I. POLICY

It is the policy of the Department of Corrections (DOC) to establish and monitor assignments of offenders placed on administrative segregation status. Administrative segregation status is primarily used for offenders who have demonstrated through their behavior that they pose a risk to the safe and orderly operation of a general population correctional facility. Administrative segregation is a status that requires specific action and review.

II. PURPOSE

This administrative regulation (AR) establishes criteria and guidelines for placing offenders on administrative segregation status. Administrative segregation is an offender management process and is not used as a punitive measure.

III. DEFINITIONS

A. Administrative Segregation: The most restrictive offender status.

B. Administrative Segregation Hearings Officer: A DOC employee at or above the level of CO IV who conducts Administrative Segregation Hearings. At the discretion of the Appointing Authority, a three member board will conduct the hearing. The chair shall be at or above the level of CO IV and the other two members at or above the level of CO III.

C. Administrative Segregation Transition Specialist: A pre-release specialist assigned to administrative segregation. This specialist will coordinate pre-release programming as well as community re-entry services.

D. Ammunition: Any item hurled by a weapon, or exploded as a weapon, as bullets, gunpowder, shots, shells, bombs, grenades, rockets, etc.

E. Appointing Authority Review: A review conducted by the Appointing Authority when an offender is recommended by the Internal Classification Committee for progression out of administrative segregation and the criteria for a Deputy Director Review are not met.
F. **Case Manager (CM):** An individual employed by, or under contract with the DOC, responsible for direct involvement with offenders and ensuring an ongoing process of case monitoring, case recording, counseling, and guidance. Direct involvement shall also include field community parole officers working in liaison with community corrections centers.

G. **Central Classification Committee:** A committee at Central Office, chaired by the Assistant Director Of Prison Operations or designee, representatives from Central Classification, Office of Inspector General and the originating facility. Clinical Services will be represented in cases that involve medical or mental health issues. Duties include: finalizing offender classification instruments and status designations, determining final custody level, and making permanent facility assignments of offenders based on factors that may affect offender management and security. Central classification officers will serve as liaisons for their assigned facilities in the areas of classification, case management, code of penal discipline, as well as other relevant offender management systems.

H. **Cognitive Programming:** A program which provides the offender with skills which enhance his/her ability to make reasonable choices utilizing knowledge and experience as a guide.

I. **Dangerous Contraband:** A communication device, firearm, knife, bludgeon, or other weapon, device, instrument, material or substance, whether animate or inanimate, which is readily capable of causing or inducing fear of death or physical injury.

J. **Dangerous Drugs and Paraphernalia:** Alcohol; all controlled substances as listed under Schedules I-V of the Colorado Revised Statutes, 18-8-203(2) through 18-18-207(2); marijuana and marijuana concentrates including all parts of the plant cannabis sativa L; and any volatile substance inhaled for its mood-altering effect, including but not limited to, cleaning fluids, glue, lacquer, petroleum distillates and/or any drug controlled by regulations of federal or state law. This area should also include drug paraphernalia.

K. **Deadly Weapon:** Any firearm, loaded or unloaded, bullets, knife, bludgeon, or other weapon, device, instrument, material, or substance, which in the manner it is used or intended to be used is capable of producing death or serious bodily injury, as defined by CRS 18-1-901(3)(e).

L. **Deputy Director Review:** A specialized review for offenders who have been assigned administrative segregation status for a period of one year. This review will be done by the Deputy Director of Prison Operations.

M. **DOC Employee:** Someone who occupies a classified, full or part-time position in the State Personnel System in which the Department has affect over pay, tenure, and status.

N. **Escape Paraphernalia:** The following items are considered escape paraphernalia (but not limited to):

1. Lock, lock picks, trip wires, locking devices, chain, rope, ladder, tool(s) (Class “A” or “B”), or other items that could be used to effect an escape; and/or,

2. Mask, wig, disguise, or any other means of altering normal physical appearance that would make ready identification of an offender difficult; and/or,

3. Mannequin, dummy, replica of a human body, or any item or device that would cause any offender to be counted as being present at a designated time and place when, in fact, he/she would be absent, or in any way would aid or abet the escape or walk away of an offender; and/or any,

4. Form of securities, bonds, coins, currency, legal tender, official papers or documents (other than papers or documents relative to judicial or administrative proceedings), unless expressly and specifically authorized by the Appointing Authority/Director, or designee, of the correctional facility concerned; and/or,

5. Item of an officer’s uniform, civilian clothing, or other clothing, including badges, buttons, name tags, or items of
personal identification, unless expressly and specifically authorized by the Appointing Authority/Director, or
designee, of the correctional facility concerned.

O. Executive Assignment Order (EAO): An electronic form that authorizes an offender’s movement from one permanent
facility to another permanent facility on behalf of the Executive Director, or designee.

P. Internal Classification Committee: A multidisciplinary committee within each respective facility chaired by the
administrative head/designee, at or above the level of correctional officer IV which is responsible for all facility
internal classification and status proceedings, housing/cell assignments, work and program assignments, code of
penal discipline outcome management and other relevant internal offender management systems.

Q. Offenders with Mental Illness (OMI): A status for offenders with mental illness who are assigned to a specialized
program where they receive individual and group therapy, educational programs, and recreational activities.

R. Protective Custody Status: Alternate housing assignment for offenders who are at substantial risk of serious harm if
placed in a General Population setting.

S. Protective Custody Unit: A designated housing unit for safely housing offenders on protective custody status.

T. Privilege Level Program: An incentive based program based on behavior and program participation consisting of levels I
through IV while in Administrative Segregation.

U. Offenders with Mental Illness (OMI) Placement: Those facilities or units within facilities designated to house
offenders with special mental health needs.

V. Staffing: A formal comprehensive offender case planning review by a multi-disciplinary team.

W. Status: A housing and management assignment other than General Population.

X. Security Threat Administrative Review (STAR): An incentive based, multi-level program/process for Level III and
above, established to identify, designate, assign, monitor, transition, and reintegrate offenders, who by their behavior
have demonstrated the need for DOC to utilize special strategies to manage and control that behavior. This
program/process is designed for high risk offenders and requires well structured activities and programming. The
duration and intensity of the program/process is based on a whole person approach.

Y. Security Threat Group (STG): A group of three or more individuals acting in concert or individually in an activity that is
characterized by criminal conduct or conduct that violates the department’s code of penal discipline for the purpose of
interrupting prison operations, recruiting new members, damaging property or inflicting or threatening to inflict harm to
employees, contract workers, volunteers or other state inmates.

Z. Substantial Evidence: Such evidence that a reasonable mind might accept as adequate to support a conclusion.

IV. PROCEDURES

A. Assignment to administrative segregation status upon admission to DOC:

1. Administrative segregation status may be warranted for offender’s entering DOC if:

   a. The offender’s behavior, while detained prior to arrival, constituted a serious threat to the security and
      orderly operation of the correctional setting or when other factors are present that indicate the offender
should be considered for administrative segregations status. The offender’s custody level will be overridden, if needed, to Close Custody for the duration of Administrative Segregation Status.

b. Offenders with a death penalty sentence will be assigned Administrative Segregation status and will enter administrative segregation status at Level II. The offender’s custody level will be overridden, if needed, to Close Custody for the duration of Administrative Segregation Status.

c. Any offender that is recommended for Administrative Segregation upon admittance to the DOC will be reviewed by the Assistant Director of Prisons, Offender Services and the Director of Prisons to determine if that is an appropriate placement.

B. Behavior Warranting Administrative Segregation Review after Admission to DOC:

1. Assault and related acts:
   a. The offender caused or attempted to cause serious physical harm or death to another person;
   b. The offender compelled or coerced another person, by force or the threat of serious physical harm or death, to provide anything of value, to perform any act, including any sexual act, or to violate any rule.

2. The offender has lead, organized, or incited a serious disturbance or riot that resulted in the taking of a hostage, significant property damage, physical harm or loss of life in a correctional setting.

3. The offender has conspired or attempted to introduce or possess dangerous contraband which poses a serious threat to the security of the institution. This includes without limitation:
   a. Deadly weapons;
   b. Ammunition;
   c. Escape Paraphernalia;
   d. Dangerous Drugs.


5. Escape from a secure correctional facility or any related acts: the offender escaped, attempted to escape, or committed acts to facilitate an escape. This does not include absconding or walk-away from parole and community.

6. Other circumstances may warrant placement in administrative segregation. Such placement will require approval by the Director of Prisons.

C. Multi-Disciplinary Staffing

1. If an offender has received punitive segregation, as a result of a COPD conviction prior to the administrative segregation hearing, the punitive segregation time must be completed prior to commencement of administrative segregation status.

2. Prior to the administrative segregation hearing, a multi-disciplinary staffing will occur and a mental health representative will assess the mental health status of the offender.
3. This multi-disciplinary staffing will consist of a review of recent interventions and will serve to provide case planning recommendations.
   
a. At a minimum this staffing will include the case manager, a representative from mental health, Intel Officer and custody/control employees at the level of COIII or above.

b. Depending on the circumstances of the review, additional individuals may be present.

c. Factors to be considered include:
   
   1) Offender’s mental health condition;
   
   2) Facility capacity to deliver alternative placement services (OMI, STAR);
   
   3) Offender’s programmatic and other needs;
   
   4) Safety and security of the staff, offenders and facility.

4. The information conveyed in the multi-disciplinary staffing will be documented on AR Form 650-xxA and the recommendations provided to the internal classification committee and Appointing Authority/designee for review.

D. Administrative Segregation Hearings and Due Process

1. For offenders who have exhibited behaviors indicating that administrative segregation status may be warranted, a hearing will be held and will follow the due process procedures as outlined in AR 150-01, “Code of Penal Discipline” with the following modifications:
   
a. Notice shall be provided to the offender using AR Form 650-03A, “Notice for Administrative Segregation”.
   
b. The standard of proof used in the administrative segregation process shall be that of substantial evidence.
   
c. The hearing will be conducted by the administrative segregation hearings board.
   
d. The recommendations of the administrative segregation hearings officer/board will be documented on AR Form 650-03B.
   
e. Written recommendations of the administrative segregation hearing officer/board shall be provided to the offender at the end of the hearing utilizing AR Form 650-03E.

2. When the administrative segregation hearings board has made a decision:
   
a. Upon recommendation for administrative segregation status, the offender’s custody level will remain unchanged.
   
   1) The administrative segregation hearings officer/board shall notify the respective Appointing Authority/designee within two business days.
   
   2) If the Appointing Authority/designee recommends the offender for administrative segregation, the administrative segregation hearing officer/board’s recommendation, along with AR Form 650-03A and AR Form 650-03B will be forwarded to Central Classification Committee within five business days of the hearing.

   3) If the recommendation to place the offender in administrative segregation is denied by the Appointing Authority, the Appointing Authority shall notify the offender in writing that the recommendation of the administrative segregation hearing officer/Board is reversed or modified utilizing AR Form 650-03B.
3. Central Classification Committee will:

   a. Ensure that a final review of the recommendation for placement on administrative segregation status is completed within 15 working days from the date of the administrative segregation hearing and ensure that copies of their decision are forwarded to the department and working files.

   b. Ensure that the documented reasons and recommendation for placement on administrative segregation status are in compliance with this AR.

      1) In the event that the recommendation of the administrative segregation hearing officer/board is not supported by the Central Classification Committee, the Appointing Authority will be notified by the Assistant Director of Prisons, Offender Services.

      2) If the Central Classification Committee does not affirm the decision of the Appointing Authority, the Appointing Authority may request an additional level of review. This review will consist of a conference between the Appointing Authority, Assistant Director of Prisons, Offender Services and the Deputy Director(s) of Prisons.

   c. Assignments to administrative segregation status shall not be official until Central Classification Committee has completed this process and an executive assignment order (EAO) has been issued. The date when the EAO has been issued will be the date used to begin calculations for earned time for Administrative Segregation. This date is also used to start reviews in accordance with procedures established in Section IV I of this Administrative Regulation.

   d. The offender will be provided with written notice of the final decision (AR Form 650-03E) within five working days after the decision of Central Classification Committee. The five working day period may be extended for good cause, which must be documented.

E. Offender Appeal: The DOC provides for a review and appeal process. [2-CO-4B-03]

   1. The final decision to place an offender on administrative segregation status may be appealed by the offender to the Central Classification Committee who may affirm, reverse, or modify the decision.

   2. The appeal must be requested in writing, on DC Form 150-01D, “Offender Appeal Form” (see AR 150-01, Code of Penal Discipline) within seven days after the offender receives a copy of the written decision of the Central Classification Committee.

   3. Central Classification Committee may review the audio record of the administrative segregation hearing.

   4. Central Classification Committee may reverse or modify the decision if it was not based upon an assessment of the evidence presented.

   5. Central Classification Committee may order a new hearing.

   6. Written notice of the appeal decision shall be given to the offender within 30 days after the receipt of the appeal.

   7. CENTRAL CLASSIFICATION COMMITTEE’S JUDGEMENT ON APPEAL SHALL BE FINAL.

F. General Conditions of Confinement
1. All offenders on administrative segregation status shall have the following items unless there is imminent danger that the offender or any other offender(s) will destroy an item or induce self-injury. [4-4261]

   a. access to prescribed medication(s).
   b. clothing that is not degrading.
   c. A cell furnished with a toilet, wash basin with hot/cold water, desk, stool, and bunk with a fire retardant mattress that can be sanitized.
   d. Health care appliances, medical restrictions any necessary ADA assistive devices or accommodations awarded through the Request for Accommodation procedures outlined in AR 750-04.
   e. An opportunity to have clothing and linen laundered on the same basis as general population per AR/IA 1550-13, Laundry Operations. [4-4263]
   f. Access to barbering and hair care services on a regular basis. [4-4263]
   g. Access to janitorial supplies for individual cell cleaning per facility housekeeping plan. [4-4333].
   h. An opportunity to shave and shower a minimum of three times per week. [4-4262]
   i. Three nutritious meals per day, as prescribed by the DOC master menu.
   j. Opportunities for non-contact and attorney visiting, unless there are documented substantial reasons for withholding such privileges. [4-4267]
   k. Allow basic hygiene items from personal property (soap, toothbrush, toothpaste, feminine hygiene (female offenders only) and toilet paper) Indigent offenders should refer to AR 850-14, Indigent Offenders.
   l. Incoming and outgoing mail will be AR/IA 300-38, Offender Mail. [4-4266]
   m. Access to legal materials, per AR/IA 750-01, Legal Access. [4-4268]
   n. Access to reading materials, per AR/IA 500-02, Library Services. [4-4269] Reading materials shall be provided by the librarian on a regularly scheduled basis.
   o. Access to programs and services. [4-4273]
   p. Any property allowed by facility procedures unless property has been restricted due to special controls, behavior management plans or mental health treatment plans.
   q. Shall be allowed a minimum of one hour of recreation in a designated exercise area (5) days per week. [4-4270]
   r. Allowed telephone privileges following the privilege level system. [4-4271, 4-4272]

2. When an offender is deprived of any usually authorized item or activity, a PCDCIS incident report is completed. [4-4265]

3. Offenders assigned on administrative segregation status shall not be assigned to housing, work, or programs which would permit them access outside the facility designated security perimeter.

4. Offenders assigned on administrative segregation status must be escorted and restrained in accordance with their assigned privilege level whenever removed from their cell.

G. Progressive Management

1. Administrative Segregation Status is designed to be a progressive management process that includes distinct levels (I, II, III, IV A, and IV B) and is typically a minimum of nine (9) months in duration. Offenders are afforded the opportunity to progress through privilege levels and, in most cases, will release to general population after completion of Level IV A. Some offenders may continue placement on administrative segregation status if indicated by behavior or risk. Progression to general population is dependent on Appointing Authority/Deputy Director/Director Reviews.

2. Upon initial placement in Administrative Segregation, offenders will be assigned to Level II.

3. Offenders with a death penalty sentence may progress through the privilege level system but will continue to be
housed in a manner that is consistent with their continued risk and threat to the department. The Director of Prisons will approve the management plan for these offenders.

4. Due to operational or population needs, not all levels may be available at all facilities.

5. At all levels, offenders will be afforded a meaningful monthly out of cell meeting with their case manager. The case manager meetings will be documented in the electronic chronological log. Discussion should include but not be limited to the following topics:

   a. Current level status;

   b. Offender’s efforts to obtain life skills necessary to be a success upon release, work history and ethic, outside support, parole plans, employment proposal, willingness to participate in pre-release/parole planning. Update emergency contact information and offender photo;

   c. Current/recent behavior while in Administrative Segregation, i.e. negative/positive chronological entries, incident reports, and COPD convictions;

   d. Prior behavioral problems that the offender has exhibited that may have resulted in COPD convictions and/or prior placements in Administrative Segregation. Talk about what is needed to overcome these problems, i.e. making better choices;

   e. Program completion and/or program needs;

   f. Current/past work assignments and work history;

   g. Whether offender is in need of any clinical treatment or exhibiting any clinical issues;

   h. Progression off of administrative segregation status, and

   i. STG affiliation and activity.

6. If the offender refuses to come out for the meeting this shall be documented.

H. Administrative Segregation Privilege Levels

1. PRIVILEGE LEVEL I

   a. Offenders who have displayed inappropriate behaviors at higher levels may be regressed to Level I.

   b. Level I placement is a minimum 30 day placement.

   c. Offenders at this level will be evaluated for appropriate behavior, adjustment to administrative segregation and custody issues.

   d. Offender’s will be given one bar of soap, toothpaste and toothbrush. Offenders will be allowed appropriate clothing and undergarments and female offenders will be allowed feminine hygiene materials.

   e. The offender’s remaining property will be returned when the offender progresses to privilege Level II.

   f. When escorted out of the cell, but within the dayhall area, a Level I offender will be restrained with wrist restraints behind the back and a minimum of 2 staff hands on escort.
g. When escorted out of the cell and outside of the dayhall area, a Level II offender will be restrained in leg restraints with wrist restraints behind the back, or in universal restraints, and a minimum of 2 staff hands on escort.

1) PRIVILEGES

a) Purchase canteen items totaling $10.00 week; to include basic hygiene items, stamps, paper and envelopes only. The purchase of telephone time is not included in canteen limits.

b) One non-contact visit per month—duration 1½ hours.

c) One telephone session per month, not to exceed 20 minutes. Access to telephones will be according to facility telephone use schedules. Legal calls will not be included in this limit.

d) Telephone court hearings shall be coordinated in accordance with AR 750-03 DOC Employee and Offender Litigation Management.

e) Offenders assigned to this level will not have a television.

f) Any of the above privileges, excluding hygiene items, may be immediately and temporarily suspended, up to seven (7) days, by any staff member as an immediate consequence for offender’s negative behaviors associated with the privileges of the level. Only the initiating employee who took the privilege may reduce the number of days.

1) An entry will be made in the electronic chronological record for the offender and the offender will be notified.

2) A PCDCIS incident report must be completed.

3) The on-site supervisor will be notified and this notification must also be documented in the chronological record.

4) The offender will be notified in writing, utilizing a shakedown slip, to include the date and time the behavior occurred and the name of the staff person taking the action. This written notification will be delivered to the offender within one working day of the action.

2. PRIVILEGE LEVEL II

a. The initial entry level placement for all offenders into administrative segregation.

b. Level II placement is a minimum 90 day placement.

c. Offenders will be oriented to their behavioral expectations while in Administrative Segregation and the requirements for working their way out of Administrative Segregation. The orientation expectations will be provided in writing utilizing form 650-03C

d. Offenders at this level may participate in in-cell programming through the television.

e. When escorted out of the cell, but within the dayhall area, a Level II offender will be restrained with wrist restraints behind the back and a minimum of 2 staff hands on escort.

f. When escorted out of the cell and outside of the dayhall area, a Level II offender will be restrained in leg restraints with wrist restraints behind the back, or in universal restraints, and a minimum of 2 staff hands on escort.
1) PRIVILEGES

   a) Purchase canteen items totaling $25.00 per week. Phone time is not included in canteen limits.

   b) Two non-contact visits per month—duration 1½ hours each.

   c) Four telephone sessions per month, or not to exceed 88 minutes a month. Access to telephones will be according to facility telephone use schedules. Legal calls will not be included in this limit.

   d) Telephone court hearings shall be coordinated in accordance with AR 750-03 DOC Employee and Offender Litigation Management.

   e) Access to a television set or kiosk television access for program delivery and recreational interest. Adult Basic Education (ABE) and General Education Development (GED) assistance will be provided via television channel.

   f) Any of the above privileges, excluding hygiene items, may be immediately and temporarily suspended, up to seven (7) days, by any staff member as an immediate consequence for offender’s negative behaviors associated with the privileges of the level. Only the initiating employee who took the privilege may reduce the number of days.

      1) An entry will be made in the electronic chronological record for the offender and the offender will be notified.

      2) A PCDCIS incident report must be completed.

      3) The on-site supervisor will be notified and this notification must also be documented in the chronological record.

      4) The offender will be notified in writing, utilizing a shakedown slip, to include the date and time the behavior occurred and the name of the staff person taking the action. This written notification will be delivered to the offender within one working day of the action.

3. PRIVILEGE LEVEL III

   a. Level III is for offenders who have demonstrated appropriate behavioral and level compliance, demonstrated proper interaction with staff and other offenders and maintained suitable cell conditions.

   b. Level III placement is a minimum 90 day placement.

   c. Unrestrained and unescorted movement to the shower or exercise area, one at a time.

   d. At all other times, Level III offenders will be restrained with at a minimum of wrist restraints, behind the back and two staff members present. Staff are not required to place hands on the offender during this escort.

1) PRIVILEGES

   a) Purchase canteen items totaling $30.00 per week. Phone time is not included in canteen limits.

   b) Five non-contact visits per month—duration 1½ hours each.

   c) Six telephone sessions per month, or not to exceed 132 minutes per month. Access to telephones will be according to facility telephone use schedules. Legal calls and canteen ordering calls will not be
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included in this limit.

d) Telephone court hearings shall be coordinated in accordance with AR 750-03 DOC Employee and Offender Litigation Management.

e) Access to a television set or kiosk television access for program delivery and recreational interest. Adult Basic Education (ABE) and General Education Development (GED) assistance will be provided via television channel. This may include support from program staff at the cell front.

f) Offenders are given consideration for employment in a unit job assignment.

g) Any of the above privileges, excluding hygiene items, may be immediately and temporarily suspended, up to seven (7) days, by any staff member as an immediate consequence for offender’s negative behaviors associated with the privileges of the level. Only the initiating employee who took the privilege may reduce the number of days.

1) An entry will be made in the electronic chronological record for the offender and the offender will be notified.

2) A PCDCIS incident report must be completed.

3) The on-site supervisor will be notified and this notification must also be documented in the chronological record.

4) The offender will be notified in writing, utilizing a shakedown slip, to include the date and time the behavior occurred and the name of the staff person taking the action. This written notification will be delivered to the offender within one working day of the action.

4. PRIVILGE LEVEL IV A (Cognitive Programming)

a. Level IV A is designed for offenders who have successfully progressed through lower levels and are ready to begin the transitional process to General Population. These offenders have been identified through Internal Classification or Deputy Director Reviews.

b. This level is a minimum of 90 days.

c. Generally, offenders at this level must successfully complete DOC approved cognitive programming prior to further consideration for progression into General Population.

d. Offenders will be evaluated for documented acceptable behavior and program compliance.

e. Unrestrained and unescorted movement will be allowed at this level inside the dayhall.

f. When escorted out of the dayhall area, Level IV A offenders will not be restrained and will be escorted by at least one staff member.

g. Offenders who successfully complete Level IVA will be reviewed and reclassified, if necessary, prior to release back to general population.

1) PRIVILEGES

a) Purchase canteen items totaling $35.00 from approved canteen list. Phone time is not included in canteen limits.
b) Six non-contact visits per month—duration 2 hours each.

c) Eight telephone sessions per month, or not to exceed 176 minutes per month. Access to telephones will be according to facility telephone use schedules. Legal calls and canteen ordering calls will not be included in this limit.

d) Access to television set or kiosk television privileges.

e) Offenders are given consideration for employment in unit job assignments.

f) Access to a television set or kiosk television access for program delivery and recreational interest. Adult Basic Education (ABE) and General Education Development (GED) assistance will be provided via television channel. This may include support from program staff at the cell front. Cognitive Education classes such as Thinking for a Change will be offered and an expectation of completion will be required.

g) Offenders will be allowed congregate day hall activities and programming. Up to sixteen offenders may be out at one time. Activities allowed during these congregate day halls will be specified in facility IAs.

h) Any of the above privileges, excluding hygiene items, may be immediately and temporarily suspended, up to seven (7) days, by any staff member as an immediate consequence for offender’s negative behaviors associated with the privileges of the level. Only the initiating employee who took the privilege may reduce the number of days.

1) An entry will be made in the electronic chronological record for the offender and the offender will be notified.

2) A PCDCIS incident report must be completed.

3) The on-site supervisor will be notified and this notification must also be documented in the chronological record.

4) The offender will be notified in writing, utilizing a shakedown slip, to include the date and time the behavior occurred and the name of the staff person taking the action. This written notification will be delivered to the offender within one working day of the action.

5. PRIVILEGE LEVEL IV B

   a. Placement into Level IV B is reserved for offenders whose return to General Population poses a substantial security risk to institutional safety.

   b. Placement into or progression from administrative segregation requires written approval of the Director of Prisons.

   c. Offenders will be evaluated every 6 months for documented acceptable behavior and program compliance by the Appointing Authority.

   d. Unrestrained and unescorted movement will be allowed at this level inside the dayhall.

   e. When escorted outside of the dayhall area, these offenders will be in wrist restraints and escorted by at least one staff member.

      1) PRIVILEGES
a) Purchase canteen items totaling $35.00 from approved canteen list. Phone time is not included in canteen limits.

b) Six non-contact visits per month—duration 2 hours each.

c) Eight telephone sessions per month or not to exceed 16 minutes per month. Access to telephones will be according to facility telephone use schedules. Legal calls and canteen ordering calls will not be included in this limit.

d) Access to television set or kiosk television privileges

e) Offenders are given consideration for employment in unit job assignments.

f) Offenders will be allowed congregate day hall activities and programming. Four offenders may be out at one time. Activities allowed during these congregate day halls will be specified in facility IAs.

g) Any of the above privileges, excluding hygiene items, may be immediately and temporarily suspended, up to seven (7) days, by any staff member as an immediate consequence for offender’s negative behaviors associated with the privileges of the level. Only the initiating employee who took the privilege may reduce the number of days.

1) An entry will be made in the electronic chronological record for the offender and the offender will be notified.
2) A PCDCIS incident report must be completed.
3) The on-site supervisor will be notified and this notification must also be documented in the chronological record.
4) The offender will be notified in writing, utilizing a shakedown slip, to include the date and time the behavior occurred and the name of the staff person taking the action. This written notification will be delivered to the offender within one working day of the action.

h) Offenders at this level may participate in in-cell programming through the television which may include support from program staff at cell front or group programming.

f. Reassignment from Level IV B to a Level IV A or to another Facility

1) Offenders at Level IV B will be reviewed by a Deputy Director of prisons at six month intervals. This review will determine if the offender is appropriate for progressive movement. Recommendations will be made to the Director of Prisons if a change in assignment is indicated.

2) Offenders may be considered for progression from this level at any time with approval of the Director of Prisons.

3) If recommended for progression out of level IVB, offenders will be reviewed and reclassified, if necessary, prior to their release to general population.
chronological log may be progressed to the next level at the appropriate time frame. This will be
documented on AR Form 650-03F, Level Changes. Placement in Level IV B requires written approval of
the Director of Prisons and utilization of Forms 650-03C and G.

b. The Housing supervisor (CO IV) and the assigned case manager will conduct a review of all chronological log
entries and any other applicable documentation. Negative chronological entries will not prevent the review from
occurring.

c. All offenders recommended for removal from administrative segregation status will receive a review and
reclassification, if needed, prior to release to general population.

2. Regression

a. Any DOC employee has the authority to recommend the reassignment of offenders to a lower level based on
documented negative behavior. Recommendations will be submitted on AR Form 650-03F.

b. The housing supervisor (CO III or CO IV) or on duty Shift Commander will be notified of all recommendations
to reduce offender’s privilege level and will approve or deny the recommendation for reduction in level on AR
Form 650-03F.

3. Level changes will be reviewed by the internal classification committee. This review will constitute the final action
on all level reductions or progressions. Internal Level reviews are documented on Form 650-03F.

J. Monitoring and reviews:

1. A qualified mental health DOC employee or contract worker personally interviews and reviews the status of an
offender in administrative segregation for longer than 30 days and prepares a written notation of findings. [4-
4256]. Mental Health interviews will be conducted every 30 days. Mental health interviews shall not be completed
at the cell front; they must be completed outside of the offender’s cell and in a location where confidential
information will not be overheard.

2. When an offender is placed on administrative segregation status, they shall be reviewed by their assigned case
manager every seven days for the first two months of confinement in administrative segregation, and every 30
days thereafter. [4-4253]. The 30 day reviews/interviews shall not be completed at the cell front; they must be
completed outside of the offender’s cell.

3. The assigned case manager will complete form 650-03C, Administrative Segregation Privilege Level Reviews
monthly, for as long as the offender remain on administrative segregation status. The review will be provided to the
internal classification committee and will be signed by the Appointing Authority/designee. This monthly review will
not normally include a meeting with the offender.

4. For offenders who have been assigned administrative segregation for a period of one year, a Deputy Director Review
will be completed utilizing AR Form 650-03G. The Deputy Director(s) will meet with the offender and review the
case to determine if continued placement in administrative segregation is warranted.

K. Release from Administrative Segregation

1. The DOC shall specify the review process used to release an offender from administrative segregation. [4-4254].

2. A recommendation for release by the internal classification committee is forwarded to the Appointing Authority
for an additional review. If the offender has not progressed through Level IV, the Appointing Authority will
meet with the offender prior to recommending a change in status.

a. If after that meeting, the Appointing Authority approves the change in status, the recommendation will be documented on AR Form 650-03C and forwarded to the Central Classification Committee at Offender Services.

1) If this change in status is approved by the Central Classification Committee, reclassification documents will be prepared, if required. All offenders released from administrative segregation into general population will be reclassified for appropriate assignment.

2) The Central Classification Committee will confer with appropriate facility staff to determine the best placement for the offender. In all cases, the needs of the offender will be reviewed and a placement will be made based upon these needs.

3) Offenders will only be reclassified upon release from Administrative Segregation Status.

b. If denied a progressive move by Central Classification Committee, the offender shall be retained in administrative segregation.

3. CDOC will make every attempt to ensure offenders will not release directly to the community while on administrative segregation status. In the event such a release is imminent (within 180 days):

a. The facility Case Manager III will send notification to the Deputy Directors of Prisons and to the Central Classification Committee with a recommendation and supporting documentation as to why the offender cannot transition through a less secure facility or placement other than administrative segregation status.

b. The Deputy Director will determine if retention on administrative segregation status pending release is justified.

c. If the Deputy Director disagrees with the recommendation, the offender will be reviewed by the facility internal classification committee and the Central Classification Committee for an appropriate assignment.

d. If the Deputy Director agrees with the recommendation, the following actions will occur:

1) 180 days prior to offender release, the assigned case manager will notify the Administrative Segregation Transition Specialist.

2) The offender will be offered services from an Administrative Segregation Transition Specialist. These services may be provided in a group setting that may include restraints as determined by the facility. Every attempt will be made to develop a Transition Plan for every offender discharging or paroling from Administrative Segregation to the community.

3) This transition plan will be developed in conjunction with the offender, Case Manager, Administrative Segregation Transition Specialist, Community Re-Entry Specialist and Community Parole Officer.

4) For offenders granted discretionary parole, the Case Manager will contact the Transition Specialist for transition planning.

L. Administrative Segregation ACA Standards

1. Offenders in segregation receive daily visits from the senior correctional supervisor in charge, daily visits from a qualified health care official (unless medical attention is needed more frequently), and visits from members of the program staff upon request. [4-4258]
2. The DOC shall govern the selection, criteria, supervision, and rotation of DOC employees who work directly with offenders in segregation on a regular and daily basis. [4-4259]

3. DOC employees operating segregation units shall maintain a permanent log. [4-4260]

4. All offenders in Administrative Segregation are personally observed by a correctional officer at least every 30 minutes on an irregular schedule. Offenders who are violent or mentally disordered or who demonstrate unusual or bizarre behavior receive more frequent observation; suicidal offenders are under continuing observation. [4-4257]

V. RESPONSIBILITY

A. It shall be the responsibility of the Executive Director to ensure that due process procedures are followed in regard to Administrative Segregation hearings.

B. It shall be the responsibility of the Assistant Director of Prisons, Offender Services, to review this policy once a year.

C. It shall be the responsibility of the appropriate administrative head to ensure that administrative segregation hearing officers/boards are established, as needed, at every DOC facility.

D. It shall be the responsibility of the Assistant Director of Prisons, Offender Services, in coordination with the Corrections Training Academy Associate Director, to ensure involved DOC employees are adequately trained in the Administrative Segregation hearing process.

E. It shall be the responsibility of the appointing authorities to develop localized implementation/adjustments with regards to this administrative regulation.

VI. AUTHORITY

A. CRS 16-11-308. Custody of department of corrections procedure.
B. CRS 17-1-103. Duties of the executive director.
D. Wolff v. McDonnell (418 U.S. 539, 1974)

VII. HISTORY

December 15, 2010
November 15, 2009
October 15, 2008
October 15, 2007
October 15, 2006
October 15, 2005
November 1, 2004

ATTACHMENTS:  A. AR Form 650-03A, Notice for Administrative Segregation Hearing
B. AR Form 650-03B, Hearing Summary-Administrative Segregation Hearing
C. AR Form 650-03C, Administrative Segregation Privilege Level Review
D. AR Form 650-03D, Pre-Administrative Segregation Multi-Disciplinary Staffing Minutes
E. AR Form 650-03E, Administrative Segregation Hearing Results
F. AR Form 650-03F, Administrative Segregation Level Changes
<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>SUBJECT</th>
<th>AR #</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offender Group Living</td>
<td>Administrative Segregation</td>
<td>650-03</td>
<td></td>
</tr>
</tbody>
</table>

G. AR Form 650-03G, Administrative Segregation Deputy Director Review  
H. AR Form 100-01A, Administrative Regulation Implementation/Adjustments
**CASE NO.**
**DEPARTMENT OF CORRECTIONS**
**NOTICE FOR ADMINISTRATIVE SEGREGATION HEARING**
**FACILITY ______________**

<table>
<thead>
<tr>
<th>1. OFFENDER NAME</th>
<th>DOC NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOUSING UNIT</td>
<td>CURRENT SECURITY DESIGNATION</td>
</tr>
</tbody>
</table>

**2. SUMMARY** (Factual Report, including who, what, when, where, and how) Use additional sheets if necessary.

**3. I certify that the foregoing statements are true & correct to the best of my knowledge.**

S/ _______________________________________________________________________________________
Initiating DOC Employee  Date

S/ _______________________________________________________________________________________
Appointing Authority/Director  Date

**4. HEARING SCHEDULE:**

Case scheduled for _____________________________________________________

………………………………………………………………………………………………………………………. 

**5. SERVING DOC EMPLOYEE:**

You are hereby served this copy on this _______ day of ____________, 20_____, at _____________(am) (pm).
If you desire witnesses or a representative, in accordance with administrative regulation 600-02, please notify the classification chairperson as soon as possible, but no later than 24 hours prior to scheduled hearing, to avoid a continuance.

S/ _______________________________________________________________________________________
Serving Employee Signature  Date

………………………………………………………………………………………………………………………. 

**6. OFFENDER ACKNOWLEDGEMENT:**

I acknowledge receipt of a copy of the Notice for Administrative Segregation.

S/ _______________________________________________________________________________________
Offender Signature  Date

---

**DISTRIBUTION:**
- Department file
- Working file
- Appointing Authority/Director
- Offender
OFFENDER NAME | DOC NUMBER
---|---
CURRENT CUSTODY LEVEL | CURRENT PAROLE ELIBILITY
REASONS(S) for initiating placement in Administrative Segregation

EVIDENCE RELIED UPON: WITNESSES:

FINDING OF FACT:
Offender present at hearing: Yes ☐ No ☐
(If offender was not present—provide a written explanation)

DECISION:
Assign to Administrative Segregation: No ☐ Yes ☐

REASON(s):

S/ _______________________________________________________________________________________

Chairperson Date

DATE OF HEARING | TIME OF HEARING | LOCATION OF HEARING
---|---|---

COMMITTEE MEMBERS PRESENT

APPOINTING AUTHORITY REVIEW:
☐ AFFIRM ☐ MODIFY ☐ REVERSE

COMMENTS:

S/ _______________________________________________________________________________________

Appointing Authority Date

Offender Services Review: _____ Approve _____ Deny

Comments:

S/ _______________________________________________________________________________________

Assistant Director of Prisons, Offender Services Date

S/ _______________________________________________________________________________________

Offender Signature upon Receipt Date
**CASE NO.**

**DEPARTMENT OF CORRECTIONS**

**ADMINISTRATIVE SEGREGATION PRIVILEGE LEVEL REVIEW**

**FACILITY**

<table>
<thead>
<tr>
<th>OFFENDER NAME</th>
<th>DOC NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAST REVIEW DATE</td>
<td>PAROLE ELIGIBILITY DISCHARGE DATE</td>
</tr>
</tbody>
</table>

**INITIAL REASONS(S)** for placement in Administrative Segregation. PLACEMENT DATE: ________________
- Assault/related acts or threats, or attempt
- Serious disturbance or riot, or attempt
- Introduction or possession of dangerous contraband, or attempt
- Actively engaging in Security Threat Group conduct
- Escape/facilitating escape, or attempt
- Other: ________________________________

Offender present at review: **Yes** [ ]  **No** [ ]

(If offender was not present—provide a written explanation)

**DECISION OF COMMITTEE:**

RETAIN in Administrative Segregation: [ ] **No** [ ] **Yes** Recommended Custody: ________________

JUSTIFICATION:
- Need for continued behavioral review
- Erratic/disruptive behavior
- Other: ________________________________

Narrative to describe justification and expectations to progress:

**COMMITTEE MEMBERS SIGNATURES:**

<table>
<thead>
<tr>
<th>Case Manager</th>
<th>Case Manager</th>
<th>Committee Chairperson</th>
</tr>
</thead>
</table>

**DATE OF REVIEW**

APPOINTING AUTHORITY or DEPUTY DIRECTOR REVIEW:

Deputy Director review required if the offender has been placed in Administrative Segregation for more than 12 months

Director of Prisons approval required for placement into or progression from Level IV B.

[ ] **APPROVE**  [ ] **DENY**  [ ] Level IV B Placement Into  [ ] Level IV B Progression Out Of

COMMENTS:

S/ ____________________________________________ Date

Appointing Authority/Deputy Director Signature

S/ ____________________________________________ Date

Director of Prisons Signature for placement into or progression from Level IV B

**Review required for progressive movement.**

**OFFENDER SERVICES REVIEW:**

[ ] **APPROVE**  [ ] **DENY**

COMMENTS:

S/ ____________________________________________ Date

Assistant Director of Prisons, Offender Services Signature

**Distribution:**

Department File
Working File
Offender

Attachment “C”

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<table>
<thead>
<tr>
<th>OFFENDER NAME: (PRINTED)</th>
<th>DOC #:</th>
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<table>
<thead>
<tr>
<th>STAFFING DATE:</th>
<th>MINUTES PREPARED BY:</th>
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<tr>
<th>ATTENDEES:</th>
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<table>
<thead>
<tr>
<th>Offender ADS/PAS Information Reviewed:</th>
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<table>
<thead>
<tr>
<th>Offender Programmatic Needs</th>
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</table>

<table>
<thead>
<tr>
<th>Facility Capacity for alternative placements</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Offender Clinical Needs (includes mental health, ADA, other conditions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did mental illness contribute in any significant way to the behavior being considered?</td>
</tr>
<tr>
<td>2. Has the severity of mental illness symptoms changed in the recent past?</td>
</tr>
<tr>
<td>3. Is this inmate being considered for a special mental health placement rather than Segregation housing?</td>
</tr>
</tbody>
</table>

Clinician Signature: Date:

<table>
<thead>
<tr>
<th>Safety and Security of Staff, Other Offenders and Facility</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Recommendations:</th>
</tr>
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</table>

Distribution: Classification Committee
Appointing Authority
Working file
Department file
**DEPARTMENT OF CORRECTIONS**  
**ADMINISTRATIVE SEGREGATION HEARING RESULTS**  
**FACILITY ____________**

<table>
<thead>
<tr>
<th>OFFENDER NAME:</th>
<th>DOC #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASE #:</td>
<td>DATE OF HEARING:</td>
</tr>
</tbody>
</table>

**Decision of the committee:**  
_____ Recommend administrative segregation  
_____ Do NOT recommend administrative segregation

Board Chair printed name:  
Board Chair signature:  
This decision will be forwarded to the Appointing Authority for review*

Inmate printed name:  
Inmate signature:  
_____ or, refused to sign.

*If the recommendation for Administrative Segregation is upheld by the Appointing Authority, the documentation and recommendation will be forwarded to the Central Classification Committee for final approval.
### DEPARTMENT OF CORRECTIONS
### ADMINISTRATIVE SEGREGATION LEVEL CHANGES

<table>
<thead>
<tr>
<th>OFFENDER NAME:</th>
<th>DOC #:</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>CELL ASSIGNMENT:</th>
<th>DATE:</th>
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</thead>
<tbody>
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<td></td>
</tr>
</tbody>
</table>

Administrative segregation placement date: 

Current level: 

Reduce to level:  
   - I  
   - II  
   - III  

Progress to level:  
   - II  
   - III  
   - IV A  

Justification (be specific including what is required to progress or continue progressing):

☐ APPROVE  ☐ DENY

Effective date: 

Initiating employee printed name: 

Initiating employee signature: 

Approving housing supervisor printed name: 

Approving housing supervisor signature: 

Distribution: Working File (original)  
   Offender  

Attachment “F”  
   Page 1 of 1
ADMINISTRATIVE SEGREGATION
APPOINTING AUTHORITY/DEPUTY DIRECTOR REVIEW

Name:__________________________________ DOC #:_________ Age:______

Date of Arrival in Administrative Segregation:___________

☐ Direct Release to General Population
☐ Progress to Level IV A
☐ Progress to Level IV B
☐ Recommend to OMI Program Status*
☐ Remain in OMI*
☐ Protective Custody
☐ Retain in Administrative Segregation

☐ Number of Administrative Segregation Placements  1  2  3  4  5
☐ Number of Administrative Segregation Placements Due To STG  1  2  3  4  5
☐ Protective Custody Concerns No Yes
☐ COPD Convictions # in last 2 years ____________
☐ Total Number of Assault Convictions  1  2  3  4  5
☐ Program Completion ☐ High School Diploma ☐ GED ☐ Cognitive Education
☐ STG: Group_____________________ Age Joined_________ Moniker___________
☐ Year of MRD___________
☐ Current OMI Level: 1  2  3  4  5  6  7  8  9  10  11  12

Comments:__________________________________________ _______________________________________
___________________________________________________ _______________________________________
___________________________________________________ _______________________________________
___________________________________________________ _______________________________________

Deputy Director_______________________________________ Date________________
Appointing Authority__________________________________ Date________________
Facility Intelligence Officer:____________________________ Date________________
Offender Services____________________________________ Date________________
*Mental Health_______________________________________ Date________________

Distribution: CM FILE Attachment “G” Page 1 of 1
## ADMINISTRATIVE REGULATION
### IMPLEMENTATION/ADJUSTMENTS

<table>
<thead>
<tr>
<th>CHAPTER</th>
<th>SUBJECT</th>
<th>AR #</th>
<th>EFFECTIVE</th>
</tr>
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<tbody>
<tr>
<td>Offender Group Living</td>
<td>Administrative Segregation</td>
<td>650-03</td>
<td>05/15/12</td>
</tr>
</tbody>
</table>

(FACILITY/WORK UNIT NAME) ____________________________

WILL ACCEPT AND IMPLEMENT THE PROVISIONS OF THE ABOVE ADMINISTRATIVE REGULATION:

[ ] AS WRITTEN    [ ] NOT APPLICABLE    [ ] WITH THE FOLLOWING PROCEDURES TO ACCOMPLISH THE INTENT OF THE AR

(SIGNED) ___________________________________________ (DATE) ____________________

Administrative Head

Attachment “H”
Page 1 of 1