sure to edit your profile to add your first and last name, so that it is printed out on the certificate.

Newsworthy Notes

The American Correctional Nurses Association will be holding its member meeting in June. They are also getting ready to accept nominations for the Board of Directors upcoming election. Check out the <u>website</u> for more details.

NCCHC will hold its Correctional Mental Health Care Conference August 1st and 2nd in Denver, CO.

The <u>American Correctional Association</u> will hold its 152nd Congress August 4-7 in New Orleans, LA.

Remember that you can find our past Newsletters on the CorrectionalNurse.Net website in the Newsletter Archive.

CorrectionalNurse.Net

This month at <u>CorrectionalNurse.Net</u> our clinical discussion will include endocarditis. Our professional practice discussion will cover Saying No to Patients, and Correctional Nursing - What was I Thinking?.

As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

Please **FOLLOW US** and check back often to ensure that you get notification of new posts!

VISIT CORRECTIONALNURSE.NET NOW

Correctional Nurse Educator

Our 50% off featured class this month at <u>The Correctional Nurse</u> <u>Educator</u> is *Heart Failure for the Correctional Nurse*. I hope that you enjoy it!

Remember that The Correctional Nurse will work with your group to provide accredited continuing education classes at a discounted and affordable cost.

VISIT THE CORRECTIONAL NURSE EDUCATOR NOW

Nursing Behind the Wall

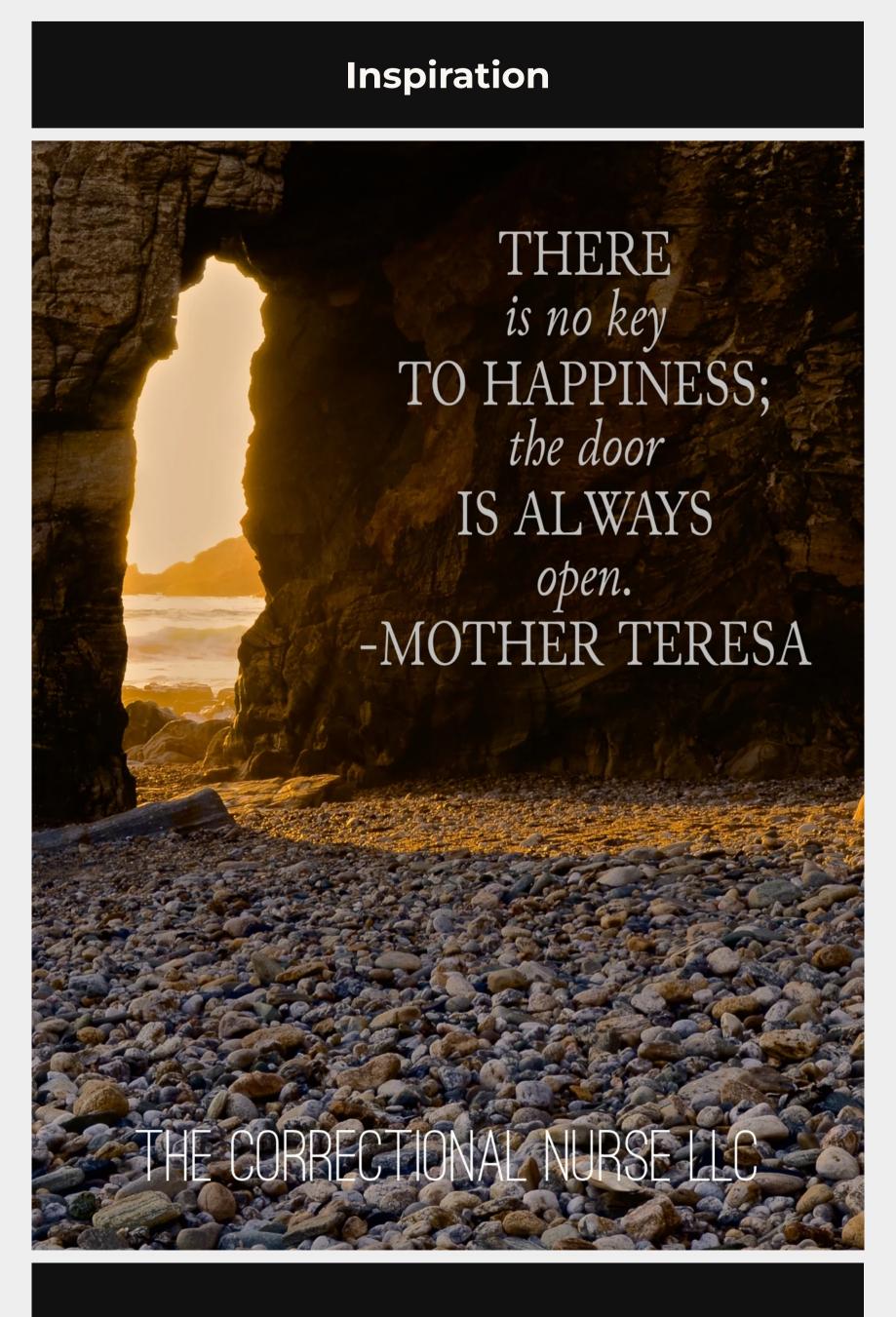
This month at **Nursing Behind the Wall** you will meet Mr. Byrd, a gentleman who has fatigue and aching joints.

VISIT NURSING BEHIND THE WALL NOW

In closing, I appreciate you taking the time to read this newsletter, and I

hope that you will find our sites interesting and educational. Our profession of Correctional Nursing is unique and sometimes challenging, but always very important to our patients. The impact we make is farreaching, even if it is not always evident as we care for our patients. I have ALWAYS been proud to say that I am a Correctional Nurse – I hope that you are as well!

Lori



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<u>CONTACT US</u>

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