


**LEVEL V/VI TABLE OF PROCEDURES, FORMS, AND ATTACHMENTS**

Revised: **07/27/11**

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143000	Prison Security Levels V and VI	143000.A	Designated Special Control Units
143001	Criteria, Placement and Review	143001.A	Interim Level VI Housing/PTH– Table of Services
		143001.B	Level V or Level VI Referral Memorandum (Example)
		143001.1	Level VI / Interim Level VI / PHD / Disciplinary Placement Form
		143001.2	Request for Voluntary Placement in Inmate Protection
		143001.3	Notice for Level V or Level VI Hearing
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		143001.12	Level V/VI Release Packet/Progression to Step 4/Interstate Tracking Log
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		143001.14	Interstate Compact Referral Checklist
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		143002.1	Step Progression Review Form
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		143002.3	Level V -- Step 4/5 Program Participation Acknowledgment Form
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143003	Adjustment Controls	143003.1	Placement in Adjustment Controls Report
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		143003.3	Alternative Meal Service Order (Food Loaf)
		143003.4	Intensive Supervision Activity Log
143004	Behavior Program Contracts		<i>No forms</i>
143005	Programs, Activities and Services for Inmates In Level V and VI	143005.1	Television Set Agreement Form
		143005.2	In-Cell Hobby Craft Application and Approval
		143005.3	Visiting Request Form

 <p><b>CD-143000</b></p>	<p><b>NEW MEXICO CORRECTIONS DEPARTMENT</b></p>	<p><b>ISSUE DATE: 04/30/01</b>  <b>EFFECTIVE DATE: 04/30/02</b>  <b>REVIEW/REVISED: 07/27/11</b></p>
	<p><b>TITLE: Prison Security Levels V and VI</b></p>	

**AUTHORITY:**

- A. NMSA 1978, Section 33-1-6, as amended.
- B. Policy *CD-010100*.

**REFERENCES:**

- A. ACA Standards 2-CO-4B-01 and 2-CO-4B-04, *Manual of Standards for the Operation of Correctional Agencies*, 1993.
- B. ACA Standards 4-4133, 4-4140, 4-4141, 4-4249, 4-4250, 4-4251, 4-4253 through 4-4271, 4-4273, 4-4312-1 and 4-4400, *Standards for Adult Correctional Institutions*, 4<sup>th</sup> Edition.

**PURPOSE:**

To establish and monitor guidelines for assignment of inmates classified to Prison Security Levels V and VI including APA and provide for regular review.

**APPLICABILITY:**

All employees and inmates at secure facilities that house NMCD inmates within the State of New Mexico, particularly classification and security staff assigned to Levels V and VI.

All facilities with a Level V/Level VI Alternative Placement Area, particularly mental health staff, psychiatrists and program staff responsible for the delivery of services and who may sit as a member of the Unit Management Team.

**FORMS:**

- A. **Level VI/Interim Level VI/PHD/Disciplinary Placement Form** (*CD-143001.1*)
- B. **Request for Voluntary Placement in Inmate Protection Form** (*CD-143001.2*)
- C. **Notice for Level V or Level VI Hearing Form** (*CD-143001.3*)
- D. **Level V/VI Hearing Decision Form** (*CD-143001.4*)
- E. **Level VI Status Review – 7 and 30 Days Form** (*CD-143001.5*)
- F. **Level V/VI Referral Packet Checklist Form** (*CD-143001.6*)
- G. **Appeal of Level V/VI Placement or Retention Decision Form** (*CD-143001.7*) (2 pages)

- H. **UMT Review for Release from Level V or VI or Consideration for Level V Progression to Step 4** Form (CD-143001.8)
- I. **STIU: Step 4/Release Investigation** Form (CD-143001.9)
- J. **CLASSIFICATION: Step 4/Release Investigation** Form (CD-143001.10)
- K. **HOUSING SERGEANT: Step 4/Release Investigation** Form (CD-143001.11)
- L. **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (CD-143001.12)
- M. **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (CD-143001.13)
- N. **Interstate Compact Referral Checklist** Form (CD-143001.14)
- O. **Step Progression Review** Form (CD-143002.1)
- P. **Individual Inmate Behavior Log** Form (CD-143002.2) (2 pages)
- Q. **Level V – Step 4/5 Program Participation Acknowledgement** Form (CD-143002.3)
- R. **Temporary Suspension of Privileges for Step System Inmates** Form (CD-143002.4)
- S. **Placement in Adjustment Controls** Form (CD-143003.1)
- T. **Modified Meal Serving Memorandum (Styrofoam)** Form (CD-143003.2)
- U. **Alternative Meal Service Order (Food Loaf)** Form (CD-143003.3)
- V. **Intensive Supervision Activity Log** Form (CD-143003.4)
- W. **Television Set Agreement** Form (CD-143005.1)
- X. **In-Cell Hobby Craft Application and Approval** Form (CD-143005.2)
- Y. **Visiting Request** Form (CD-143005.3)

**ATTACHMENTS:**

- A. **Designated Special Control Units** Attachment (CD-143000.A)
- B. **Interim Level VI Housing/PTH – Table of Services** Attachment (CD-143001.A) (2 pages)
- C. **Level V or Level VI referral Memorandum (Example)** Attachment (CD-143001.B) (4 pages)
- D. **Level V Table of Services** Attachment (CD-143002.A) (5 pages)
- E. **Level VI Table of Services** Attachment (CD-143002.B) (5 pages)

**DEFINITIONS:**

- A. Adjustment Controls: A behavior management tool for Level V/VI inmates intended to modify an inmate's assaultive, disruptive, or self-injurious behavior if continuous or repetitive. Inmates placed in Adjustment Controls will be placed in a Control Cell, if available, pursuant to these procedures.
- B. Alternative Placement Area (APA): A designated living area(s) for inmates who (1) have a Level V or Level VI status designation; and, (2) who meet specified mental health criteria. Placement in the APA occurs in order to best facilitate mental health service delivery for such inmates.

- C. APA Mental Health Clinician: The psychologist(s) assigned to treat inmates in the APA.
- D. APA Unit Psychiatrist: The psychiatrist(s) assigned to provide psychiatric services to APA inmates. Also responsible for other duties specific to APA inmates as specified in this policy.
- E. Assaultive Behavior: Examples include, but are not limited to: striking or attempting to strike another person; any action which causes a person to reasonably believe that he is in danger of an immediate battery; throwing food, body substances or liquids, spitting; or, acts intended to harm others.
- F. Behavioral Management Contract (BMC): An individualized behavior modification plan designated to discourage an inmate's specific and repetitive disruptive behavior through a systematic reinforcement approach. (Not applicable to inmates assigned to APA.)
- G. Conditions A & B of the Behavior Management Contract (BMC):
- Condition A:** The most restrictive status under which the Unit Management Team may place an inmate. An inmate who exhibits violent and/or disruptive behavior, and fails to comply with institutional rules and regulations may be placed under Condition A.
- Condition B:** A less restrictive status than Condition A under which the Unit Management Team may place an inmate. An inmate who is beginning to demonstrate behavior inconsistent with institutional rules and regulations may be placed under Condition B.
- H. Conditions of Confinement Step System: A behavior-driven progressive incentive system consisting of steps that encourages appropriate behavior. Step assignments are not classification steps, but are behavior-based decisions.
- I. Criminal Management Information System (CMIS): An automated computer system utilized by the Corrections Department for the purpose of tracking the status of offenders.
- J. Criminal Management Information System (CMIS) MAP: The area of the CMIS, under Offender Search, that indicates the status of segregated inmates to include PHD; Disciplinary Segregation as well as each of the steps to which Level V and VI inmates have been assigned.
- K. Deputy Director of Adult Prisons: Responsible for making decisions regarding inmates who are assigned to Level V or Level VI status.

- L. Disruptive Behavior: Behavior that threatens the security and/or operations of the institution; creates, encourages or incites a disruptive atmosphere; or creates a serious health hazard. Examples of such behavior include, but are not limited to: covering window/tray slot, continuous yelling, kicking or banging on cell door, any act or verbalization that incites racial tensions or advocates institutional disruption, throwing feces, urine or other substances.
- M. Inmate Protection: Placement based upon the need to separate an inmate from the general population based upon a determination that housing in general population would place the inmate in jeopardy of serious bodily harm. Such placement may be voluntary (at the request of the inmate pursuant to the criteria contained herein) or involuntary (based upon a determination by the administration).
- N. Interim Level VI: Temporary placement of the inmate in the segregation unit by the shift supervisor or unit manager based on inmate meeting the Level VI placement criteria including threat to the security of the institution and/or protection needs. An inmate in this status requires review by the Interim Level VI Classification Committee.
- O. Interim Level VI Classification Committee: The Interim Level VI Classification Committee shall be composed of the Unit Manager, Classification Supervisor, Program Coordinator or Deputy Warden who shall serve as the Chairperson and a security representative (Sergeant or above). The Interim Level VI Classification Committee shall make decisions on referring inmates to the Classification Bureau Chief or Deputy Director of Adult Prisons for the placement of inmates into Level V or Level VI status or alternate housing.
- P. Involuntary Placement into Custody Levels V and VI: Separation from the general population of an inmate whose continued presence in the general population represents a threat to the security of the institution or the inmate is in danger of bodily harm or other violent acts from himself/herself or other inmates, if the inmate remains in the general population. This category includes all pre-trial detainees (county jail holds) and death-sentenced inmates.
- Q. Initial Level V or VI Hearing: A hearing which takes place following the inmate's transfer to a Special Control Unit after the inmate has been approved by the Classification Bureau Chief, Deputy Classification Bureau Chief or the Deputy Director of Adult Prisons for Level V or VI classification. During this hearing the inmate will be given the opportunity to appeal the decision placing him in Level V or Level VI.
- R. Level V/IV Classification Committee Review: A transfer/custody review conducted by the Unit Management Team regarding decisions on inmates who have already been classified to Level V or Level VI by the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons. These reviews shall be handled in accordance with the transfer/custody review procedures outlined in policy *CD-080100*. Such reviews include consideration of release from Level V or VI or reclassification from Level V to Level VI. Committee membership shall include at a minimum the Unit Manager or Acting Unit Manager who shall serve as the Chairperson and a security representative (Sergeant or above). A mental health representative will participate as required by policy.

- S. Level V or VI Referral Memorandum: A memorandum signed by the Warden or Deputy Warden which contains a chronology of events and information regarding an inmate's past and current behavior that justifies the inmate's placement in Level V or Level VI.
- T. Level V/VI Release Packet: Documents required for the Level V/VI Release Packet Includes Unit Management Team Review for Release from Level V or VI or Consideration for Level V Progression to Step 4 (*CD-143001.8*); STIU Step 4/ Release Investigation (*CD-143001.9*); Classification: Step 4/Release Investigation (*CD-143001.10*) and Housing Officer: Step 4/ Release Investigation.
- U. Orientation Packet: An individualized plan for inmates in Level V or Level VI Regular Housing, designed to address specific program and behavior expectation for inmates recommended for Step 4 and Step 5.
- V. Pending Transfer Hold (PTH): An inmate who is placed into Interim Level VI status and is not subsequently classified to Level V or VI but instead has been approved by the Central Office Classification Bureau for transfer to another general population and is awaiting space availability.
- W. Prison Security Level: The physical features and operational requirements of a facility. Security levels are referred to in terms of Level I, II, III, IV, V and VI.
- X. Program Compliance Plan (PCP): An individualized plan for inmates in Regular Level V or VI housing designed to address specific program and behavior expectations for inmates recommended for Step 4 and Step 5.
- Y. Regular Level V/VI Housing: Housing locations designated for inmates who are classified as Level V or Level VI and who have been evaluated as having no mental health condition that would preclude such placement.
- Z. Security Levels V and VI: The most restrictive custody statuses for inmates posing the greatest risk to institutional security and the safety of others. Such inmates cannot function in general population based on classification designation, the need for Inmate Protection, the need to separate the inmate for the secure and orderly operation of the institution, or the service of a disciplinary sanction in Level VI.
- AA. Shift Supervisor: A lieutenant or above who is responsible for the overall operation of the shift.
- BB. Special Control Unit: The locations designated for the housing of inmates who are classified as Level V or Level VI. The Secretary of Corrections designates Special Control Units.

- CC. Status Review: A review and determination by the Level VI status reviewer on whether additional information has been received which would cause the status reviewer to consider making a recommendation for alternative placement. The status reviewer shall be an authorized administrator.
- DD. Substantial Evidence: Such evidence that a reasonable person would accept as adequate to support a conclusion. It is that quality of evidence necessary for a court to affirm a decision of an administrative agency.
- EE. Table of Services: A matrix that describes the privileges, programs, and services for each Level and Step.
- FF. Threat to the Security of the Institution: Any behavior or situation which involves, causes or is reasonably likely to cause acts of violence, a substantial risk of death or serious injury to any person, substantial destruction of property, escape or risk of escape. Includes introduction of contraband or conspiracy or attempt to introduce contraband.
- GG. Unit Management Team (UMT): A team responsible for inmate management within a distinct housing unit, consisting of a Unit Manager, classification officer, appropriate housing security supervisor or designee and an education representative. A mental health representative will participate when an adverse action is being contemplated (i.e., regression, suspension of privileges, retention in a level or step, and certain good time decisions).
- HH. Voluntary Placement into Custody Level VI: Placement in Inmate Protection based upon (1) the inmate's written request and (2) approval by the Unit Management Team/Classification Committee.

**POLICY:****A. Management of Level V and Level VI Inmates:**

It is the policy of the New Mexico Corrections Department that inmates who cannot be managed in general population or cannot function in general population due to criteria established by this policy will be separated from the general population and placed in a Special Control Unit. Management of such inmates will be based upon a behaviorally based Step program, in which increased privileges are granted for inmates who demonstrate appropriate behavior for specified periods of time.

**B. Designation of Units:**

Facilities and Units that are designated as Level V or Level VI are set forth in Attachment *CD-143000.A* to this policy, (*Designated Special Control Units*).

**C. Review and Release from Custody Level V or VI:**

Inmates in Security Level VI will receive status reviews and will be considered for release as specified in these procedures.

**D. Identification of Mental Health Needs and Provisions of Services:**

1. NMCD will use established screening criteria to identify inmates who should be excluded from placement in Regular V/VI Housing on the basis of their mental health status. Such inmates may be located in the Alternative Placement Area.
2. For those inmates placed in Regular V/VI Housing, NMCD will provide mental health and psychiatric treatment to inmates with special needs and identified as needing such services, pursuant to NMCD Mental Health Policies. [2-CO-4B-04]
3. A qualified mental health professional shall personally interview and prepare a written report on any inmate remaining in segregation for more than 30 days. If confinement continues beyond 30 days, a mental health assessment by a qualified mental health professional shall be made at least every three months or more frequently if prescribed by the chief medical authority. [4-4256]
4. Mental Health services for Level V and Level VI inmates assigned to the APA are specified in Policy *CD-180400*, (*Mental Health Screening and Services for Level V/VI Inmates*) and Policy *CD-180500*, (*APA Mental Health and Related Services for Level V/VI Inmates*).

**E. All inmates shall be classified into the most appropriate security and program level. Policies shall include: [2-CO-4B-01]**

- Classification plans
- Classification status reviews
- Pre-parole progress reports
- Special needs

**F. When segregation units exist, written policy and procedure govern their operation for the supervision of inmates under administrative segregation, protective custody, and disciplinary detention. [4-4249]**



- G. Segregation housing units provide living conditions that approximate those of the general inmate population; all exceptions are clearly documented. Segregation cells/rooms permit the inmates assigned to them to converse with and be observed by staff members. **[4-4140]**
- H. All cells/rooms in segregation provide a minimum of eighty (80) square feet, of which thirty-five (35) square feet is unencumbered space. **[4-4141]**
- I. The Warden or shift supervisor can order immediate segregation when it is necessary to protect the inmate or others. The action is reviewed within 72hrs by the appropriate authority. **[4-4250]**
- J. Inmates are admitted to the segregation unit for protective custody only when there is documentation that protective custody is warranted and no reasonable alternatives are available. **[4-4251]**
- K. A review of the status of inmates in administrative segregation and protective custody shall be conducted by the classification committee or UMT every seven days for the first two months and at least every 30 days thereafter. **[4-4253]**
- L. The review process used to release an inmate from administrative segregation and protective custody shall be specified. **[4-4254]**
- M. Inmates held in disciplinary segregation for periods exceeding 60 days shall be provided conditions of confinement as per the **Table of Services** Attachment (*CD-143001.A*). **[4-4255]**
- N. All special management inmates shall be personally observed by a correctional officer at least every 30 minutes on an irregular schedule. Inmates who are violent or mentally disordered or who demonstrate unusual or bizarre behavior shall receive more frequent observation; suicidal inmates shall be under continuous observation. **[4-4257]**
- O. Inmates in segregation shall 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]**
- P. Written policy and procedure shall govern the selection criteria, supervision, and rotation of staff who work directly with inmates in segregation on a regular and daily basis. **[4-4259]**
- Q. Staff operating segregation units shall maintain a permanent log. **[4-4260]**
- R. All inmates in segregation shall be provided prescribed medication, clothing that is not degrading and access to basic personal items for use in their cells unless there is imminent danger that an inmate or any other inmate(s) will destroy an item or induce self-injury. **[4-4261]**
- S. Inmates in segregation shall have the opportunity to shave and shower at least three times per week. **[4-4262]**

- T. Inmates in segregation shall receive laundry, barbering, and hair care services and are issued and exchange clothing, bedding, and linen on the same basis as inmates in the general population. Exceptions are permitted only when found necessary by the senior officer on duty; any exception is recorded in the unit log and justified in writing. **[4-4263]**
- U. Alternative meal service may be provided to an inmate in segregation who uses food or food service equipment in a manner that is hazardous to self, staff or other inmates. Alternative meal service is on a individual basis, is based on health or safety considerations only, meets basic nutritional requirements, and occurs with written approval of the warden and responsible health authority. The substitution period shall not exceed seven days. **[4-4264]**
- V. Whenever an inmate in segregation is deprived of any usually authorized item or activity, a report of the action is filed in the inmate's case record and forwarded to the chief security officer. **[4-4265]**
- W. Inmates in segregation can write and receive letters on the same basis as inmates in the general population. **[4-4266]**
- X. Inmates in segregation shall have opportunities for visitation unless there are substantial reasons for withholding such privileges. **[4-4267]**
- Y. Inmate in segregation shall have access to reading materials and legal materials. **[4-4268]**  
**[4-4269]**
- Z. Inmates in segregation shall receive a minimum of one hour of exercise per day outside their cells, five days per week, unless security or safety considerations dictate otherwise. **[4-4270]**
- AA. Inmates in administrative segregation and protective custody shall be allowed telephone privileges. **[4-4271]**
- BB. Unless authorized by the warden or designee, inmates in disciplinary detention are allowed limited telephone privileges except for calls related specifically to access to the attorney of record. **[4-4272]**
- CC. Inmates in administrative segregation and protective custody shall have access to programs and services that includes, but is not limited to, the following: **[4-4273]**
- Educational services
  - Commissary services
  - Library services
  - Social services

- Counseling services
- Religious guidance
- Recreational programs

DD. When an offender is transferred to segregation, health care staff will be informed immediately and will provide a screening and review as indicated by the protocols established by the health authority. Unless medical attention is needed more frequently, each offender in segregation receives a daily visit from a qualified health care professional. The visit ensures that offenders have access to the health care system. The presence of a health care provider in segregation is announced and recorded. The frequency of physician visits to segregation units is determined by the health authority. **[4-4400]**

EE. Single-occupancy cells/rooms, measuring a total of 80 square feet, of which 35 square feet is unencumbered space, shall be available, when indicated, for the following: **[4-4133]**

- Inmates with severe medical disabilities
- Inmates suffering from serious mental illness
- Sexual predators
- Inmate likely to be exploited or victimized by others
- Inmates who have other special needs for single housing
- Maximum custody inmates

FF. The department provides a system that identifies and monitors the movements and activities of inmates who pose a significant concern to the safety, security, and orderly management of correctional institutions. This system should ensure that appropriate staff is made aware of these inmates, and that procedures exist to ensure information is current and communicated in a timely fashion. **[4-4312-1]**



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Designated Special Control Units**

The following units have been designated as Level V or Level VI:

PNM-VI	Level VI
PNM-V	Level V Level VI
NMWCF	Level V Level VI APA
CNMCF: Main Unit	Level VI – interim placement Level V/VI – APA
SNMCF: Main Unit	Level VI – interim placement
WNMCF: Main Unit	Level VI – interim placement
LCCF	Level VI – interim placement
GCCF	Level VI – interim placement
NENMDF	Level VI – interim placement

All units designated for the interim placement of Level VI inmates will submit a plan for the provision of programs and services consistent, to the maximum extent possible, with the **Interim Level VI Housing/PTH Table of Services (CD-143001.A)**. NMWCF will submit a plan for the provision of programs and services consistent, to the maximum extent possible, with the **Level V/Level VI Table of Services (CD-143002.A)**. The plans should address provision of education services for facilities where ETV is not available and provision of visiting for facilities where video visiting is not available or non-contact visiting facilities are not available or insufficient in number to accommodate all Level VI visiting, and situations of this type.


Authorized:



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

 <b>CD-143001</b>	<b>NEW MEXICO CORRECTIONS DEPARTMENT</b>	<b>ISSUE DATE: 04/30/01 EFFECTIVE DATE: 04/30/02 REVIEW/REVISED: 07/27/11</b>
	<b>TITLE: Criteria, Placement and Review</b>	

**AUTHORITY:**

Policy *CD-143000*

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**PROCEDURES: [4-4312-1] [4-4249] [2-CO-4B-01] [2-CO-4B-06]****A. Interim Level VI Placement :**

1. The Unit Manager or shift supervisor may place an inmate into Interim Level VI status if the inmate meets any of the placement criteria outlined in this procedure. At RDC, the security supervisor, lieutenant or above, may place an inmate into Interim Level VI status. The placement will be documented on the **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)**. The Placement Form shall state the specific and detailed reasons that an inmate meets the eligibility criteria for placement. The placement form should also document the reason(s) that no alternative to Interim Level VI exists. Such inmates will be reviewed and may be referred for placement in a designated Special Control Unit in accordance with this procedure.
2. Staff must provide supporting documentation that justifies Interim Level VI placement (i.e. request for voluntary placement; memorandums, copy of disciplinary report, etc.).
3. The Unit Manager or shift supervisor will ensure that a new **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)** is completed when an inmate's segregation status changes (i.e. inmate was first placed under pre-hearing detention; then placed under Disciplinary Segregation; then under Interim Level VI status).
4. The Unit Manager or shift supervisor will ensure that a new **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)** is completed when the reason(s) for Interim Level VI change (e.g. original placement for protection changes to threat to security or vice versa).
5. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP (i.e. inmate was first placed under pre-hearing detention; then placed under Disciplinary Segregation; then under Interim Level VI status).
6. When an offender is transferred to segregation, health care personnel will be informed immediately. [4-4400]
7. Interim placement into Level V is prohibited.
8. Placement and classification of those inmates pending transfer to a Special Control Unit may occur.

**PROCEDURES: [4-4312-1] [4-4249] [2-CO-4B-01] [2-CO-4B-01]****A. Interim Level VI Placement :**

1. The Unit Manager or shift supervisor may place an inmate into Interim Level VI status if the inmate meets any of the placement criteria outlined in this procedure. At RDC, the security supervisor, lieutenant or above, may place an inmate into Interim Level VI status. The placement will be documented on the **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)**. The Placement Form shall state the specific and detailed reasons that an inmate meets the eligibility criteria for placement. The placement form should also document the reason(s) that no alternative to Interim Level VI exists. Such inmates will be reviewed and may be referred for placement in a designated Special Control Unit in accordance with this procedure.
2. Staff must provide supporting documentation that justifies Interim Level VI placement (i.e. request for voluntary placement; memorandums, copy of disciplinary report, etc.).
3. The Unit Manager or shift supervisor will ensure that a new **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)** is completed when an inmate's segregation status changes (i.e. inmate was first placed under pre-hearing detention; then placed under Disciplinary Segregation; then under Interim Level VI status).
4. The Unit Manager or shift supervisor will ensure that a new **Level VI/PHD/Disciplinary Placement Form (CD-143001.1)** is completed when the reason(s) for Interim Level VI change (e.g. original placement for protection changes to threat to security or vice versa).
5. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP (i.e. inmate was first placed under pre-hearing detention; then placed under Disciplinary Segregation; then under Interim Level VI status).
6. When an offender is transferred to segregation, health care personnel will be informed immediately. **[4-4400]**
7. Interim placement into Level V is prohibited.
8. Placement and classification of those inmates pending transfer to a Special Control Unit may occur.

**C. Pending Transfer Hold (PTH):**

1. An inmate who is placed into Interim Level VI status and is not subsequently classified to Levels V or VI but instead is approved by the Central Office Classification Bureau for transfer to another general population shall be considered as PTH status.
2. In order for an inmate to be placed under this status, the Central Office Classification Bureau must have already approved the inmate for transfer to a general population facility.
3. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP (i.e. inmate was first placed in Interim Level VI status. CBC Administrator will be responsible for changing the status from Interim VI to PTH).
4. Inmates in this status, upon approval by the Classification Bureau Chief, shall be provided conditions of confinement as per the **Table of Services** Attachment (*CD-143001.A*).

**D. Voluntary Placement in Inmate Protection: [4-4133]**

1. An inmate may be placed voluntarily in Level VI Inmate Protection if the inmate states his or her belief that housing in general population places him or her in jeopardy of serious bodily harm and requests placement in Level VI. This request must be in writing and signed by the inmate. The request may be documented on the **Request for Voluntary Placement in Inmate Protection** Form (*CD-143001.2*). Placement based upon inmate request is on an interim basis only; official placement in Level VI is made only at the determination of the Interim Level VI Classification Committee.
2. The Unit Manager or Shift Supervisor may place (pending a hearing in accordance with the classification process) an inmate in voluntary placement immediately, and will complete a **Level VI/PHD/Disciplinary Placement** Form (*CD-143001.1*). The Department may accept or reject the request after the hearing. An inmate who requests assignment to Level VI shall be required to sign a **Request for Voluntary Placement in Inmate Protection** Form (*CD-143001.2*), stating the inmate's desire for assignment to Level VI Inmate Protection.
3. The Interim Level VI Classification Committee will review all inmates who request or require Inmate Protection. The inmate must provide specific information on the **Request for Voluntary Placement in Inmate Protection** Form (*CD-143001.2*); to the Interim Level VI Classification Committee that demonstrates his/her need to be separated from the general population. The information must meet one of the following criteria:



- a. Names of enemies (unknown enemies is not acceptable) and details of the incident(s) or information resulting in the inmate's request for Inmate Protection;
  - b. Any gang affiliation or involvement on the part of either the inmate who is requesting Inmate Protection or the inmates from whom he/she is requesting to be separated. This information must specifically name the gang and the precise nature of the conflict.
4. The Interim Level VI Classification Committee shall thoroughly document the inmate's reason(s) for requesting Inmate Protection. The Interim Level VI Classification Committee may refer the matter for investigation if additional information regarding the inmate's stated reasons for Inmate Protection is needed. If the results of the investigation and the reasons for Inmate Protection provided by the inmate do not provide sufficient justification to warrant separation from the general population, the inmate shall be returned to general population. If the Interim Level VI Classification Committee determines that the inmate requires separation from the general population, the inmate shall be referred by the Interim Level VI Classification Committee to the Central Office Classification Bureau for placement in either the Level VI Unit or at a facility designated for Inmate Protection. Such inmates may remain in interim Level VI status at the referring facility until bed space is available at a designated facility.
- a. An inmate who cannot function among other inmates based on protection issues will be considered for placement at LCCF Protective Custody Special Management Unit.
  - b. The Interim Level VI Classification Committee shall document on the Level V/VI Hearing form and in the CMIS Classification Committee Action that each inmate being referred for Level VI status based on a need for protection has been considered for placement at the LCCF Protective Custody Special Management Unit.
5. The Interim Level VI Classification Committee action will be entered into the CMIS.

**E. Involuntary Placement: [4-4133]**

1. The Unit Manager/Shift Supervisor may immediately place an inmate in involuntary placement based upon recent overt acts or reliable information, which reasonably leads the shift supervisor to believe in good faith that an inmate presents a threat to the security of the institution, may be a sexual predator, or otherwise meets the eligibility criteria for involuntary placement in Level VI. **[4-4250]**
2. The Unit Manager/Shift Supervisor may immediately place an inmate involuntarily in Inmate Protection based upon the inmate being in danger of bodily harm or violent acts from other inmates in the general population.

3. The Unit Manager/Shift Supervisor who places an inmate in involuntary placement under this section shall document the reasons for the action on **Level VI/PHD/Disciplinary Placement** Form (*CD-143001.1*) and shall give a copy of the document to the inmate within one working day, weekends and holidays excluded.
4. Former law enforcement officers, correctional officers and public officials in safety sensitive positions shall automatically be separated from the general population upon their arrival at the Reception and Diagnostic Center.
5. Inmates placed as involuntary Inmate Protection will be considered for placement at LCCF Protective Custody Special Management Unit.
6. The Interim Level VI Classification Committee action will be entered into the CMIS.

**F. Inmates Returned to RDC Who Paroled or Discharged from Level V or Level VI Status:**

1. Any inmate who paroled or discharged without completing the Level V or Level VI program shall be considered for return to complete the program following his or her return to the Reception and Diagnostic Center. The RDC Classification Committee shall consider the following in their recommendation regarding the inmate's return to complete the Level V or Level VI program.
  - a. The original reason(s) for placement into Level V or Level VI
  - b. Inmate's conduct while assigned to Level V or Level VI prior to release including any disciplinary reports, step retentions or step regressions
  - c. Inmate's behavior following release from incarceration to include conduct while under probation and/or parole supervision, as well as any crimes committed in the community.
  - d. Length of time on probation, parole or discharge status following inmate's release from incarceration.
  - e. Inmate's conduct since return to the Reception and Diagnostic Center.
  - f. Any new information that has been developed or received regarding the inmate's need for placement into Level V or VI other than the original reason(s) for placement. This includes information from the Security Threat Intelligence Unit.

2. An inmate who returned to RDC following release from Level V or Level VI status shall not be classified for placement in a general population facility without the final approval of a Deputy Director of Adult Prisons; the Classification Bureau Chief or the Deputy Classification Bureau Chief.

**G. Inmates Sentenced to Death:**

1. Inmates in this status shall be subject to involuntary placement and review as outlined in this procedure.
2. Inmates in this status, upon initial placement, shall be provided conditions of confinement as per the Table of Services, Step 5. A death-sentenced inmate who engages in misconduct may be regressed to a lower step.
3. Inmates placed in this status that engage in misconduct, assaultive or disruptive behavior may warrant the use of Adjustment Controls, procedure *CD-143003* and instituting conditions of confinement procedures in *CD-143002*.

**H. Interim Level VI Classification Committee Review:**

1. Within five working days of an inmate's placement in Interim Level VI status from general population, the inmate shall receive an Initial Interim Level VI Classification Committee hearing.
2. Reception and diagnostic center inmates who are placed in interim Level VI status, either upon their arrival at RDC or from the RDC population shall receive an RDC Interim Level VI Classification Committee hearing within ten working days following placement in interim Level VI status.
3. For inmates who were initially segregated under pre-hearing detention and/or disciplinary segregation status, the Interim Level VI Classification Committee hearing must occur within five working days following the inmate's completion of any PHD and/or disciplinary segregation and placement in Interim Level VI status.
4. The inmate shall be afforded the right to appear before the Initial Interim Level VI Classification Committee in order to provide input and shall be given a **Notice for Level V or Level VI Hearing** Form (*CD-143001.3*) at least 48 hours prior to the hearing.
5. All Interim Level VI Classification Committee reviews will be documented on the **Level V/VI Hearing Decision** Form (*CD-143001.4*).

6. The Interim Level VI Classification Committee shall make a determination on whether the inmate meets the eligibility criteria for Level V or Level VI status and whether the inmate should be referred to the Central Office Classification Bureau for transfer to a designated Level V or Level VI Unit.
7. If the inmate does not meet the eligibility criteria for continued placement in Level V or Level VI status, the Interim Level VI Classification Committee shall release the inmate to general population or refer the inmate for transfer to an appropriate facility where space is available.
8. The Interim Level VI Classification Committee action will be entered/updated into the CMIS.

**I. Status Reviews (Level VI only):**

1. The purpose of the Status Review is to determine if the Level VI placement continues to be warranted.
2. Status Reviews will be conducted by the Unit Management Team or authorized group in accordance with ACA standard 4-4253.
3. A status review of an inmate's placement in Level VI will be conducted every seven days for the first two months following the date of the inmate's placement in Interim Level VI status and at least every 30 days thereafter, using the **Level VI Status Review – 7 and 30 Days Form (CD-143001.5)**. The information shall be updated/entered into the CMIS. **[4-4253]**
4. If the inmate is initially placed in Level VI at a facility other than a designated Level VI unit, that facility is responsible for conducting the inmate's status reviews until the inmate's transfer to a designated Special Control Unit.
5. Once the inmate is transferred to a designated Special Control Unit, operations staff at the designated Special Control Unit is responsible for continuing the schedule of status reviews that were initiated at the sending facility.
6. Unit Managers shall be responsible for ensuring that status reviews are being conducted and that these reviews are being entered appropriately into the CMIS.
7. An inmate who is placed into Interim Level VI status and is not subsequently classified to Level V or VI but instead has been approved by the Central Office Classification Bureau for transfer to another general population and is awaiting space availability (Pending Transfer Hold PTH) does not require Status Reviews once the inmate has been approved for transfer by the Central Office Classification Bureau.

**J. Criteria and Procedures for Placement in Level V and VI Facilities:**

## 1. Criteria for Placement in Levels V and VI:

For the purpose of placement in Level V or Level VI, an inmate's institutional behavior will be evaluated including the inmate's historical institutional adjustment. An inmate may be placed in a Prison Security Level V or Level VI if the inmate meets at least one of the following criteria:

- a. The inmate poses a threat to the security of the institution, as defined by this Policy.
- b. The inmate continues to receive major disciplinary reports or demonstrates a pattern of minor disciplinary reports that threatens the security of the institution, safety or staff or inmates, or involves the destruction of property.
- c. The inmate is a suspect of or the subject of an investigation regarding a serious criminal offense. Placements based upon pending investigation must comply with Paragraph K, below.
- d. The inmate meets one criterion from list d.1.1. – d.1.3 and also meets one criterion from list d.2.1 – d.2.3:

**LIST d.1:** The inmate must be identified as one of the following:

- d.1.1: A validated Security Threat Group member
- d.1.2: A suspected Security Threat Group member
- d.1.3: Associated with a STG, disruptive group, or street gang and is actively participating in gang-related activities

**NOTE:** For inmates identified as meeting criteria d.1.2 or d.1.3, the inmate must be actively participating in gang-related activity as based on evidence or confidential information and this must be articulated in writing to a reasonable person standard.

**LIST d.2:** The inmates must have a documented history of institutional behavior that meets one of the following criteria:

- d.2.1: Acts of violence or directing others to engage in violence
- d.2.2: Threatening or coercing other inmates, staff, or members of the public, or directing others to engage in threats or coercion
- d.2.3: Involvement in or directing others to engage in organized unauthorized activity, either inside or outside of the institution, which includes but is not limited to: introducing or selling drugs or other contraband, protection rackets, work stoppages, and impeding the orderly operation of the institution

- e. The inmate has demonstrated repeated behavior of unwillingness to comply with institutional rules or regulation, unpredictable or disruptive behavior, and unwillingness to participate in programs or work assignments, as documented in inmate misconduct reports, or incident reports or staff observation logs.

2. Placement in Level VI based on Inmate's Protection Needs:

An inmate may be placed in a Prison Security Level VI, pending the classification process, if the inmate meets the following criteria:

- a. An inmate may be placed in Level VI Inmate Protection if the inmate states his or her belief that housing in the general population places the inmate in jeopardy of serious bodily harm and submits a written request for placement in Level VI.
- b. An inmate may be placed in involuntary Inmate Protection in Level VI based upon an inmate being in danger of bodily harm or violent acts from other inmates if the inmate remains in the general population.

3. Institutional Procedures for Placement of Inmates in Designated Level V or Level VI Facilities:

The procedure for placement of an inmate in a prison Security Level V or Level VI, Special Control Unit, shall be as follows:

- a. The Interim Level VI Classification Committee shall refer any inmate who requires placement in Level V or VI to the Classification Bureau for final decision by the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons.
- b. A Level V or VI Referral Packet must be completed for each inmate who is referred for transfer and forwarded to the Central Office Classification Bureau by the Classification Supervisor or assigned Unit Manager within five working days following the Classification Committee referral.
- c. The Classification Supervisor or assigned Unit Manager must ensure that a copy of the Referral packet is placed in the inmate's file prior to the transfer of the inmate to the designated Level V or Level VI facility.
- d. This Level V or VI Referral packet must include the following documents:
  - 1) Level V/VI Referral Packet Checklist (*CD-143001.6*)
  - 2) Level V or VI Placement Form.

- 3) Incident Reports describing the circumstances of the event(s) leading up to placement.
- 4) Initial Level V or Level VI Hearing Form.
- 5) Level V or Level VI Referral Memorandum. The content and format will be in accordance with the **Level V or Level VI Referral Memorandum (Example)** Attachment (*CD-143001.B*).
  - a) TO: Central Office Classification Bureau
  - b) FROM: Warden or Deputy Warden of Sending Facility
  - c) RE: Inmate Name and Number.
  - d) Date of referral for Custody Level V or VI Placement.
  - e) Basis for Level V or VI Placement: (e.g. Assaultive and/or Disruptive behavior, Security Threat Group or Disruptive Group Activity, Confidential Information, Subject of Investigation for a Serious Criminal Offense or any other Threat to the Security of the Institution). The specific reason(s) for placement must be cited. This justification must detail the specific behavior of the inmate. If the reason(s) for custody Level V or VI placement is based on confidential information, the credibility of the confidential information must be determined in accordance with the procedure outlined in policy *CD-143001*. If disciplinary reports constitute the primary or substantial basis for the placement, include in this section.
  - f) Adjustment History: Other behavior by the inmate that further supports placement must be cited in reverse chronological order (most recent to past). This justification should list the cumulative behavior that the inmate has engaged in which supports custody Level V or VI placement. List the disciplinary offenses that are provided for background information. Reports that constitute the primary or substantial basis for placement should be included, as per Paragraph (e) above.
  - g) The above basis for placement and/or adjustment history must cite the specific paragraph and subparagraph for the criteria met in policy *CD-143001*.
  - h) Current Mental Health clearance chrono that designates either “Regular Level V/VI Housing” or “APA Housing”.

- 6) The Classification Bureau must receive all supporting documents in the Level V/VI Referral Packet to approve the placement prior to transfer. This information should include, but not be limited to, the history of current and prior specific behavior, chronology and specific dates of applicable events, where the inmate was housed, other inmates involved, etc.
  - 7) If the placement is based on confidential information, both the Summary of Confidential Information and the actual Confidential Information documents must be provided in the Level V/VI Referral Packet submitted to the Central Office Classification Bureau. Confidential information shall not be placed in the inmate's file.
  - 8) Upon receipt of the Confidential Information documents, the Central Office Classification Bureau will disseminate the documents to the Central Office Security Threat Intelligence Unit (STIU) who will be responsible for forwarding the information to the STIU and the Deputy Warden at the designated Level V/VI facility.
4. Central Office Procedures for Placement of Inmates in Designated Level V or Level VI Facilities:
- a. The Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons shall take action based on the information provided in the Level V or VI Referral Packets. If the information or documentation provided in the packet is unclear or insufficient, the Central Office Classification Bureau will contact the sending facility's Warden or Deputy Warden in order to obtain additional information.
  - b. The Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons will make the determination as to whether an inmate should be classified to Level V or Level VI within two working days following receipt of a **completed** Level V or Level VI Referral packet.
  - c. A Deputy Director of Adult Prisons, the Classification Bureau Chief or the Deputy Classification Bureau Chief may approve or deny the Interim Level VI Classification Committee referrals for Level V or VI placement at a designated facility.
  - d. If the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons determines that an inmate should be placed at a Level V or Level VI facility, the inmate will be transferred upon space availability. However, if the inmate is designated for housing in the APA, the transfer to the APA Unit will occur within five working days of such determination, or the inmate will be provided with property and services consistent with the **Interim Level VI Housing/PTH Table of Services** Attachment (*CD-143001.A*).



- e. If the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons determines that the inmate who has been evaluated as meeting the APA criteria should NOT be placed at Level V or Level VI, the inmate will be placed in a facility consistent with his custody Level (Level I through IV). This placement will be made within five working days of the determination.
- f. The inmate will be advised, in writing, of the decision of a Deputy Director of Adult Prisons, the Classification Bureau Chief or Deputy Classification Bureau Chief. The inmate may appeal the decision pursuant to the Appeal process described in Paragraph L, below.
- g. The decision of the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons must be entered into the CMIS.
- h. Following approval of Level V or Level VI by the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons, the Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP (e.g. inmate status changes from Interim Level VI).
- i. Required Documentation:
  - 1) Following the transfer of each inmate approved for Level V or Level VI to a designated Level V or VI facility, the Classification Officer, and Unit Manager at the Level V or Level VI facility shall conduct a thorough review of each inmate's file within one working day following the inmate's transfer to ensure that all required documentation regarding the reasons for the inmate's placement in Level V or VI is on file.
  - 2) If any required documentation is missing from the inmate's file, the Unit Manager shall immediately notify the Deputy Warden of the missing documentation and shall immediately notify the Central Office Classification Bureau.
  - 3) The Central Office Classification Bureau shall ensure that the facility receives the required documents within one working day following notification by the Unit Manager.

5. Emergency Transfers to a Special Controls Unit:
  - a. The Director of Adult Prisons must approve all Emergency Transfers to a Level VI facility. The movement of any pre-hearing detention inmate to a Level VI facility shall be considered an emergency transfer. In the event of an emergency transfer to a designated Level VI facility, the **Level V or Level VI Referral Memorandum (Example)** Attachment (*CD-143001.B*) will be completed and submitted by the sending facility to the central office classification bureau within five working days following the transfer.
  - b. For inmates who are transferred on an emergency basis to a Special Control Unit in Interim Level VI status, the Interim Level VI Classification Committee at the Special Control Unit shall conduct an interim level VI review in accordance with the procedures, outlined under the Interim Level VI Classification Committee Review chapter, within five working days following receipt of the **Level V or Level VI Referral Memorandum (Example)** Attachment (*CD-143001.B*).
  - c. For inmates who are transferred on an emergency basis to a Special Control Unit on pre-hearing detention status and the disciplinary report is subsequently dismissed, the Interim Level VI Classification Committee at the Special Control Unit shall conduct an Interim Level VI Review in accordance with the procedure, outlined under the Interim Level VI Classification Committee Review chapter, within five working days following the notification of the dismissal of the disciplinary report.
6. Procedures for Placement of Long Term Disciplinary Segregation Inmates at Designated Special Control Unit:
  - a. An inmate who has been sanctioned to serve over 60 days of disciplinary segregation at a facility that is not designated as a Special Control Unit and is not a candidate for Level V or Level VI may be transferred to a Special Control Unit to serve the remainder of the disciplinary segregation. The Central Office Classification Bureau will arrange for the transport of the long-term disciplinary segregation inmate to a designated Special Control Unit.
    - 1) Upon completion of disciplinary segregation at the Special Control Unit, the inmate shall be placed into Interim Level VI status and the Classification Committee shall refer the inmate for appropriate placement.
    - 2) In the event that the inmate, while serving disciplinary segregation, engages in behavior that would make the inmate a candidate for Level V or Level VI placement, the Special Control Unit shall be responsible for making an appropriate referral to the Central Office Classification Bureau.

- b. An inmate who has been sanctioned to serve over 60 days of disciplinary segregation at a facility that is not designated as a Special Control Unit and is a candidate for Level V or Level VI shall not be transferred to a Special Control Unit to begin serving disciplinary segregation until the inmate has first been reviewed by the Interim Level VI Classification Committee and approved for Level V or Level VI by the Central Office Classification Bureau.
- 1) Upon a finding of guilt of the misconduct report(s), inmate will be placed in Interim Level VI status.
  - 2) Within five working days, the Interim Level VI Classification Committee at the sending facility shall review the inmate in accordance with the procedures outlined in paragraph H (Interim Level VI Classification Committee Review).
  - 3) A Level V or Level VI packet must be completed by the sending facility for each inmate who is referred for transfer and forwarded to the Central Office Classification Bureau by the Classification Supervisor or assigned Unit Manager within five working days following the Classification Committee referral in accordance with the procedures outlined in paragraph J, (Criteria and Procedures for Placement in Level V and VI Facilities).
  - 4) The Central Office Classification Bureau shall take action on the Interim Level VI Classification Committee referral in accordance with the procedures outlined in paragraph J.4 (Central Office Procedures for Placement of Inmates in Designated Level V or VI facilities).
- c. If the inmate is approved for Level V or Level VI by the Central Office Classification Bureau, the Classification Bureau will arrange for the transport of the inmate to a designated Special Control Unit to begin serving the long-term disciplinary segregation.
- d. Upon completion of long-term disciplinary segregation at the Special Control Unit, the inmate's status will become Level V or Level VI as approved by the Central Office Classification Bureau.
- e. In the event that the inmate, while serving disciplinary segregation, engages in behavior that would change the basis for the Level V or Level VI placement, the Special Control Unit shall be responsible for making an appropriate referral to the Central Office Classification Bureau.
- f. Each time that an inmate's status changes, a new Level VI/PHD/Disciplinary Placement Form (CD-143001.1) must be completed and placed in the inmate file.

- g. The Interim Level VI Classification Committee action will be entered into the CMIS.
  - h. The decision of the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons must be entered into the CMIS
7. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP

**K. Placements Based on Pending Investigation:**

For inmates placed in Interim Level VI based upon a pending investigation:

1. The facility should make all reasonable efforts to have the investigation completed prior to the inmate's initial Interim Level VI Classification Committee or as soon as possible thereafter.
2. Upon conclusion of the investigation, it shall be the responsibility of the Interim Level VI Classification Committee (or UMT if the inmate has already been approved and transferred to a Level VI facility) to make a decision regarding whether the inmate's Interim Level VI placement is justified under any of the other Level VI placement criteria.
  - a. If the investigation results support a Level VI placement , the Interim Level VI Classification Committee or UMT is responsible for the following:
    - 1) Providing a new Level VI hearing to the inmate, to include 48-hour notice specifying the reason(s) that Level VI placement is being considered. Such committee hearing should generally be held within five working days of the conclusion of the investigation.
    - 2) Subsequent to the committee hearing, submitting a Level VI referral memorandum referring the inmate to the Classification Bureau in accordance with Paragraph H, above, of this procedure (see the **Level V or Level VI Referral Memorandum (Example)** Attachment (*CD-143001B*)).
    - 3) The Classification Committee or UMT action will be entered/updated into the CMIS.
  - b. If the investigation results do not satisfy the placement criteria and the inmate no longer requires Level VI placement, the Classification Committee or UMT will either:

- 1) If the facility has not yet submitted a Level VI referral memorandum or if the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons has not yet acted on that **Referral**, the facility may release the inmate to the facility general population; or
  - 2) If the facility has submitted a Level VI referral memorandum, and the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons has approved the Level VI placement, the inmate must be referred to the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons for release from Level VI based upon the fact that the inmate does not meet a Level VI criterion.
- c. The Classification Committee or UMT action will be entered/updated into the CMIS.
3. The UMT is responsible for monitoring the status of investigations by conducting monthly follow up with the investigating officer, facility, or agency. Such contacts will be documented.

**L. Initial Level V or VI Hearing; Appeal of Placement and Initial Interstate Compact Transfer Review:**

**Appeal of Placement:**

1. An inmate approved for placement in Level V or Level VI by the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons will be given an Initial Level V or VI Hearing at which time the inmate will be given the opportunity to appeal, such appeal to be reviewed and acted upon by the Director of Adult Prisons. The Initial Level V or VI Hearing shall take place within five working days following the inmate's transfer to a Special Control Unit.
  - a. The inmate will be advised of his right to appeal after he has been approved by the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons for Level V/VI classification and has been transferred to a Level V/VI facility.
  - b. The Unit Management Team will schedule the inmate for an Initial Level V or VI Hearing within five working days of arrival. The inmate will be afforded at least a 48 hour written notice of hearing (Form CD 143001.3), which will inform the inmate that he will be given notification of right to appeal. The inmate may waive the notice in writing. This shall also be considered the inmate's iTAP or TAP review as per CD-080104.

- c. At the Initial Level V/VI hearing, the Unit Manager or individual chairing the Initial Level V/VI hearing will read the appeal language to the inmate verbatim. The inmate will be given an appeal form, **Appeal of Level V or Level VI Placement or Retention Decision** Form (*CD-143001.7*).
    - d. Following the Initial Level V or VI Hearing the Unit Manager will ensure the classification officer has appropriately entered all inmate status changes into the CMIS MAP and the OMP. (e.g. inmate status change from Interim Level VI to Level V or VI Step 1)
  2. An inmate may appeal the decision of the Deputy Director of Adult Prisons, Classification Bureau Chief or Deputy Classification Bureau Chief. The appeal will be filed using the **Appeal of Level V or Level VI Placement or Retention Decision** Form (*CD-143001.7*).
    - a. Appeal forms submitted to any individual other than the Deputy Warden will not require a response.
    - b. The inmate must state the specific reason(s) for his or her disagreement with the decision and should include any documentation supporting their claim. The inmate shall submit only one appeal regarding his placement and must include all reasons he or she disagrees with the decision.
    - c. The inmate shall not include other issues that are not relevant to the placement decision. Such issues will not require a response.
    - d. The inmate must submit the appeal to the facility Deputy Warden no later than 15 working days after receiving the written decision.
  3. The Deputy Warden is responsible for collecting all appeals and for maintaining a tracking system that indicates the dates that the appeals are received and forwarded to Central Office for processing using the **Level V or VI Appeal Tracking Log** Form (*CD-143001.7*).
  4. The Director of Adult Prisons will review the appeal and is responsible for final action. The Director of Adult Prisons will inform the inmate, in writing, of the decision and such decision will be final and not subject to further appeal. This decision will be mailed to the facility Deputy Warden, who will provide a copy to the inmate.
  5. The Deputy Warden is responsible for providing a copy of the Director of Adult Prisons' decision to the Unit Manager who will ensure that the copy is placed in the inmate's file and that the Unit Management Team initiates any action required by the Director based on the appeal. The Deputy Warden is responsible for providing a copy of the Director of Adult Prison decision to the inmate. The decision will be delivered to the inmate by the Deputy Warden or the Unit Manager.

**Initial Interstate Compact Transfer Review:**

1. Inmates who have been classified to Level VI based on protection needs shall be reviewed by the Unit Management Team at a Level VI facility at the Initial Level VI hearing to determine whether they meet the eligibility criteria for interstate transfer pursuant to paragraph W. of this policy statement.
2. Inmates who meet the eligibility criteria for interstate transfer shall be referred by the Unit Management Team to the facility Health Services Administrator for medical review in order to determine whether the inmate can be medically cleared for interstate transfer. Final determination will be made by the NMCD Health Services Director or designee.
3. Following review of the inmate's medical status by medical staff, the facility Health Services Administrator shall provide the Unit Management Team with an **Interstate Compact Transfer Review Memorandum** that documents the following information:
  - a. Whether the inmate has been medically cleared for interstate compact transfer.
  - b. For any inmate who is not medically cleared, the Memorandum must state that the inmate has been informed by medical staff of the specific medical reasons that he or she is not medically cleared for interstate compact transfer and has been given the opportunity to discuss his medical condition with medical staff.
  - c. For any inmate who is not medically cleared, the Memorandum must also state whether the inmate still requests interstate compact transfer even though he or she is not medically cleared.
4. The facility Health Services Administrator will forward the completed **Interstate Compact Transfer Review Memorandum** to the respective Unit Manager who shall ensure that the inmate is scheduled for a **Final Interstate Compact Transfer Review** in accordance with paragraph W. of this policy statement.

**M. Placement Based On Confidential Information:**

1. If the basis for placing an inmate into Level V or Level VI status involves information from a confidential informant, the disclosure of which would place such informant(s) in jeopardy of serious bodily harm or threaten the security of the institution, the inmate shall be given a written summary of the facts upon which this custody status is being requested, sufficient to allow the inmate to challenge the truthfulness of the facts and/or the need for this custody status, in a manner that would not inherently identify the confidential informant(s) or pose a threat to the security of the institution. The inmate shall sign for the summary acknowledging receipt.

2. If the placement into Level V or VI is based on confidential information, at least four of eight of the following criteria will be documented in order to determine the credibility of the confidential information:
  - The identity of the staff member receiving the confidential information;
  - Specific details of any conduct attributed to the inmate;
  - The informant's basis for knowledge of the confidential information;
  - Whether the informant previously had provided information which proved accurate and useful;
  - The content of any statements attributed to the inmate being classified;
  - The prison location where the information was received from the confidential informant;
  - The date the information was received;
  - What efforts were made to corroborate the information?
3. The security staff member who develops the confidential information shall be responsible for documenting at least four of the eight above criteria and for providing copies to the Deputy Warden as well as to the Classification Supervisor or Unit Manager.
4. The Classification Committee shall be responsible for determining the credibility of the confidential information and for making a determination that the information is reliable and deemed accurate. The Classification Committee must document the findings during their deliberations.
5. Confidential information received from outside agencies (e.g., county jails, out-of-state facilities, etc.) will be taken into consideration. Although some of these agencies may not be able to submit original confidential documents to the NMCD due to their internal protocols, the NMCD will consider the information valid and reliable as long as the documents contain sufficient specificity to enable NMCD staff to determine the extent of the inmate's involvement in illicit activities. In cases where NMCD relies upon confidential information from an outside agency, NMCD will provide a summary of the confidential information to the affected inmate.

**N. Level V and Level VI Classification Committee Transfer/ Custody Reviews:**

1. On a monthly basis, the Unit Manager shall review the CMIS Release Report to determine those inmates who will be scheduled for progressive movement from Level VI, step 3 and Level V step 5 for that month. Any inmate who is classified to Level V or Level VI shall be reviewed by the Unit Management Team. The UMT will conduct a Level V/VI Classification Committee Review at least five days prior to the scheduled progressive movement.



2. A Deputy Director of Adult Prisons Division shall approve any inmate who is released from Level VI to a lower Prison Security Level, pursuant to Paragraph R, below. Releases from Level V will be handled in accordance with section **O.**, next page.
3. If, at any point in time while an inmate is placed in Level V, the inmate engages in such disruptive behavior that Adjustment Controls, Behavioral Program Contracts, or a change in Step is not sufficient to address the problem, a review will be conducted by the Unit Management Team (Unit Manager, classification, mental health, education, security) to determine if continued placement in Level V is appropriate. Upon completion of this review, if the decision is that placement in Level V is no longer appropriate, placement at Level VI is to be initiated by the Unit Management Team. The UMT will conduct a Level V/VI Classification Committee Review and make a referral, with the Warden's approval, to the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons. The referral will be made through completion of a Level VI referral packet in accordance with paragraph H of this procedure.
4. The Classification Officer will ensure that a copy of any Level V or VI referral packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
5. In the absence of the Warden, the designated Acting Warden may review and take action on the referral and will sign the action as Acting Warden.
6. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Warden's Office and to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log**.
7. The Classification Committee action will be entered/updated into the CMIS.

The decision of the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons must be entered into the CMIS

**O. Level V Inmates Progression to Step 4: Process for Evaluation and Recommendation and Process for Release upon Completion of Level V: [4-4254]**

1. When the Unit Management Team evaluates a Level V inmate as a reasonable risk for recommendation for assignment to Step 4, the Unit Management Team will complete the **Unit Management Team Review for Release from Level V or VI or Consideration for Level V Progression to Step 4 Form (CD-143001.8)** and present the case to the Unit Manager for approval and then to the unit Deputy Warden for final approval.

2. In the absence of the Deputy Warden, the designated Acting Deputy Warden may review and take action on a UMT recommendation for Step progression and will sign the action as Acting Deputy Warden.
3. The Unit Management Team shall evaluate security concerns that the Level V inmate's movement to Step 4 would present. The Unit Management Team will submit information requests to the facility STIU Coordinator (**STIU Step 4/Release Investigation**, CD-143001.9); the inmate's assigned classification officer (**Classification Step 4/Release Investigation**, (CD-143001.10); and to the Housing Unit Sergeant or equivalent position **HU Sergeant Step 4/Release Investigation**, (CD-143001.11).
4. The inmate shall be evaluated for possible progressive movement using the following criteria and any other pertinent information:
  - a. Inmate discipline history while in Level V.
  - b. Security Threat Group activity while in Level V.
  - c. Behavior while in Level V.
  - d. Staff interaction while in Level V.
  - e. Confidential information received while in Level V.
  - f. Consideration of past criminal history.
  - g. Step 3 status for a minimum of three consecutive months, with clear conduct
5. The Unit Management Team will review the case with regard to established guidelines, while considering the safety of the general public, staff, inmates and the security of the Corrections Department.
  - a. If the recommendation of the Unit Management Team is to advance a Level V inmate to Step 4 but the inmate has an association with a Security Threat Group or disruptive group, the Team shall order an evaluation by the Security Threat Intelligence Unit Officer as set out in CD-131502. This evaluation shall be completed to determine the inmate's degree of association and current participation. If the evaluation indicates that the inmate's gang affiliation or activity presents an on-going threat to the security of the institution, progressive movement will be denied and the inmate will be considered for placement in Level VI.
  - b. The Unit Management Team will submit the recommendation to the facility Deputy Warden for evaluation and review to include all information indicated on the **Unit Management Team Review for Release from Level V or VI or Consideration for Level V Progression to Step 4** Form (CD-143001.8).

6. The Deputy Warden has the authority to approve or deny the inmate's progression to Level V Step 4. If the inmate is approved for Step 4, the Deputy Warden will determine the appropriate housing for the inmate. The time period for Step 4 will commence upon approval, provided inmate has completed the minimum time in Step 3. In the event that Step 4 housing is not immediately available, the inmate will receive credit toward Step 4 pending transfer to his Step 4 housing location. If the inmate is disapproved for Step 4, the reason for disapproval will be forwarded to the Warden, who may overturn the disapproval and order that the inmate be progressed to Step 4, which time period will commence from the date of the UMT's recommendation or completion of minimum time in Step 3.
7. For Level V inmates recommended for Step 4, the facility STIU Officer shall conduct a personal interview with inmates who have a disruptive group or STG history and who are recommended for progressive movement into a general population setting. This interview shall include an evaluation of all available material regarding the progression of referred inmates.
8. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Deputy Warden's Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log**

**P. Release of Inmates from Level V who has completed all requirements of Level V: [4-4254]**

1. An inmate who successfully completes Level V programming will be reclassified to a lower custody level. This includes Level V inmates in APA housing.
2. A Level V inmate who is released may be placed at either Level IV or Level III.
3. Such inmates will not be placed at Level I or Level II immediately upon release from Level V.
4. If a Level V inmate has met the requirements of the Special Control Unit Level V program in the opinion of the Unit Management Team and the Warden, the inmate will be referred to the Classification Bureau Chief or a Deputy Director of Adult Prisons for placement in general population by conducting a Level V/VI Classification Committee Review.
5. The Classification Officer will ensure that a copy of the Level V release packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
6. In the absence of the Warden, the designated Acting Warden may review and take action on the release from Level V and will sign the action as Acting Warden.

7. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Warden's Office; then to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (*CD-143001.12*).
8. The Central Office Classification Bureau will ensure that a tracking system is maintained that indicates the date that the packet has been received by the Bureau; the date that the referral was approved or denied as well as the date that the packet was returned to the Unit Manager using the **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (*CD-143001.13*).
9. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP (e.g. inmate status changes from Level V, step 4 to Level V, step 5). However, for any inmate who has been referred by the Unit Management Team for release from Level V to another Level, the Unit Manager will ensure that the classification officer does not enter a closing date on the CMIS MAP for Level V step 5 unless a Deputy Director of Adult Prisons or Classification Bureau Chief has approved this release from Level V. The closing date on the CMIS MAP should be entered at the time that the inmate is transferred from the Level V facility.
10. The Classification Committee action will be entered/updated into the CMIS.
11. The decision of the Classification Bureau Chief or a Deputy Director of Adult Prisons must be entered into the CMIS
12. Once the Classification Bureau Chief or a Deputy Director of Adult Prisons has approved a Level V inmate for release to general population, the inmate shall not be regressed nor shall the inmate lose any privileges outlined under the Table of Services. An approved inmate for whom the Unit Management Team has determined requires a higher level of security based on the inmate's behavior must be referred to the Classification Bureau Chief or a Deputy Director of Adult Prisons in accordance with the procedures outlined under paragraph N. **Level V and Level VI Classification Committee Transfer/ Custody Reviews.**

**Q. Mandatory Annual Reclassification Custody Reviews:**

In accordance with policy *CD-080102*, Institutional Classification, the classification officer is responsible for conducting Mandatory Annual Reclassification Custody Reviews for each inmate assigned to Level V.

An inmate may initiate a review of his/her progress and program status by submitting a written request to his assigned Classification Officer.

**R. Level VI Inmates: Evaluation and Recommendation for Reclassification to Lower Level: [4-4250]**

1. If the UMT believes at any point in time, for any reason, that placement in Level VI is no longer appropriate; they may recommend release from Level VI. Any such recommendation by the UMT must be reviewed by the facility Warden. A Level V/VI Classification Committee Review will be conducted and the UMT recommendation and subsequent recommendation by the Warden will be forwarded for final decision by a Deputy Director of the Adult Prisons Division.
2. The Level V/VI Classification Committee Review will be entered/updated into the CMIS.
3. When the Unit Management Team evaluates a Level VI inmate as a reasonable risk for recommendation for release, the Unit Management Team will complete the **Unit Management Team Review for Release from Level V or VI or Consideration for Level V Progression to Step 4** Form (*CD-143001.8*).
4. The Unit Management Team shall evaluate security concerns that an inmate's movement to a less secure environment would present. The Unit Management Team will submit information requests to the facility STIU Coordinator (**STIU Step 4/Release Investigation, CD-143001.9**); the inmate's assigned classification officer (**Classification Step 4/Release Investigation, CD-143001.10**); and to the Housing Unit Sergeant or equivalent position (**HU Sergeant Step 4/Release Investigation, CD-143001.11**).

The inmate shall be evaluated for possible progressive movement using the following criteria and any other pertinent information:

- a. The original reason for placement in Level VI.
- b. Inmate discipline history.
- c. Multiple Level V or VI placements.
- d. Security Threat Group activity.
- e. Prior escapes.
- f. Time to parole eligibility date/mandatory release date.
- g. Age of inmate.
- h. The inmate's history of and propensity for institutional violence.
- i. Behavior while in Level VI.
- j. Projected behavior at a less secure facility based on past history.
- k. Staff interaction.
- l. Confidential information.
- m. Consideration of past criminal history.
- n. Step 3 status for a minimum of three consecutive months, with clear conduct

5. The Unit Management Team will review the case with regard to established guidelines, while considering the safety of the general public, staff, inmates and the security of the Corrections Department.
  - a. If the recommendation of the Unit Management Team is to release an inmate but the inmate has an association with a Security Threat Group or disruptive group, the Team shall order an evaluation by the Security Threat Intelligence Unit Officer as set out in *CD-131502*. This evaluation shall be completed to determine the inmate's degree of association and current participation. If the evaluation indicates that the inmate's gang affiliation or activity presents an on-going threat to the security of the institution, release from VI will be denied and the inmate will be retained in Level VI.
  - b. Inmates who are approved for release from Level VI may be referred to Level III, IV, or V by the UMT through the Level V/VI Classification Committee Review process. Specific provisions for release to Level V are detailed in Paragraph S, below.
  - c. An inmate who has been placed in level VI based on a need for protection may be referred to general population if the inmate's protection needs no longer apply. However, a Level VI protective custody inmate shall not be referred to Level V.
  - d. Mental health staff will be part of the Unit Management Team that makes the classification decisions regarding placement of inmates released from VI, and mental health staff can provide any input at that time.

**S. Level VI Inmates, Procedures for Reclassification to a Lower Level:**

1. A Level VI inmate who has successfully completed Steps 1, 2 and 3 of Level VI may be considered for placement in Level V. The inmate must have completed the minimum amount of time at Steps 1, 2 and 3 in Level VI.
2. The Unit Management Team can refer such an inmate from Level VI to Level V through the Level V/VI Classification Committee Review process. Any such recommendation by the UMT must be reviewed by the facility Warden, and the UMT's recommendation and the subsequent recommendation by the Warden will be forwarded for final decision by a Deputy Director of the Adult Prisons Division.
3. The Classification Officer will ensure that a copy of the Level VI release packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
4. In the absence of the Warden, the designated Acting Warden may review and take action on the release from Level VI and will sign the action as Acting Warden.

5. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Warden's Office and to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (CD-143001.12)..
6. The Central Office Classification Bureau will ensure that a tracking system is maintained that indicates the date that the packet has been received by the Bureau; the date that the referral was approved or denied as well as the date that the packet was returned to the Unit Manager using the **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (CD-143001.13).
7. The Classification Committee action will be entered/updated into the CMIS.
8. The decision of a Deputy Director of Adult Prisons must be entered into the CMIS.
9. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP. However, for any inmate who has been referred by the Unit Management Team for release from Level VI to Level V, the Unit Manager will ensure that the classification officer does not enter a closing date on the CMIS MAP for Level VI step 3 unless this release has been approved by a Deputy Director of Adult Prisons. The closing date on the CMIS MAP should be entered at the time that the inmate is transferred from Level VI to Level V.
10. If a Deputy Director of Adult Prisons approves the inmate, the inmate will be reclassified from Level VI to Level V and will be placed in Level V Step 3 for a period not to exceed two weeks, for the purpose of evaluation and housing assignment. Upon completion of the evaluation period, the inmate will be placed in Step 4. The amount of time spent in Step 3 will be counted toward the amount of time required for Step 4. Such an inmate will continue with cognitive education from where he left off upon transfer from Level VI and he will not have to restart. Such an inmate may later be regressed to a lower Step based upon inappropriate behavior or may be recommended for return to Level VI. **UMT Recommendations for Release from Level VI to General Population**
11. If the Unit Management Team recommends release to general population, the **Unit Management Team Review for Release from Level V or VI or Consideration for Level V Progression to Step 4** Form (CD-143001.8), will be presented to the Warden for evaluation and review to include all information indicated on the recommendation for release from Level VI. The UMT will refer the inmate for release using the Level V/VI Classification Committee Review process.

- a. In the absence of the Warden, the designated Acting Warden may review and take action on the release from Level VI and will sign the action as Acting Warden.
  - b. The Classification Officer will ensure that a copy of the Level VI release packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
12. After review by the Warden, the UMT's recommendation and the Warden's recommendation will be forwarded for final decision by a Deputy Director of the Adult Prisons Division. If the inmate being evaluated has a disruptive group or STG history, information regarding current and past involvement will be forwarded to the Central Office Classification Bureau. The Classification Bureau will forward all available information to a Deputy Director of Adult Prisons.
  13. A Deputy Director of Adult Prisons or STIU Administrator shall conduct a personal interview with inmates who have a disruptive group or STG history and who are recommended for progressive movement into a general population setting. This interview shall include an evaluation of all available material regarding the progression of referred inmates.
  14. A Deputy Director of Adult Prisons will make the final decision to retain or release an inmate from Level VI. A Level VI inmate who is released may be placed as follows:
    - a. Place at Level IV or Level III.
    - b. Such inmates will not be placed at Level I or Level II immediately upon release from Level VI.
  15. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Warden's Office and to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (*CD-143001.12*).
  16. The Central Office Classification Bureau will ensure that a tracking system is maintained that indicates the date that the packet has been received by the Bureau; the date that the referral was approved or denied as well as the date that the packet was returned to the Unit Manager using the **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (*CD-143001.13*).
  17. The Classification Committee action will be entered/updated into the CMIS.
  18. The decision of a Deputy Director of Adult Prisons must be entered into the CMIS.



19. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP. However, for any inmate who has been referred by the Unit Management Team for release from Level VI to another Level, the Unit Manager will ensure that the classification officer does not enter a closing date on the CMIS MAP for Level VI step 3 unless this release has been approved by a Deputy Director of Adult Prisons. The closing date on the CMIS MAP should be entered at the time that the inmate is transferred from the Level VI facility.
20. An inmate who is retained in Level VI based on denial of release by a Deputy Director of Adult Prisons will be advised of the decision and given the opportunity to appeal; such appeal to be reviewed and acted upon by the Director of Adult Prisons.
21. The Unit Management Team will schedule the inmate for a Special Level VI Hearing to take place within ten working days following the denial. The inmate will be afforded at least a 48 hour written notice of hearing (Form CD 143001.3), which will inform the inmate that he will be given notification of right to appeal. The inmate may waive the notice in writing.
22. If the denial is based in whole or in part on new information, the new information must be included in the notice of hearing and in the Level V/VI Hearing Decision (Form CD-143001.4).
22. At the Special Level V/VI hearing, the Unit Manager or individual chairing the hearing will read the appeal language to the inmate verbatim. The inmate will be given an appeal form, **Appeal of Level V or Level VI Placement or Retention Decision** Form (*CD-143001.7*).
23. The appeals procedure will be handled in accordance with paragraph L above.
24. Following the Level VI Special Review, the inmate will be reviewed again for release at the next required review unless the UMT determines that the inmate should be reviewed by the UMT at an earlier date.
25. The next required review is either the inmate's Annual Review or a date that is specified by a Deputy Director of Adult Prisons in the denial of release.

**T. Annual Reviews:**

For inmates who have been housed in Level VI for one year from the date of the approval for Level VI by the Classification Bureau Chief, Deputy Classification Bureau Chief or Deputy Director of Adult Prisons, the Unit Management Team will conduct a review 12 months following placement, and annually thereafter.

1. The inmate will receive notice of the scheduled annual review using the **Notice for Level V or Level VI Hearing** Form (*CD-143001.3*).
2. The Unit Management Team will document its decision using the **Level V/VI Hearing Decision** Form (*CD-143001.4*). If the UMT recommends the inmate for release from Level VI, such recommendation will be scheduled for Level V/VI Classification Committee Review and handled in accordance with Section R. above.
3. If the Unit Management Team conducting the annual review determines that the inmate should be retained in Level VI, the UMT must document the specific reasons for retention on the Level V/VI Hearing Decision (Form CD-143001.4).
4. The inmate may appeal such decision to retain in level VI using the **Appeal of Level V/VI Placement or Retention Decision** Form (*CD-143001.7*). The appeals procedure will be handled in accordance with section L. of this procedure.

**U. Mandatory Annual Reclassification Custody Reviews**

1. In accordance with policy *CD-080102*, Institutional Classification, the classification officer is responsible for conducting Mandatory Annual Reclassification Custody Reviews for each inmate assigned to Level VI.
2. An inmate may initiate a review of his/her progress and program status by submitting a written request to his assigned Classification Officer.

**V. Process for Release from Level VI Inmate Protection:**

1. Release from Voluntary Placement in Inmate Protection:
  - a. In order for an inmate to be released from Level VI voluntary Inmate Protection, the inmate must submit reliable documentation or provide a written, signed reasonable explanation indicating the ability to function in any general population in New Mexico.
  - b. The Unit Management Team will conduct a Level V/VI Classification Committee Review and will review the inmate's request for release to general population. The Unit Management Team shall consider both the inmate's request as well as the initial reason(s) for the inmate's placement in Inmate Protection.
  - c. Upon review of file documentation as well as the inmate's request, the Unit Management Team shall determine whether the inmate can be released to:

- 1) a general population where space is available;
  - 2) an Inmate Protection population in New Mexico where space is available; or,
  - 3) refer the inmate for out of state placement.
- d. If the Unit Management Team recommends that the inmate can be released to a general population or Inmate Protection Unit in New Mexico, the inmate shall be referred through the Level V/VI Classification Committee Review process to a Deputy Director of Adult Prisons for review and final approval.
  - e. If the Unit Management Team recommends that the inmate should not be released to a general population or Inmate Protection Unit because he or she would be in jeopardy of serious bodily harm, the inmate will be placed in involuntary Inmate Protection. In this case a new placement form will be generated, a new initial hearing will be held, and a new Level VI Referral Packet shall be submitted to the Classification Bureau Chief, Deputy Classification Bureau Chief or a Deputy Director of Adult Prisons.
  - f. Level V/VI Release Packets will be submitted to the Warden's office and to Central Office on all Referrals for release of Level VI Voluntary Protection Inmates.
  - g. In the absence of the Warden, the designated Acting Warden may review and take action on the release from Level VI and will sign the action as Acting Warden.
  - h. The Classification Officer will ensure that a copy of the Level VI release packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
  - i. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that that the packet has been forwarded to the Warden's Office and to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (*CD-143001.12*).
  - j. The Central Office Classification Bureau will ensure that a tracking system is maintained that indicates the date that that the packet has been received by the Bureau; the date that the referral was approved or denied as well as the date that the packet was returned to the Unit Manager using the **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (*CD-143001.13*).
  - k. The Classification Committee action will be entered/updated into the CMIS.
  - l. The decision of a Deputy Director of Adult Prisons must be entered into the CMIS.

- m. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP. However, for any inmate who has been referred by the Unit Management Team for release from Level VI to another Level, the Unit Manager will ensure that the classification officer does not enter a closing date on the CMIS MAP for Level VI step 5 unless this release has been approved by a Deputy Director of Adult Prisons. The closing date on the CMIS MAP should be entered at the time that the inmate is transferred from the Level VI facility.
2. Release from Involuntary Inmate Protection Placement
    - a. The Unit Management Team shall conduct a Level V/VI Classification Committee Review and shall review the documentation on file regarding the initial reason(s) for the inmate's placement in involuntary Inmate Protection.
    - b. Upon an interview with the inmate as well as a review of file documentation, the Unit Management Team will determine whether the inmate can be released to any general population or Inmate Protection Unit in New Mexico.
    - c. If the Unit Management Team recommends release to a general population or Inmate Protection Unit in New Mexico, the inmate shall be referred through the Level V/VI Classification Committee review process to a Deputy Director of Adult Prisons. If the Unit Management Team recommends retention in Inmate Protection the inmate will remain in Inmate Protection and will continue to have his or her placement reviewed during 30-day Status Reviews. The inmate will have an opportunity to appear before the Unit Management Team during the annual review.
    - d. Inmates who are in Inmate Protection and who have been recommended for placement in general population shall be personally interviewed by a Deputy Director of Adult Prisons or designee.
    - e. For inmates recommended for release by the Unit Management Team through the Level V/VI Classification Committee Review process, a Deputy Director of Adult Prisons will make the final decision to release the inmate from Inmate Protection. Inmates released from Involuntary or Voluntary Inmate Protection may be placed at Security Level I, II, III, or IV, pursuant to Policy CD-080100, Institutional Classification, Inmate Risk Assessment, and Central Office Classification.
    - f. Level V/VI Release Packets will be submitted to the Warden's office and to Central Office on all Referrals for release of Level VI Involuntary Protection Inmates.
    - g. In the absence of the Warden, the designated Acting Warden may review and take action on the release from Level VI and will sign the action as Acting Warden.

- h. The Classification Officer will ensure that a copy of the Level VI release packet is placed in the inmate file prior to submitting the original packet to the Warden's office for review.
- i. The Unit Manager will ensure that a tracking system is maintained that indicates the dates that that the packet has been forwarded to the Warden's Office and to Central Office as well as the date that the packet was returned to the Unit Manager using the **Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log** Form (*CD-143001.12*).
- j. The Central Office Classification Bureau will ensure that a tracking system is maintained that indicates the date that that the packet has been received by the Bureau; the date that the referral was approved or denied as well as the date that the packet was returned to the Unit Manager using the **Central Office Classification Bureau Level V/VI Release Packet Tracking Log** Form (*CD-143001.13*).
- k. The Classification Committee action will be entered/updated into the CMIS.
- l. The decision of a Deputy Director of Adult Prisons must be entered into the CMIS.
- m. The Unit Manager will ensure that the classification officer has appropriately entered all inmate status changes into the CMIS MAP. However, for any inmate who has been referred by the Unit Management Team for release from Level VI to another Level, the Unit Manager will ensure that the classification officer does not enter a closing date on the CMIS MAP for Level VI step 5 unless this release has been approved by a Deputy Director of Adult Prisons. The closing date on the CMIS MAP should be entered at the time that the inmate is transferred from the Level VI facility.

**W. Interstate Corrections Compact Transfers:**

1. Criteria:

Inmates who meet the following criteria and have consequently been segregated from general population will be referred to a Deputy Director of Adult Prisons for Interstate Corrections Compact Transfer. Inmates who are approved by a Deputy Director of Adult Prisons will be prioritized as follows:

- a. Former New Mexico Law Enforcement Officers; Correctional Officers; New Mexico Public Officials in high profile positions and Court recommended inmates for transfer out-of-state (Classification Officer will obtain all relevant information from the Courts or District Attorney's Office relevant to the recommendation.)

- b. Inmates who require protection because they are unable to function in any general population in New Mexico including the LCCF Protective Custody Special Management Unit.
- c. Inmates who have involvement in or have directed others to engage in organized unauthorized activity, either inside or outside of the institution.
- d. Only inmates with more than three years until projected release will be considered for interstate transfer.

2. Final Interstate Compact Transfer Review:

- a. Once the **Interstate Compact Transfer Review Memorandum** has been obtained from the facility Health Services Administrator, the Unit Management Team shall conduct a Final Interstate Compact Transfer Review hearing with the inmate.
- b. The Unit Management Team shall document whether the inmate is recommended to the Deputy Director of Adult Prisons for interstate compact transfer. For any inmate who is recommended, a packet of information as described below will be completed and forwarded to the Warden for review.
- c. If the Warden approves the recommendation, the packet will be forwarded to Central Office Classification Bureau for review.
- d. The Central Office Classification Bureau as well as the Central Office Security Threat Intelligence Unit will review the packet and make a recommendation to the Deputy Director of Adult Prisons regarding the inmate's need for interstate transfer.
- e. Interstate Corrections Compact Referral Packets shall consist of the following information:
  - **Interstate Compact Referral Checklist** Form (*CD-143001.14*)
  - Institutional Interstate Compact Referral Summary: A narrative summary signed by the Warden, of an inmate's criminal and institutional background, including specific reasons that the inmate is unable to function in general population as well as the specific reasons for an Out-of-State transfer request.
  - Good Time Figuring Sheet.
  - Copy of the Classification Committee's recommendation indicating the reasons for recommending interstate transfer.

- Judgment and Sentence(s). Pre-Sentence Report(s) or police report if PSR is not available
  - Admission Summary.
  - Disciplinary Report Log indicating all misconduct during current incarceration and copies of major disciplinary reports during the past five years (reporting employee's statements and sanctions).
  - Current FBI Rap Sheet.
  - Enemy Alert Form.
  - Escape Flyer
  - Level V, Level VI Referral Memorandum.
  - Medical/Mental Health clearances for interstate transfer.
- f. Unit Management Team reviews for interstate transfer shall be entered into the CMIS as Level VI Review; OOS Transfer; OOS Referral.
- g. The Interstate Corrections Compact Referral Packet must be completed by the Classification staff at the facility where the Interstate Transfer referral was made.
- h. At the Special Controls Unit, the Unit Manager will ensure that a tracking system is maintained that indicates the dates that the packet has been forwarded to the Warden's Office and to Central Office and the dates that the decisions on the referrals for interstate transfer are received using the Level V/VI Release Packet/Progression to Step 4/Interstate Compact Packet Tracking Log Form (CD-143001.12).
- i. The Central Office Interstate Compact Administrator shall forward a copy of the decision by a Deputy Director of Adult Prisons to the Unit Manager.
- j. Decisions by a Deputy Director of Adult Prisons regarding interstate transfer referrals shall be entered into the CMIS.
- k. The Central Office Interstate Compact Administrator will ensure that a tracking system is maintained indicating the dates that packets are received; the action of a Deputy Director of Adult Prisons and the date returned to the facility.
- l. The Central Office Interstate Compact Administrator will ensure that a report is submitted to the Classification Bureau Chief on a monthly basis indicating the status of inmates who have been referred for interstate transfer.



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Interim Level VI Housing/PTH Table of Services**

	<b>AREA</b>	<b>Level VI Interim Placements</b>
<b>STATE-ISSUED PROPERTY</b>	State Issue Clothing	3-shirts and trousers (yellow, if available), 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.
	Linens	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels
	State Issued Hygiene Items	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper
	State Issued Hygiene Items only if inmate is indigent.	1 shampoo, 1 deodorant
	Foot Locker	1-Footlocker (not required if cell has accommodation for belongings)
<b>PERSONAL PROPERTY</b>	Personal Clothing	1-sweat pants, 1- sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)
	Personal hygiene Items from Canteen	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant
	Cassette Player/Tapes	Yes-1 Cassette Player w/adapter and 6-Cassette Tapes
	Watch	1-watch
	Photos	3-photos only
	Caps/Hats	<b>None</b>
	Cigarettes, Lighters/ Matches	<b>None</b>
	Shower Shoes	1-pair
	Tennis Shoes	1-pair
	Drinking Cup	1-cup
	Sunglasses	None, unless prescribed and provided by medical
	Prescription Glasses Only	1-only
	Correspondence	3-letters
	Wedding Ring	1-only
<b>HYGIENE</b>	Razors Controlled Issuance	Yes
	Showers	5x per week
	Barber Services	As Scheduled
<b>CANTEEN</b>	Canteen	\$20.00/week total for all items  Maximum of 10 food items per week.



**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Interim Level VI Housing/PTH Table of Services**

	<b>AREA</b>	<b>Level VI Interim Placements</b>
<b>RELIGIOUS ITEMS</b>	Religious Items	1 item to be worn around the neck (necklace or medicine bag) 1 small religious item (e.g., rosary, feather, etc.) 1 religious book (e.g., Bible, Koran, etc.)
	<b>RECREATION</b> Recreation (may wear gray sweats)	5x per week, outdoors, weather permitting
<b>VISITING</b> <b>TELEPHONE</b>	Visiting	4 visits per month; maximum of 2 ½ hours per visit. Schedule to be determined by Warden [Visits will be non-contact if facility has accommodations]
	Telephone	4 fifteen minute telephone calls per month
<b>TV</b>	Television	1 12" or 13" set for program delivery and recreational interests (allowed but not provided)
<b>PROGRAMS</b>	Education	Special education for eligible inmates ILA Mandated After 30 days in Status. For eligible inmates enrolled in education, visit by educator two times a week
	Group Programs	<b>None</b>
	Work	<b>None</b>
	Religious Access	<ul style="list-style-type: none"> <li>• Volunteer religious advisor approved by Warden.</li> <li>• Chaplain visits 1 X week, TV programs.</li> <li>• For Native American Inmates (see CD-143005)               <ul style="list-style-type: none"> <li>-- access to pipe and smudge stick once every 45 days (in approved/appropriate area, such as the sweat lodge area)</li> <li>-- sweat lodge one time every thirty (30) days; individual use only (no congregate access)</li> </ul> </li> </ul>
<b>LEGAL ACCESS</b>	Legal Access	Per CD-121000
	Attorney Phone Calls	Per CD-150300
	Attorney Visiting	Yes.
	Legal Materials	Current Pending legal work only
<b>LIBRARY</b> <b>CORRESPOND</b>	Personal Reading Materials	5 books and 6 magazines
	General Library	3-books and 1-magazine
	Writing Material	10 sheets writing paper, 1 security pen, and 5 envelopes
<b>MEALS</b>	Meals	Delivered to the cell.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V or Level VI Referral Memorandum (Example)**

In preparing a letter for level V or VI placements the following must be completed:

**Initial Review Of Placement Documentation**

Conduct a review of the **initial placement** form, supporting information and classification hard file.

- Is it clearly stated as to why the inmate was placed in Interim Level VI?
- Are there documents that clearly identify what the inmates did and they **clearly** support what was documented on the placement form.
- Review the documents for generalization and for words that are open for interpretation. These need to be avoided. There may be a need for clarifying memos from the staff involved to clear up any ambiguous language. Words or phrases to watch out for:
  - *Committed assaultive behavior (What specifically did he do)*
  - *Did cause injury (What were the specific injuries)*
  - *Required Medical Treatment (What was needed/done)*
  - *Possession of a weapon (describe the weapon)*
  - *Was in possession of serious contraband (what was it)*
  - *Aggressive stance or aggressive behavior (what exactly did the inmate do)*
- Ensure any concluding statements you make are supported by documented facts.
  - *Inmate was the leader of the group (how the writer made this conclusion and where he got the information must clearly be documented).*
- Ensure protection cases identify **specific** enemies and/or **need** for protection. Refer to CD 143001.
- Review the inmate file for adjustment history and determine if there are any previous behaviors that are similar or further support the need for Level V or VI placement. Unless you are placing an inmate under Placement Criteria H.1.e, only document behaviors that are similar or support the placement reason.

*i.e. for an inmate placed in Interim Level VI for trafficking drugs within the institution, you would review the file for misconduct or documented history of drug use, refusals to submit to drug tests, possession of money which is used for drug trafficking, visitors being suspended for attempting to introduce drugs. All these documents would support the inmate deals or uses drugs and support the placement. You would not want to use reports for sanitation violations, abusive words or possession of contraband (non drug related), as they really have no relation to the placement of the inmate.*
- Determine which placement criteria identified in policy is supported by the documentation.
  - It is recommended that the referral focus on only **one** of the placement criteria; stacking or checking multiple criteria **does not strengthen the placement**. It only makes it more difficult to determine why the inmate is actually being placed in Level V or VI.
  - If no placement criteria have been met then the inmate needs to be released from Interim Level VI and **/or new placement documents need to be generated**.

Once it is determined that the inmate needs to be housed in Level V or VI and needs to be transferred to an appropriate Level V or VI facility the placement letter and document packet needs to be prepared.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V or Level VI Referral Memorandum (Example)**

**Writing the Level V or VI Referral Memorandum**

*Heading*

Start by completing the basic information

To: Central Office Classification Bureau  
From: Facility Warden or Deputy Warden  
Re: Inmate's name and #  
Date: Today's Date

**Reason for placement**

Provide a detailed explanation of the reason(s) the inmate is placed in level VI.

**Quantity does not mean quality ----- More is not necessarily better.**

***Try to keep this initial information to three (3) sentences or less. Be clear, concise and to the point. (This may seem difficult at first but it can be done in most cases)***

- The reason for placement should include:
  - The date of the incident
  - The location of the incident
  - Who was involved; must be specific to the inmate you are locking up
  - What the specific behavior or information is that caused you to place the inmate in level VI
- Ensure what you write in your memorandum supported by documents
  - Each behavior you document **must** be supported by actual incident reports, misconduct reports, memos etc.
  - STG information must be supported by STIU staff and STIU file information and CMIS
  - CI information must be clearly supported by a CI memorandum
  - *Avoid generalizations, non-descriptive words, language with multiple meanings, or language open to interpretation.*

*Adjustment History That Supports Placement*

Document the related adjustment history identified earlier.

- Provide a lead in statement on how this adjustment history relates to the placement info and further supports the need for Level V or VI
  - i.e. Inmate XYZ has a documented history of engaging in behaviors that threatens the safety of staff and other inmates. Or Inmate XYZ has been found guilty of six reports that demonstrate a history of drug trafficking or use*
  - Include only the institutional history that supports the current placement reason
    - Must be supported by actual misconduct report, incident reports, or memorandums, or prior Level VI placement information. Do not rely on the PHD or Level VI placement forms. Use the underlying documents.*

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V or Level VI Referral Memorandum (Example)**

- **Do not just list all the reports the inmate received.** Only include those which support the placement  
*(An exception would be for placement criteria which in and of themselves are the inmate's disciplinary history)*

Conclusion/Policy Statement

- Make a concluding statement

*Based on the above information, inmate XYZ has clearly demonstrated a willingness to engage in violence and other behaviors that threaten the safety of both staff and other inmates.*

**Based upon the above information inmate XYZ has demonstrated a history of both trafficking and use of drugs. Trafficking and or drug use increase the likelihood of violence within the institution thereby threatening the safety of both staff and inmates.**

- Identify the specific Policy statement you are using to place the inmate in level VI.

*Pursuant to CD policy 143001 Paragraph H 1.a, inmate poses a threat to security of the institution as defined by policy. (Elaborate the reason and specific behavior)*

- Make your recommendation

**Based on this information I am recommending inmate XYZ be housed in Level VI at a Level VI facility.**

Things to Consider and Look For

- Ensure terminology is consistent with policy language.
  - *Level VI vs. Segregation (unless the placement was made prior to the implementation of this policy)*
  - *Involuntary Inmate Protection vs. Involuntary Protection*
  - *Voluntary Inmate Protection vs. protective custody, voluntary protection or PC*
  - *Validated or suspected STG vs. Known gang member*
- Do not assume the reader knows what you know. **Have you clearly documented your thoughts?**
- Do not include information that is not specific to the placement reason.
- Do not embellish or make the information appear to be something it is not.
- **Do not include STG, street gang or disruptive group information** unless actually used as a basis for placement and is clearly part of the reason for placement and incident.
- Review the documents for generalization, words that are open for interpretation.
- Have someone that knows nothing about Level V and VI placements read your memo and see if they understand it.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V or Level VI Referral Memorandum (Example)**

-- SAMPLE MEMORANDUM --

To: Classification Bureau Chief  
From: \_\_\_\_\_, Warden  
Re: Inmate John Doe NMCD# 12345  
Date: \_\_\_\_\_

*Basis for Placement*

On February 25, 2001 inmate John Dow NMCD#12345 was placed on Interim Level VI. The basis for his placement is due to his assault on a staff member at XX facility with a weapon on February 8, 2001.

On February 8, 2001, Inmate Doe NMCD# 12345 assaulted Mr. Employee, a staff member at XX facility with a weapon. Inmate Doe inflicted a small cut on Mr. Employee across the hand with a razor blade. Inmate Doe was placed in pre-hearing detention for this incident and was subsequently found guilty of a misconduct infraction for assault or battery on another person with a weapon.

*Adjustment History That Supports Placement*

Inmate Doe has a documented history of engaging in behaviors that threatens the safety of staff and other inmates.

Inmate Doe has been found in possession of sharpened instruments capable of causing death or serious injury on three other occasions, January 10, 2002; December 21, 2002; and July 22, 2002. Each time he was found guilty of a misconduct offense.

Inmate Doe also committed prior assaults on both staff and other inmates.

Assault on staff without a weapon 6/14/2000 and 9/25/2001

Assault on another inmate 3/27/2000

*Recommendation*

Based on the above information, inmate Doe has clearly demonstrated a willingness to engage in violence and other behaviors that threaten the safety of both staff and other inmates.

Pursuant to Policy 143000 inmate Doe meets placement criteria, specifically, paragraph \_\_\_\_\_. Inmate poses a threat to security of the institution as defined by policy.

Based on this information I am recommending inmate Doe be housed in Level VI at a Level VI facility.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level VI/Interim Level VI/PHD/Disciplinary Placement**

*INMATE NAME:* \_\_\_\_\_ *NMCD#:* \_\_\_\_\_

On (date) \_\_\_\_\_ at (time) \_\_\_\_\_

The placement was made:

2.a Voluntary Placement – Inmate must complete **Request for Voluntary Placement in Inmate Protection** Form CD-143001.2

Involuntary Placement – Must specify the reason for placement

- 1.a  Inmate poses a threat to the security of the institution as defined by Policy 143000.
- 1.b  Major disciplinary reports or pattern of minor disciplinary reports that threaten the security of the institution, safety of staff or inmates, or involves destruction of property.
- 1.c  Inmate is a suspect of or the subject of an investigation for a serious criminal offense.
- 1.d  STG involvement or organized activity as defined by this policy. Must meet one criteria relating to membership or association and one criteria relating to behavior
- 1.e  Repeated behavior of unwillingness to comply with rules, unpredictable or disruptive behavior, unwillingness to participate in programs. [NOTE: must be supported by misconduct reports, incident reports, staff observation logs]
- 2.b  Involuntary Inmate Protection: inmate is in danger of bodily harm or violent acts from other inmates if he or she remains in general population.

Pre-Hearing Detention: inmate has received a misconduct report and poses an escape risk or a threat to the security of the institution, public, other inmate, staff or others (CD-090101, ¶E.2)

Disciplinary Segregation: Inmate has been found guilty of misconduct report # \_\_\_\_\_ and has received \_\_\_\_\_ days of disciplinary segregation time. Begin date \_\_\_\_\_; end date \_\_\_\_\_.

Summary of facts that justify placement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Security Supervisor Lieutenant or above (receipt acknowledged)		Date
Inmate Signature	Time	Date
Served by (Staff Member)	Time	Date

**72 HOUR REVIEW**    Discharge from Level VI     Remain in Level VI     Release from PHD     Continue PHD

Specific Justification for Action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Unit Manager/Chief of Security or above \_\_\_\_\_ Time \_\_\_\_\_ Date \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Request for Voluntary Placement in Inmate Protection**

I, \_\_\_\_\_ (name), NMCD#: \_\_\_\_\_ at  
\_\_\_\_\_ (institution), request to be housed in Inmate Protection for the following reason(s):

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Inmates considered to be enemies are:

	Name	Number	Location
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____

\_\_\_\_\_  
Inmate Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Name and Title (Print)

\_\_\_\_\_  
Staff Signature \_\_\_\_\_  
Date

- Distribution: Warden  
Deputy Warden  
Chief of Security  
Classification Director  
Other \_\_\_\_\_  
Other \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Notice for Level V or Level VI Hearing**

<b>NAME</b>	<b>NMCD#</b>	<b>HOUSING UNIT</b>
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**REASON FOR HEARING:**    **Interim**                       **Initial**                       **Annual**                       **Special**

**SUMMARY:** (Basis for Lockdown; factual report including who, what, when, where, why. Use additional sheets if necessary).

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I certify that the above statements are true and correct to the best of my knowledge

S/ \_\_\_\_\_ Date \_\_\_\_\_  
Initiating Employee

**HEARING SCHEDULE:**

Case referred for classification hearing on: \_\_\_\_\_ (date)

**SERVING EMPLOYEE:**

You are hereby served this copy on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ ,at \_\_\_\_\_ (am)(pm).

S/ \_\_\_\_\_ Date \_\_\_\_\_  
Classification Officer

**INMATE ACKNOWLEDGEMENT:**

At the hearing, I will be given notification of right to appeal  
I acknowledge receipt of a copy of the Notice for Level V or Level VI Hearing  
I hereby waive the 48 hour notice { \_\_\_\_\_ }  
(Initials)

S/ \_\_\_\_\_ Date \_\_\_\_\_  
Inmate Signature

Xc:    Inmate Classification File  
       Inmate



**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V/VI Hearing Decision**

NAME	NMCD#	HOUSING UNIT
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**REASON FOR HEARING:**    **Interim**                       **Initial**                       **Annual**                       **Special**

**Reason(s)** for initial placement in Level V / VI

\_\_\_\_\_ 2.a Voluntary Inmate Protection (Inmate must complete **Request for Voluntary Placement** Form CD-143001.1)

\_\_\_\_\_ 1.a Inmate poses a threat to the security of the institution as defined by Policy 143000.

\_\_\_\_\_ 1.b Major disciplinary reports or pattern of minor disciplinary reports that threaten the security of the institution, safety of staff or inmates, or involves destruction of property

\_\_\_\_\_ 1.c Inmate is a suspect of or the subject of an investigation for a serious criminal offense

\_\_\_\_\_ 1.d STG involvement or organized activity as defined by Policy CD-143001. Must meet one criteria relating to membership or association (CD-143001 List d.1) and one criteria relating to behavior (CD-143001 List d.2)

\_\_\_\_\_ 1.e Repeated behavior of unwillingness to comply with rules, unpredictable or disruptive behavior, and unwillingness to participate in programs. [NOTE: this must be supported by misconduct reports, incident reports, or staff observation logs.]

\_\_\_\_\_ 2.b Involuntary Inmate Protection: inmate is in danger of bodily harm or violent acts from other inmates if he/she remains in general pop

\_\_\_\_\_ Other (specify) \_\_\_\_\_

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**Summary of Evidence:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Decision:**

**INTERIM and INITIAL:** Refer to Level V / VI    No     Yes                       **ANNUAL:** Retain in VI     Refer as specified below

**Justification:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For **INITIAL** Inmate was read verbatim the appeals process and received an appeal form

\_\_\_\_\_

\_\_\_\_\_

Committee Chairperson/Unit Manager	Date
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<b>Date of Hearing:</b>	<b>Time of Hearing:</b>	<b>Location of Hearing:</b>
Members Present: _____	Members Present: _____	Members Present: _____

**Administrative Review:**

\_\_\_ AFFIRM    \_\_\_ MODIFY    \_\_\_ REVISE

**Comments:**

\_\_\_\_\_

\_\_\_\_\_

S/ \_\_\_\_\_ Date \_\_\_\_\_

Warden/Deputy Warden

I have been informed of my right to appeal and have received an appeal form.

S/ \_\_\_\_\_ Date \_\_\_\_\_

Inmate Signature (acknowledgment of receipt)

Original – Classification File    Copy – Classification Officer    Copy – Inmate

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level VI Status Review – 7 and 30 Days**

<b>NAME</b>	<b>NMCD#</b>	<b>HOUSING UNIT</b>	<b>STATUS</b>
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7 day     30 day    **LEVEL VI START DATE:** \_\_\_\_\_

**REASON(S)** for initial placement in Level VI:

- \_\_\_\_\_ Voluntary Placement.
- \_\_\_\_\_ Inmate poses a threat to the security of the institution.
- \_\_\_\_\_ Major disciplinary report/pattern of minor reports that threaten the security of the institution, safety of staff or inmates, or involves destruction of property.
- \_\_\_\_\_ Inmate is a suspect of or subject of an investigation for a serious criminal offense.
- \_\_\_\_\_ STG involvement or organized activity as defined by this policy.
- \_\_\_\_\_ Repeated behavior of unwillingness to comply with rules, unpredictable or disruptive behavior, etc.
- \_\_\_\_\_ Involuntary placement in Inmate Protection: inmate is in danger of bodily harm or violent acts from other inmates if he or she remains in general population.

**SUMMARY OF EVIDENCE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Decision:**        Continue Level VI        No \_\_\_\_\_        Yes \_\_\_\_\_

**Justification:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Unit Management Team or Authorized Group Signatures:**

\_\_\_\_\_  
\_\_\_\_\_

<b>Date of Review:</b>	<b>Date of Next Review:</b>	<b>Location of Next Review:</b>
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**Administrative Review:**        \_\_\_\_\_Approve        \_\_\_\_\_Deny

Comments:

S/ \_\_\_\_\_ Date \_\_\_\_\_

S/ \_\_\_\_\_ Date \_\_\_\_\_  
Inmate Signature (acknowledgment of receipt)

Original: Classification File  
Copy: Classification Officer (1); Inmate (1)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V or VI Referral Packet Check List**

Inmate Name: \_\_\_\_\_ NMCD#:: \_\_\_\_\_

All Level V or VI referrals need to be submitted to and approved by the Deputy Director of Adult Prisons or the Classification Bureau Chief. *For each level V or VI referral you must complete the checklist and sign the form indicating the packet is complete and copies of all documents have been placed in the inmates central classification file.*

A completed Level VI placement form \_\_\_\_\_

An incident or other report describing the circumstances or events leading up to the placement \_\_\_\_\_

Was confidential information used as basis for placement? Yes  No   
(Information received; investigation results; etc.)

If Confidential Information was used include the following documents:

1. A summary of confidential information that identifies at least four of the eight factors \_\_\_\_\_
2. The actual CI information document that contains all the information. \_\_\_\_\_

The Initial Level V or VI hearing form \_\_\_\_\_

A referral memorandum using policy format \_\_\_\_\_

- To: Central Office Classification Bureau \_\_\_\_\_
- From: Warden / Deputy Warden sending facility \_\_\_\_\_
- Inmate Name Number \_\_\_\_\_
- Basis for placement (cite specific reason for placement who, what, when, where, why) \_\_\_\_\_
- Other adjustment history cited in chronological order (most recent to past) \_\_\_\_\_
- Cite specific policy criteria for placement. \_\_\_\_\_
- STG Alert form and any supporting documentation regarding STG activity \_\_\_\_\_

A current Mental Health clearance chrono that designates either regular level V or VI or APA (a chrono that does not include regular/APA housing designation is NOT acceptable) \_\_\_\_\_

Copies of all documents are filed in the inmate's central file. (Only the Summary of CI is to be placed in the central file. Actual confidential information is to be stored in a secure location at the sending facility) \_\_\_\_\_

Note: For Level VI, if an inmate is referred for interstate transfer, the completed and signed interstate corrections compact transfer packet must be placed in the inmate's file.

I certify all required documents for this level V or VI referral packet are complete and included in this packet. Copies of this packet, with the exception of original confidential information, have been placed in the inmates central classification file.

\_\_\_\_\_  
Unit Manager/Classification Supervisor Date

**Central Office Review and Action:**

Denied: Specify action to be taken by facility \_\_\_\_\_

Approved For: \_\_\_\_\_

\_\_\_\_\_  
Deputy Director of Adult Prisons or Classification Bureau Chief Date

**FAX: to facility for placement in Classification file**

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Appeal of Level V or Level VI Placement or Retention Decision**

\_\_\_\_\_  
Inmate Name

\_\_\_\_\_  
NMCD #

**I am appealing the following (check the appropriate box):**

- Level V or VI Placement: You must file your appeal within 15 calendar days after you have been advised of your right to appeal by the Level V/VI UMT
- Level VI Annual: You must file your appeal within 15 calendar days after you have received the Committee/Unit Management decision to retain you in Level VI (7 & 30 day status reviews are not appealable)
- Level V Retention – Upon Completion of Level V: You must file your appeal after you have been retained at Level V for 30 calendar days beyond your Level V completion date

Include only information relating to the placement/retention decision. If you include information or complaints that do not have to do with your placement/retention, those issues will not receive a response. Attach any documents you believe are relevant to your appeal.

I am appealing the decision based upon the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Inmate Signature

\_\_\_\_\_  
NMCD #

\_\_\_\_\_  
Date

**SUBMIT DIRECTLY TO FACILITY DEPUTY WARDEN. COPIES MAILED TO ANY OTHER INDIVIDUAL WILL NOT REQUIRE RESPONSE.**

**Received by:** \_\_\_\_\_

Deputy Warden

\_\_\_\_\_  
Date

Mailed to Director of Adult Prisons on the following date: \_\_\_\_\_

**Received at Central Office on:** \_\_\_\_\_

**ACTION OF DIRECTOR OF ADULT PRISONS: See Attached letter response for specifics**

- Grant appeal (release inmate as specified)
- Deny appeal (inmate to be retained in current status)
- Remand to UMT for further consideration, as specified in attached letter

Mailed to Facility Classification Appeals Officer on the following date: \_\_\_\_\_

**Received by:** \_\_\_\_\_

Deputy Warden

\_\_\_\_\_  
Date

**Copy given to inmate:**

\_\_\_\_\_  
Inmate Signature (acknowledgment of receipt)

\_\_\_\_\_  
Date



**NEW MEXICO CORRECTIONS DEPARTMENT**  
**UMT Review for Release from Level V or VI**  
**Or Consideration for Level V Progression to Step 4**

INMATE NAME	NMCD#	HU	DATE

**Unit Management Team Review and Recommendation:**

<u>PURPOSE OF REVIEW</u>	<u>APPROVE</u>	<u>DENY</u>	<u>EVALUATIONS RQD</u>
<input type="checkbox"/> Level V Progression from Step 3 to Step 4	<input type="checkbox"/>	<input type="checkbox"/>	Upon completion of Step 3*
<input type="checkbox"/> Level V Release	<input type="checkbox"/>	<input type="checkbox"/>	NO
<input type="checkbox"/> Level VI – annual review	<input type="checkbox"/>	<input type="checkbox"/>	YES*
<input type="checkbox"/> Level VI – Step 3 completion	<input type="checkbox"/>	<input type="checkbox"/>	YES*
<input type="checkbox"/> Level VI Release recommendation (discretion of UMT)	<input type="checkbox"/>	<input type="checkbox"/>	YES*

\* STIU 143001.9; Classification 143001.10; Housing Unit Sergeant 143001.11

The following is the basis for the above recommendation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Unit Manager

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of UMT Member

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of UMT Member

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of UMT Member

\_\_\_\_\_  
Title

**Warden's Review and Recommendation:**

<u>PURPOSE OF REVIEW</u>	<u>APPROVE</u>	<u>DENY</u>	<u>FORWARD TO</u>
<input type="checkbox"/> Level V Progression from Step 3 to Step 4	<input type="checkbox"/>	<input type="checkbox"/>	Deputy Warden (final authority)
<input type="checkbox"/> Level V Release	<input type="checkbox"/>	<input type="checkbox"/>	Classification Bureau Chief
<input type="checkbox"/> Level VI – annual review; UMT discretionary recommendation for release; Step 3 review	<input type="checkbox"/>	<input type="checkbox"/>	Director of Adult Prisons: if <b><u>UMT</u></b> recommends release*

\*Recommendations for retention may be appealed to the Director of Adult Prisons

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Warden's Signature (Deputy Warden for Level V/Step 4 progression)

\_\_\_\_\_  
Date

**Central Office Review and Determination:**

Approve Referral

Deny Referral

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Deputy Director of Adult Prisons (Level VI Release)/Classification Bureau Chief (Level V Release)

\_\_\_\_\_  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**STIU: Step 4/Release Investigation**

\_\_\_\_\_  
Inmate Name

\_\_\_\_\_  
NMCD#

PLEASE COMPLETE THE FOLLOWING:

1. STG affiliation: \_\_\_\_\_  
(specify if validated, suspect, associate, etc.)

2. STG-related violence or activities:

Date	Incident
_____	_____
_____	_____
_____	_____
_____	_____

3. What inmates has he or she had conflicts with

NMCD#	Name
_____	_____
_____	_____
_____	_____
_____	_____

Confidential Information (Summary ONLY; do not include any information that may identify source):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above inmate is being recommended for:  Level V or VI Progression to Step 4  
 Release from Level V or VI  
 Retention in Level VI

FORM COMPLETED BY: Print Name \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**CLASSIFICATION: Step 4/Release Investigation**

\_\_\_\_\_  
Inmate Name

\_\_\_\_\_  
NMCD#

PLEASE COMPLETE THE FOLLOWING:

1. Location History:

<u>Date</u>	<u>Location</u>	<u>Date</u>	<u>Location</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Drug Reports

<u>Date</u>	<u>Basis for Report (dirty UA; possession; paraphernalia; etc.)</u>
_____	_____
_____	_____
_____	_____
_____	_____

3. Enemies

<u>NMCD#</u>	<u>Name</u>	<u>NMCD#</u>	<u>Name</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Confidential Information

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above inmate is being recommended for:

- Progression to Step 4
- Release from Level VI
- Retain in Level VI

FORM COMPLETED BY: Print Name \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**NEW MEXICO CORRECTIONS DEPARTMENT**  
**HOUSING SERGEANT: Step 4/Release Investigation**

\_\_\_\_\_  
Inmate Name

\_\_\_\_\_  
NMCD#

PLEASE COMPLETE THE FOLLOWING:

1. Behavior Log Review:

Date

Behavior

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Other Relevant Information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The above inmate is being recommended for:

Progression to Step 4

Release from Level VI

Retain in Level VI

FORM COMPLETED BY: Print Name \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





**NEW MEXICO CORRECTIONS DEPARTMENT**  
**INTERSTATE COMPACT REFERRAL CHECK LIST**

Must have the following documents

**Inmate Name:** \_\_\_\_\_ **NMCD #** \_\_\_\_\_


- \_\_\_ Institutional Interstate Compact Referral Summary
- \_\_\_ Level VI Referral Memorandum
- \_\_\_ Copy of Classification Committee's recommendation (Committee Chrono)
- \_\_\_ Updated Good Time Figuring Sheet
- \_\_\_ Admission Summary (Current Crime only)
- \_\_\_ Judgment and Sentence(s) Current Crime; Pre-Sentence Report (s) or police report
- \_\_\_ Disciplinary Report Log (Indicating all misconduct during current incarceration and copies of major disciplinary reports during the last five years (reporting employee's statements and sanctions only).
- \_\_\_ STIU Memorandum (Interstate Compact Security Threat Group Questionnaire)
- \_\_\_ Updated Medical/Mental Health clearances for interstate transfer (**No Chrono's**)
- \_\_\_ Current FBI Rap Sheet/NCIC
- \_\_\_ Updated Enemy Alert Form. (Form from CMIS)
- \_\_\_ Escape Flyer

\_\_\_\_\_  
Classification Officer Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Unit Manager Signature

Date: \_\_\_\_\_

 <p><b>CD-143002</b></p>	<p><b>NEW MEXICO CORRECTIONS DEPARTMENT</b></p>	<p><b>ISSUE DATE: 04/30/01</b>  <b>EFFECTIVE DATE: 04/30/02</b>  <b>REVIEW/REVISED: 07/27/11</b></p>
	<p><b>TITLE: Level V and VI Admission, Orientation and Conditions of Confinement</b></p>	

**AUTHORITY:**

Policy *CD-143000*

**PROCEDURES: [4-4249]**

**A. Admission:**

1. Inmates will be provided prescribed medication, clothing, state issued property and access to basic personal items, as specified in the **Level V Table of Services** Attachment (*CD-143002.A*) for Level V inmates and in the **Level VI Table of Services** Attachment (*CD-143002.B*) for Level VI inmates, for use in their cells unless there is imminent danger that the inmate, or any other inmate(s), will destroy the item, induce self-injury, or harm others. **[4-4261]**
2. The appropriate staff will properly inventory and record each new inmate's authorized property in accordance with applicable policy and practice, including disposition of property that the inmate is not allowed to retain.
3. Inmates will receive institutional services, as follows, in accordance with the **Table of Services** for their designated Level and Step.

**B. Orientation:**

1. Inmates will be provided with an explanation of the Classification Process, Conditions of Confinement, Adjustment Controls, Behavior Program Contracts and Program Services during the orientation process.
2. Classification Officers shall be responsible to determine if inmate has goals and activities activated on the OMP and schedule inmate for an iTAP or TAP committee as needed per CD-080104.
3. Program Providers shall be responsible for determining if inmate has goals and activities activated that may be continued while in Level V/VI and prepare for iTAP or TAP committee as per CD-080104.

4. Inmates will be placed in orientation for a period of seven days to provide the inmates necessary information, as follows:
  - a. Minimum period of assignment for each Step
  - b. Progressive privileges of incentive Steps
  - c. Criteria for change in incentive Step
  - d. Temporary suspension of privileges for all Steps

**C. Inmates Sentenced to Death:**

1. Inmates in this status shall be subject to involuntary placement and review as outlined in *CD-143001*.
2. Inmates in this status shall be subject to conditions of confinement as per the **Table of Services**, Step 5, with the exception of congregate activity, which must be approved by the Warden.
3. Inmates placed in this status that engage in misconduct, assaultive or disruptive behavior may warrant the use of Adjustment Controls or Step reduction pursuant to these procedures.

**D. Pending Transfer Hold (PTH):**

Inmates in this status, upon approval by the Classification Bureau Chief, shall be provided conditions of confinement as per the **Table of Services** Attachment (*CD-143001.A*).

**E. Inmate Protection:**

1. Inmates in this status shall be subject to voluntary or involuntary placement and review as outlined in *CD-143001*.
2. Inmates in this status shall be provided conditions of confinement as per the **Table of Services**, Step 5, with the exception of congregate activity, which must be approved by the Warden.
3. Inmates placed in this status that engage in misconduct, assaultive or disruptive behavior may warrant the use of Adjustment Controls or Step reduction pursuant to these procedures.

**F. Conditions of Confinement:**

The conditions of confinement listed below will assist the management of the inmate population utilizing a stratified incentive program based on increased privileges for demonstrated appropriate behavior. Regular Level V/VI inmates will be placed in orientation and then through the Steps associated with their assigned Level. APA inmates will be initially placed in Step 2 (see CD-143007) for orientation and programming and will progress through the Steps associated with their assigned Level.

A Level V or Level VI inmate at the MHTC and/or the APA will receive credit for that period of confinement, so long as he meets required conduct requirements. Consideration will be given for the affect his mental health condition may have upon his behavior.

**1. Minimum Period of Assignment:**

- a. Step One – 7 consecutive days
- b. Step Two – 90 consecutive days
- c. Step Three – 90 consecutive days
- d. Step Four – 120 consecutive days
- e. Step Five – 60 consecutive days

On a weekly basis, the Unit Manager shall review the CMIS and OMP to determine those inmates who will be scheduled for progressive movement.

**2. Progressive Privileges of Incentive Steps:**

Privileges for each Step are contained in the **Table of Services**

**G. Criteria for Change in Incentive Step:**

The Unit Management Team, during regularly scheduled Step regression/retention hearings, will include a member of the mental health staff in the decision-making process.

Inmates will be evaluated for acceptable behavior (*e.g.*, proper interaction with staff and other inmates, an absence of misconduct reports, suitable cell conditions, etc.) relating to custody issues.

Completion of the entire cognitive education program or portions thereof will not be a prerequisite for step progression, retention, or Level completion. Failure to submit what is considered to be the correct or appropriate answer to questions in an individual lesson will not be used for step retention or step regression, or for level retention or regression.

An inmate who refuses to participate in his/her cognitive education program assignment may receive a disciplinary report for failure to program and may be regressed due to unacceptable behavior.

Any significant information that is provided by an inmate to the Unit Management Team or other staff shall be documented and placed in Section V of the inmate's file.

This process applies to Level V/VI inmates assigned to Regular Housing or to the APA, other than the fact that APA inmates may not be assigned to Step 1 under any circumstances.

1. Step Increase Process:

- a. For progression from Step 1 to Step 2, the Unit Management Team will review the inmate's adjustment two days prior to the scheduled progression. For all other Step progressions, the Unit Management Team will review the inmate's adjustment five (5) days prior to a scheduled Step increase.
  - 1) The Team will report an inmate's documented compliance with behavior standards and make a recommendation as to progression through all Steps using the **Step Progression Review** Form (*CD-143002.1*).
  - 2) The document will be forwarded to the Unit Manager for a decision regarding progression.
  - 3) Recommendations for progression to Step 4 or to Step 5 will be submitted to the facility Deputy Warden for approval.
- b. The inmate cannot appeal decisions for progressive movement through the Steps.
- c. All reviews will be noted in the inmate's **Step Progression Review** Form (*CD-143002.1*).
- d. Inmates who are reviewed by the Unit Management Team for progression to Step 2 or Step 3 must have demonstrated acceptable behavior. The Unit Management Team will complete the **Step Progression Review** Form (*CD-143002.1*) and submit it to the Unit Manager for approval.
- e. Level V inmates who are reviewed by the Unit Management Team for progression to Step 4 or Step 5 will be handled in accordance with Procedure 143001 Paragraph M, and must not have been convicted of any major misconduct violations or minor misconduct violations in the past three months.



- f. Inmates who are denied progressive consideration during any segment of the evaluation process may be re-evaluated by the Unit Management Team at any subsequent scheduled review.
- g. Assigned Classification Officers will conduct reviews of the inmate's **Individual Inmate Behavior Log** Form (*CD-143002.2*) at a minimum of once per week in preparation for Unit Management Team meetings.
- h. Inmates approved by the Unit Management Team for progression to Steps 4 and 5 will be required to complete a **Level V Step 4/5 Program Participation Acknowledgement** Form (*CD-143002.3*).
- i. All Level VI inmates may be progressed to steps 4 and 5. However, any inmate whose basis for Level VI placement is not for protection or death row must maintain one year of clear conduct in order to be eligible for progression to steps 4 and 5.
- j. The Unit Manager will ensure that the classification officer has appropriately entered all inmate step progressions into the CMIS MAP and the OMP as per CD-080104.

2. Step Reduction Process:

The Step to which an inmate has been assigned may be reduced based on the following:

- a. The Unit Management Team will submit a recommendation for Step reduction to the Unit Manager using the **Step Progression Review** Form (*CD-143002.1*). The recommendation will include an incident report(s) and/or an administrative memorandum that documents the inmate's inappropriate behavior and a copy of the behavior log entry. The recommendation is subject to review and final approval by the Deputy Warden. Any UMT recommendation for Step regression may only be implemented if reviewed and approved by the Deputy Warden.
- b. In the absence of the Deputy Warden, the designated Acting Deputy Warden may review and take action on a UMT recommendation for Step regression and will sign the action as Acting Deputy Warden.

- c. An inmate in Step 4 or Step 5 who fails to comply with the program compliance plan, or who exhibits unacceptable behavior will be reduced to Step 1 (Step 2 for APA inmates) status by the assigned UMT, Classification Officer or Shift Supervisor. The Unit Management Team will review this Step reduction within three working days; the UMT will include a member of the mental health staff in the decision-making process regarding such a recommendation for Step reduction. The UMT will forward a recommendation for assignment to a specific Step to the Deputy Warden for a final decision. The UMT recommendation for Step regression may only be implemented if reviewed and approved by the Deputy Warden.
- d. The Deputy Warden, upon review of a UMT recommendation for Step regression and upon determination of unacceptable behavior, may reassign an inmate to a Step commensurate with the type of behavior supporting the Step reduction. Inmates assigned to APA Level V/VI housing may not be assigned to Step 1 at any time; however, they may be reduced to any other Step consistent with this section and with *Policy 180500 APA Mental Health and Related Services for Level V/VI Inmates*.
- e. All non-compliant behavior will be documented on the **Individual Inmate Behavior Log** (CD-143002.2).
- f. Assigned Classification Officers will conduct reviews of an inmate's **Individual Inmate Behavior Log** at a minimum of once per week. Based on this review of the log, the assigned Classification Officer may forward a recommendation to the Unit Management Team for a Step reduction consideration.
- g. Step reduction or retention for APA assigned inmates will also be handled in accordance with *Policy 180500 APA Mental Health and Related Services for Level V/VI Inmates*.
- h. The Unit Manager will ensure that the classification officer has appropriately entered all inmate step regressions into the CMIS MAP and the OMP as per CD-080104.

#### **H. Individual Inmate Behavior Log:**

1. The Unit Manager is primarily responsible conducting reviews of all **Individual Inmate Behavior Logs** (CD-143002.2) and for ensuring that staff members have properly completed the logs. During evenings, weekends and holidays, it will be the responsibility of the Shift Supervisor to ensure that the logs have been completed. The Classification Officers, Housing Unit Sergeants, Unit Managers and Shift Supervisors shall indicate their review of the logs by noting their initials on each inmate's log.

2. If discrepancies are found in the behavior logs, the Unit Manager is responsible for ensuring that appropriate staff takes the necessary corrective action.
3. Any discrepancies found by the Shift Supervisor will be reported to the Unit Manager. If possible, the Shift Supervisor will take immediate corrective action.

#### **I. Temporary Suspension of Privileges for all Steps:**

Inmates may temporarily lose a privilege when their behavior does not meet the standards for that Step. A **Temporary Suspension of Privileges for Step System Inmates** form (*CD-143002.4*) must be completed and submitted to the Unit Management Team, which report will include the date, time, and specific behavior of the inmate that warrants suspension of privileges. The completed report will be forwarded to the Unit Manager. This behavior management tool is separate from the Inmate Discipline Code of Conduct and separate from the requirement to report serious incidents. Inmates assigned to APA Level V/VI housing will be handled in accordance with Policy *CD-180500* APA Mental Health and Related Services for Level V/VI Inmates.

Inmates will not be sanctioned through the inmate discipline process, the behavior log, or the UMT for merely engaging in normal conversation with other inmates. Normal conversation is considered to be conversation that occurs in a normal tone and level of voice between two or more inmates, and does not contain abusive, derogatory, or inflammatory language directed at staff or other inmates and which does not disrupt the orderly operation of the facility.

1. Examples of inappropriate behavior include, but are not limited to:
  - Refusal to return any portion of their utensils or food tray or any other item to staff.
  - Failure to clean the cell (per posted facility Operational Rules) or maintain it in an orderly fashion.
  - Poor personal hygiene.
  - Pounding on the cell exercise area door, shower wall.
  - Failure to comply with procedures concerning exiting to and from the shower, telephone, and exercise areas.
  - Failure to turn in bedding and clothes for regular washing.
  - Exhibiting disrespectful actions toward staff, other inmates, or visitors.
  - Hindering the cell inspection process.
  - Excessive yelling or abusive words or gestures.
  - Failure to comply with/interfering with count procedures.
  - For APA inmates, any violation of the inmate's behavioral program contract.

2. Temporary suspension of privileges, and the duration of such suspension, will be documented by the Unit Management Team on the **Temporary Suspension of Privileges for Step System Inmates** Form (*CD-143002.4*). Temporary suspension of privileges may include one or more of the following, within the prescribed time frames:

<u>Privilege</u>	<u>Time Frame</u>
a) Television	Three days at a time, per incident
b) Canteen (limited to \$5.00 and limited to specific items)	Seven days per incident
c) Telephone	Five days per incident
d) Library	Seven days per incident
e) Recreation Program	Two days of recreation during the week of the incident
f) Visits	One visit (video or non-contact as per the Step of the affected inmate)



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT  
LEVEL V TABLE OF SERVICES**

	AREA	LEVEL V STEP 1/ORIENTATION Minimum of 7 days	LEVEL V STEP 2 Minimum of 90 days	LEVEL V STEP 3 Minimum of 90 days	LEVEL V STEP 4 Minimum of 120 days	LEVEL V STEP 5 Minimum of 60 days	ADJUSTMENT CONTROLS	
<b>STATE-ISSUED PROPERTY</b>	State Issue Clothing	3- Yellow shirts and trousers, 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.	3- Yellow shirts and trousers, 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.	3- Yellow shirts and trousers, 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.	3- Yellow shirts and trousers, 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.	3- Yellow shirts and trousers, 7-Socks, 7-undershorts, 1- Pair Shoes, and 1-Laundry bag.	Undergarment, jumpsuit, socks.	
	Linens	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, 1 mattress, 2 towels	Mattress, blanket, pillow, and sheets.	
	State Issued Hygiene Items	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper	<b>None.</b> Inmate will be able to brush teeth daily.
		Issued only if inmate is indigent: 1 shampoo, 1 deodorant						
	Foot Locker (or other accommodation for property)	1-Footlocker	1-Footlocker	1-Footlocker	1-Footlocker	1-Footlocker	1-Footlocker	<b>None</b>
<b>PERSONAL PROPERTY</b>	Personal Clothing	1-sweat pants 1, sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)	1-sweat pants 1, sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)	1-sweat pants 1, sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)	1-sweat pants 1, sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)	1-sweat pants 1, sweat shirt, 3 - tee shirts, and 1-gym shorts (must be gray no emblems)	<b>None</b>	
	Personal hygiene Items from Canteen (maximum 2 of any one item)	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, and 1 deodorant	<b>*** None</b>
	Cassette Player/Tapes	<b>None</b>	Yes-1 Cassette Player with adapter and a monthly exchange, 6-Cassette Tapes	Yes-1 Cassette Player with adapter and a monthly exchange ,6-Cassette Tapes	Yes-1 Cassette Player with adapter and a monthly exchange, 10-Cassette Tapes	Yes-1 Cassette Player with adapter and a monthly exchange , 10-Cassette Tapes	<b>None</b>	
	Watch	1-watch	1-watch	1-watch	1-watch	1-watch	<b>None</b>	
	Photos	7 photos only	10-photos only	12-photos only	16-photos only	20-photos only	<b>None</b>	



**NEW MEXICO CORRECTIONS DEPARTMENT  
LEVEL V TABLE OF SERVICES**

	AREA	LEVEL V STEP 1/ORIENTATION Minimum of 7 days	LEVEL V STEP 2 Minimum of 90 days	LEVEL V STEP 3 Minimum of 90 days	LEVEL V STEP 4 Minimum of 120 days	LEVEL V STEP 5 Minimum of 60 days	ADJUSTMENT CONTROLS
<b>CANTEEN</b>	Canteen	<b>hygiene only</b>	\$20.00/week total for all items Any from List A and B; maximum of 11 food items per week.	\$25.00/week total for all items Any from List A and B; maximum of 15 food items per week.	\$30.00/week total for all items  Any from List A and B; maximum of 20 food items per week.	\$35.00/week total for all items  Any from List A and B; maximum of 25 food items per week.	None for an initial period of 72 hours.  After 72 hours, at discretion of UMT.
<b>RELIGIOUS ITEMS</b>	Religious Items	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	<b>None</b>
<b>RECREATION/LEISURE</b>	Recreation (may wear gray sweats)	5x per week in an outdoor recreation area weather permitting	5x per week in an outdoor recreation area weather permitting	5x per week in an outdoor recreation area weather permitting	6x per week in an outdoor recreation area weather permitting	6x per week in an outdoor recreation area weather permitting	None for first 72 hours. After 72 hours, at discretion of UMT but only in the recreation cell.
	Tier Time	None	None	None	Yes. One hour a day, 5 days a week. By tier and as scheduled by facility.	Yes. One hour a day, 5 days a week. By tier and as scheduled by facility.	None
	In-House Hobby (must be approved by application; see CD 143000)	None	None	None	Yes 1 roll cellophane 12 colored pencils (less than 4" in length) 12 pastels	Yes 1 roll cellophane 12 colored pencils (less than 4" in length) 12 pastels	None
<b>VISITING/TELEPHONE</b>	Visiting	None	Two 2- hour visits per month. Schedule to be determined by facility.	Four 2 –hour visits per month. Schedule to be determined by facility.	Six 2-hour visits per month. Schedule to be determined by facility.	Two 2 –hour visits per week. Non-contact if available. Schedule to be determined by facility.	<b>None</b>
	Telephone	<b>One 5-minute phone call during orientation</b>	Six 20- minute telephone calls per month.	Eight 20- minute telephone calls per month	Nine 20- minute telephone calls per month	Ten 20- minute telephone calls per month	<b>None</b>





**NEW MEXICO CORRECTIONS DEPARTMENT  
 LEVEL V TABLE OF SERVICES**

	AREA	LEVEL V STEP 1/ORIENTATION Minimum of 7 days	LEVEL V STEP 2 Minimum of 90 days	LEVEL V STEP 3 Minimum of 90 days	LEVEL V STEP 4 Minimum of 120 days	LEVEL V STEP 5 Minimum of 60 days	ADJUSTMENT CONTROLS
<b>MEALS</b>	Meals	Delivered to the cell.	Delivered to the cell.	Delivered to the cell.	Inmate will be allowed to pick up his meal and return to his cell.	Meals will be eaten in the pod common area in groups of up to 6 inmates	Delivered to the cell.





**NEW MEXICO CORRECTIONS DEPARTMENT  
LEVEL VI TABLE OF SERVICES**

	AREA	LEVEL VI			LEVEL VI		LEVEL VI
		STEP 1/ORIENTATION Minimum of 7 days	STEP 2 Minimum of 90 days	STEP 3 Minimum of 90 days	STEP 4 Privileges Minimum of 120 days	STEP 5 Privileges Minimum of 60 days	ADJUSTMENT CONTROLS/BCP'S***
<b>CANTEEN</b>	Canteen	hygiene only	\$15.00/week total for all items  Any from List A and B; maximum of 11 food items per week.	\$20.00/week total for all items  Any from List A and B; maximum of 15 food items per week.	\$30.00/week total for all items  Any from List A and B; maximum of 20 food items per week.	\$35.00/week total for all items  Any from List A and B; maximum of 25 food items per week.	None for an initial period of 72 hours.  After 72 hours, at discretion of UMT.
<b>RELIGIOUS ITEMS</b>	Religious Items	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	1 item to be worn around the neck (necklace or medicine bag) 2 small religious item (e.g., rosary, feather, etc.) 2 religious book (e.g., Bible, Koran, etc.) 1 head covering (e.g. kufi, yarmulke, Native American headband) 1 religious cards (e.g. oracle, rune, tarot, etc.)	<b>None</b>
<b>RECREATION/LEISURE</b>	Recreation (may wear gray sweats)	5 x per week in an outdoor recreation area weather permitting	5x per week in an outdoor recreation area weather permitting	5x per week in an outdoor recreation area weather permitting	6 days per week in adjacent recreation areas. Outside recreation( No group rec for inmate protection and Death Sentence unless approved by Warden; to receive recreation per Step 3)	6 days per week in adjacent recreation areas. Outside recreation( No group rec for inmate protection and Death Sentence unless approved by Warden; to receive recreation per Step 3 )	None for first 72 hours.  After 72 hours, at discretion of UMT but only in the recreation cell.
	In-House Hobby (must be approved per application; see CD 143000)	None.	None.	None.	Yes 1 roll cellophane 12 pastels	Yes 1 roll cellophane 12 pastels	None.
<b>VISITING TELEPHONE</b>	Visiting (sched to be determined by facility)	<b>None</b>	Two 2-hour visits per month	Four 2-hour visits per month.	Six 2-hour visits per month.	Two 2-hour visits per week.	<b>None</b>
	Telephone Scheduled per policy	<b>None</b>	Two 20-minute telephone calls per month.	Four 20-minute telephone calls per month	Nine 20- minute telephone calls per month	Ten 20- minute telephone calls per month	<b>None</b>

**NEW MEXICO CORRECTIONS DEPARTMENT  
LEVEL VI TABLE OF SERVICES**

	AREA	LEVEL VI			LEVEL VI		LEVEL VI
		STEP 1/ORIENTATION Minimum of 7 days	STEP 2 Minimum of 90 days	STEP 3 Minimum of 90 days	STEP 4 Privileges Minimum of 120 days	STEP 5 Privileges Minimum of 60 days	ADJUSTMENT CONTROLS/BCP'S***
<b>TV</b>	Television	<b>During orientation</b>	1 12" or 13" set for program delivery and recreational interests	1 12" or 13" set for program delivery and recreational interests	1 12" or 13" set for program delivery and recreational interests	1 12" or 13" set for program delivery and recreational interests	<b>None</b>
<b>PROGRAMS</b>	Education	<b>None</b>	Yes	Yes	Yes	Yes	<b>None</b>
	Group Programs	<b>None</b>	<b>None</b>	<b>None</b>	APA Only(SNMCF)	APA Only(SNMCF)	<b>None</b>
	Work	<b>None</b>	<b>None</b>	<b>None</b>	Yes, at discretion of Deputy Warden	Yes, at discretion of Deputy Warden	<b>None</b>
	Religious Access	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.	<b>None</b>
	Pipe and Smudge Stick	<b>None</b>	1 x every 60 days	1 x every 45 days	1 x every 30 days	1 x every 30 days	<b>None</b>
	Sweat Lodge	<b>None</b>	<b>None</b>	1 x every 90 days for 6 hours (individual only; no congregate)	1 x every 60 days for up to 6 hours (may be congregate as approved by the Warden)	1 x every 60 days for up to 6 hours (may be congregate as approved by the Warden)	<b>None</b>
<b>LEGAL ACCESS</b>	Legal Access	Per CD-121000	Per CD-121000	Per CD-121000	Per CD-121000	Per CD-121000	As approved by warden.
	Attorney Phone Calls	Per CD-150300	Per CD-150300	Per CD-150300	Per CD-150300	Per CD-150300	As approved by warden.
	Attorney Visiting	Yes.	Yes.	Yes.	Yes.	Yes.	As approved by warden.
	Legal Materials	Current pending + cases inmate is planning to file	Current pending + cases inmate is planning to file	Current pending + cases inmate is planning to file	Current pending + cases inmate is planning to file	Current pending + cases inmate is planning to file	As approved by warden.

**NEW MEXICO CORRECTIONS DEPARTMENT  
 LEVEL VI TABLE OF SERVICES**

	AREA	LEVEL VI			LEVEL VI		LEVEL VI
		STEP 1/ORIENTATION Minimum of 7 days	STEP 2 Minimum of 90 days	STEP 3 Minimum of 90 days	STEP 4 Privileges Minimum of 120 days	STEP 5 Privileges Minimum of 60 days	ADJUSTMENT CONTROLS/BCP'S***
<b>LIBRARY CORRESPOND</b>	Personal Reading Materials	1 book.	2 books	3 books	5 books and 6 magazines	5 books and 6 magazines	None
	General Library	3-books	3-books	3-books	3-books	3-books	None
	Writing Material  replenishable up to a maximum of 10 sheets (unless misused)	10 sheets writing paper, 1 security pen, and 5 envelopes (state issue)	10 sheets writing paper, 1 security pen, and 5 envelopes( state issue) One writing tablet from canteen	10 sheets writing paper, 1 security pen, and 5 envelopes( state issue) One writing tablet from canteen	10 sheets writing paper, 1 security pen, and 5 envelopes( state issue) One writing tablet from canteen	10 sheets writing paper, 1 security pen, and 5 envelopes	None
<b>MEALS</b>	Meals	Delivered to the cell.	Delivered to the cell.	Delivered to the cell.	Delivered to Cell	Delivered to Cell	Delivered to the cell.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Step Progression Review**

NAME	NMCD#	HOUSING UNIT	STATUS
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**INMATE IS BEING REVIEWED FOR:**

- STEP 1 REVIEW**  
Decision:  Retain at Step 1     Advance to Step 2     Regress    Effective \_\_\_\_\_
- STEP 2 REVIEW**  
Decision:  Retain at Step 2     Advance to Step 3     Regress    Effective \_\_\_\_\_
- STEP 3 REVIEW [USE Form 143001.8 for Progression to Step 4 – both Level V and Level VI]**  
Decision:  Retain at Step 3     Regress    Effective \_\_\_\_\_
- STEP 4 REVIEW**  
Decision:  Retain at Step 4     Advance to Step 5     Regress    Effective \_\_\_\_\_
- STEP 5 REVIEW**  
Decision:  Release     Refer for Level V or VI     Retain (Level VI)     Regress  
**(Step regressions may only be implemented if reviewed and approved by the Deputy Warden.)**

**UMT REVIEW AND JUSTIFICATION**

Total consecutive days clear conduct: \_\_\_\_\_

Justification:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

_____	Date: _____
Unit Officer	_____
_____	Date: _____
Classification Officer	_____
_____	Date: _____
Other	_____
_____	Date: _____
<b>Mental Health staff ( for retention and regression)</b>	_____

Approve     Denied

\_\_\_\_\_  
Unit Manager

Approve     Denied

\_\_\_\_\_  
Deputy Warden (for regressions only)

**[USE Form 143001.8 for Progression to Step 4 – both Level V and Level VI]**

## NEW MEXICO CORRECTIONS DEPARTMENT

### Individual Inmate Behavior Log

**INSTRUCTIONS TO STAFF:** This form is used in determining whether or not an inmate will advance to a less restrictive step of Administrative Segregation. This log is to be completed daily and turned in weekly to the Unit Security Supervisor. ANY STAFF MEMBER MAY MAKE AN ENTRY. The types of behaviors to be evaluated include disruptive behavior **AND** exceptionally good behavior. An entry should include the specifics of his/her behavior, if a misconduct report was generated, the date, time, and the name/signature of staff member making the entry. Examples of behavior may include but are not limited to: kicking/banging on door, refusal to conform to escort procedures, being verbally disruptive in the pod, interfering with staff duties, failing to maintain cleanliness, passing contraband, performing an extra work duty, or assisting in de-escalating a potential disruption. **This form is not meant to be shared with the inmate.**

<b>NAME:</b>	<b>NMCD#:</b>	<b>HOUSING UNIT/CELL:</b>	<b>BEGIN DATE:</b>	<b>END DATE:</b>
--------------	---------------	---------------------------	--------------------	------------------

Rating instructions: Rate the inmate according to his performance in the following categories. A rating of 1 or 3 requires a notation in the COMMENTS section

**3=above expectations**  
**2=compliant with housing unit regulations**  
**1=non-compliant**

Date ___/___/___	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner												
Took Shower <input type="checkbox"/> Refused Shower <input type="checkbox"/> Not Scheduled <input type="checkbox"/>	Went to Recreation <input type="checkbox"/> Refused Recreation <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Cancelled <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason if cancelled: _____ _____	Phone <input type="checkbox"/> Visit <input type="checkbox"/> Haircut <input type="checkbox"/>	_____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
						Day Watch Rating		Evening Watch Rating												
						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1. Housekeeping</td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> <tr> <td>2. Personal Hygiene</td> <td></td> <td></td> </tr> <tr> <td>3. Cooperation with Staff</td> <td></td> <td></td> </tr> <tr> <td>4. Social Adjustment</td> <td></td> <td></td> </tr> </table>		1. Housekeeping			2. Personal Hygiene			3. Cooperation with Staff			4. Social Adjustment			
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2. Personal Hygiene																				
3. Cooperation with Staff																				
4. Social Adjustment																				
D/W Officer: _____ / _____			E/W Officer: _____ / _____																	
(print) (sign)			(print) (sign)																	

Date ___/___/___	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner												
Took Shower <input type="checkbox"/> Refused Shower <input type="checkbox"/> Not Scheduled <input type="checkbox"/>	Went to Recreation <input type="checkbox"/> Refused Recreation <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Cancelled <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason if cancelled: _____ _____	Phone <input type="checkbox"/> Visit <input type="checkbox"/> Haircut <input type="checkbox"/>	_____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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D/W Officer: _____ / _____			E/W Officer: _____ / _____																	
(print) (sign)			(print) (sign)																	

Date ___/___/___	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner												
Took Shower <input type="checkbox"/> Refused Shower <input type="checkbox"/> Not Scheduled <input type="checkbox"/>	Went to Recreation <input type="checkbox"/> Refused Recreation <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Cancelled <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason if cancelled: _____ _____	Phone <input type="checkbox"/> Visit <input type="checkbox"/> Haircut <input type="checkbox"/>	_____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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4. Social Adjustment																				
D/W Officer: _____ / _____			E/W Officer: _____ / _____																	
(print) (sign)			(print) (sign)																	

Date ___/___/___	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner												
Took Shower <input type="checkbox"/> Refused Shower <input type="checkbox"/> Not Scheduled <input type="checkbox"/>	Went to Recreation <input type="checkbox"/> Refused Recreation <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Cancelled <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason if cancelled: _____ _____	Phone <input type="checkbox"/> Visit <input type="checkbox"/> Haircut <input type="checkbox"/>	_____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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D/W Officer: _____ / _____			E/W Officer: _____ / _____																	
(print) (sign)			(print) (sign)																	

Date ___/___/___	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner												
Took Shower <input type="checkbox"/> Refused Shower <input type="checkbox"/> Not Scheduled <input type="checkbox"/>	Went to Recreation <input type="checkbox"/> Refused Recreation <input type="checkbox"/> Not Scheduled <input type="checkbox"/> Cancelled <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Reason if cancelled: _____ _____	Phone <input type="checkbox"/> Visit <input type="checkbox"/> Haircut <input type="checkbox"/>	_____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
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D/W Officer: _____ / _____			E/W Officer: _____ / _____																	
(print) (sign)			(print) (sign)																	



## NEW MEXICO CORRECTIONS DEPARTMENT Individual Inmate Behavior Log (Continued)

Date _____/_____/_____	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Took Shower <input type="checkbox"/>	Went to Recreation <input type="checkbox"/>	Reason if cancelled:	Phone <input type="checkbox"/>			Day Watch Rating		Evening Watch Rating
Refused Shower <input type="checkbox"/>	Refused Recreation <input type="checkbox"/>		Visit <input type="checkbox"/>			1. Housekeeping		
Not Scheduled <input type="checkbox"/>	Not Scheduled <input type="checkbox"/>		Haircut <input type="checkbox"/>			2. Personal Hygiene		
	Cancelled <input type="checkbox"/>				3. Cooperation with Staff			
					4. Social Adjustment			
D/W Officer: _____	/	_____	E/W Officer: _____	/	_____			
	(print)	(sign)		(print)	(sign)			

Date _____/_____/_____	Is His/Her Cell Clean?	Yes	No			Breakfast	Lunch	Dinner
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Took Shower <input type="checkbox"/>	Went to Recreation <input type="checkbox"/>	Reason if cancelled:	Phone <input type="checkbox"/>			Day Watch Rating		Evening Watch Rating
Refused Shower <input type="checkbox"/>	Refused Recreation <input type="checkbox"/>		Visit <input type="checkbox"/>			1. Housekeeping		
Not Scheduled <input type="checkbox"/>	Not Scheduled <input type="checkbox"/>		Haircut <input type="checkbox"/>			2. Personal Hygiene		
	Cancelled <input type="checkbox"/>				3. Cooperation with Staff			
					4. Social Adjustment			
D/W Officer: _____	/	_____	E/W Officer: _____	/	_____			
	(print)	(sign)		(print)	(sign)			

Inmates will not be sanctioned through the inmate discipline process, the behavior log, or the UMT for merely engaging in normal conversation with other inmates. Normal conversation is considered to be conversation that occurs in a normal tone and level of voice between two or more inmates, and does not contain abusive, derogatory, or inflammatory language directed at staff or other inmates and which does not disrupt the orderly operation of the facility.

Date/Time	COMMENTS – (Note if disciplinary report issued)	Staff Name (Print)
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
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_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____
_____ AM/PM	_____	_____

Classification Officer \_\_\_\_\_

Date \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V -- Step 4/5 Program Participation Acknowledgment**

NAME:	NMCD#	HOUSING UNIT:	DATE:
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*I acknowledge* that by signing this form, which I have read and had explained to me, I am willing to participate in Step 4/5 and abide by the conduct requirements.

*Further, I understand that:*

1. My behavior and attitude while in my assigned Step will be closely monitored. Inappropriate behavior or a poor attitude may result in a review for placement in a more restrictive Step.
2. All disciplinary reports I receive may result in a review for placement in a more restrictive Step.
3. Violations of Operational Rules or behavior that hinders the operation of the unit may result in a review for placement in a more restrictive Step.
4. Failure to progress through programming in my assigned Step may result in a review for placement in a more restrictive Step.
5. Refusal to sign this document will result in a review for placement in a more restrictive Step.
6. If my behavior warrants and I meet the criteria outlined in policy, I may be considered for placement in Level VI.

\_\_\_\_\_  
Inmate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

**Temporary Suspension of Privileges for Step System Inmates**

NAME:	NMCD#	HOUSING UNIT:	DATE:
-------	-------	---------------	-------

**CHECK ONLY THOSE AREAS WHICH APPLY.** Every item checked must have a beginning and ending date in order for this form to be valid.

**GIVE BRIEF DESCRIPTION OF INCIDENT:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_


\_\_\_\_\_  
Submitting Employee Date

1. \_\_\_\_\_ TELEVISION. Maximum of three days per incident.  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm
2. \_\_\_\_\_ CANTEEN. Limited to \$5.00 purchase, two AA privileges for a total of 7 days.  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm
3. \_\_\_\_\_ TELEPHONE. Maximum of five days per incident.  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm
4. \_\_\_\_\_ RECREATION. Two days of recreation per incident.  
     [Outdoor recreation may NOT be suspended if the inmate is assigned to a facility/living unit at which he receives outdoor recreation only one time every two weeks]  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm
5. \_\_\_\_\_ VISITS. One visit as defined per step.  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm
6. \_\_\_\_\_ LIBRARY. Maximum of 7 days per incident.  
     Begin Date: \_\_\_\_\_ Begin Time: \_\_\_\_\_ am pm  
     End Date: \_\_\_\_\_ End Time: \_\_\_\_\_ am pm

**APPROVED BY UNIT MANAGEMENT TEAM**

Name: \_\_\_\_\_ s/ \_\_\_\_\_  
Name: \_\_\_\_\_ s/ \_\_\_\_\_  
Name: \_\_\_\_\_ s/ \_\_\_\_\_

xc: Deputy Warden                      Unit Manager  
      Housing Sgt/Lt                    Classification Officer  
      Shift Supervisor                 Inmate File

 <p><b>CD-143003</b></p>	<p><b>NEW MEXICO CORRECTIONS DEPARTMENT</b></p>	<p><b>ISSUE DATE: 04/30/01</b>  <b>EFFECTIVE DATE: 04/30/02</b>  <b>REVIEW/REVISED: 07/27/11</b></p>
	<p><b>TITLE: Adjustment Controls</b></p>	

**AUTHORITY:**

Policy *CD-143000*

**PROCEDURES: [4-4249]**

**A. General Regulations:**

1. Adjustment Controls may be utilized if an inmate engages in misconduct, assaultive, disruptive or self-injurious behavior. In the case of self-injurious behavior, a Mental Health professional must make a determination that the self-injurious behavior is not related to a mental illness prior to placing the inmate in Adjustment Controls. Adjustment Controls will include placing the inmate in a control cell and implementation of specific property and privilege restrictions, as specified in Paragraph D below, for an initial period of 72 hours. The 72-hour period starts once the inmate is removed from his cell and is placed on control cell status. In addition, an inmate may be subject to separation in a cell in the intake or medical areas if such separation will assist in restoring order to the unit.
2. All inmates assigned to Level V/VI housing, regardless of their current Step, are subject to Adjustment Controls.
3. Inmates assigned to the APA may be placed in Adjustment Controls, as follows:
  - a. An APA inmate may be placed immediately in Adjustment Controls. Mental Health staff will be contacted immediately upon placement. During non-administrative hours, the on-call Mental Health provider will be contacted.
    - 1) In the event the on-call mental health provider cannot be contacted, the Facility Mental Health Administrator will be contacted.

- b. Mental Health staff will make a determination as to whether the behavior leading to placement in Adjustment Controls is or is not due to mental illness. This determination will be documented in writing.
  - 1) If the behavior is not due to mental illness, the mental health provider will authorize continued placement in Adjustment Controls.
  - 2) If the behavior is due to mental illness, the mental health provider will order that the inmate be removed from Adjustment Controls.
- c. Mental Health may specify that Adjustment Controls be administered for less than 72 hours, in which case the maximum number of hours will be documented.
- d. Adjustment Controls usually will be administered only in the APA pod. For placement in a non-APA location:
  - 1) An APA inmate may be subject to Adjustment Controls placement in a non-APA location if he continues to engage in behavior that is disruptive to the unit and interferes with scheduled activities.
  - 2) Mental Health will assess the inmate to determine if the behavior is or is not due to mental illness.
  - 3) If Mental Health determines that the behavior is not due to mental illness, the inmate may be placed in a non-APA location.
- e. Mental Health may order that an inmate be released from Adjustment Controls if Adjustment Controls are causing the inmate to decompensate and contribute to his mental illness.

**B. Incidents Leading to Placement:**

1. The Unit Manager or Shift Supervisor authorizing the use of Adjustment Controls shall complete the **Placement in Adjustment Controls Report** Form (*CD-143003.1*) at the time of placement, and forward the report to the Unit Management Team for distribution to the Deputy Warden. The **Placement in Adjustment Controls Report** Form (*CD-143003.1*) will include the specific behavior of the inmate necessitating Adjustment Controls, and the date and time of such behavior. Documentation of incidents shall be noted in the following:

- a. The **Placement in Adjustment Controls Report** Form (*CD-143003.1*); in cases that require submission of an Incident Report, the Incident Report will be submitted separately from the **Placement in Adjustment Controls Report**.
  - b. **Individual Inmate Behavior Log** Form (*CD-143002.2*) located in the inmate's assigned pod.
  - c. Shift Report and Pod Officer's Log.
2. When an inmate is involved in misconduct, disruptive, assaultive, or self-injurious behavior, if during regularly scheduled administrative hours, the Unit Management Team shall determine the need and type of Adjustment Controls to initiate to manage the inmate. The Unit Manager shall notify the Shift Supervisor who will document the action taken in writing.
  3. However, during after hours, the Shift Supervisor shall determine the need and type of Adjustment Controls and shall notify the Unit Manager.
  4. Adjustment Controls shall be implemented based on the following continuum:
    - a. Staff counseling and intervention.
    - b. Control cell placement.
    - c. Separation from other inmates.
    - d. Separation with restraints as specified in Paragraph F of this procedure (video taped).
  5. In the event of self-injurious behavior, the inmate may be placed immediately in Adjustment controls. Mental Health staff must be contacted. Mental Health staff will make a determination that the self-injurious behavior is or is not related to a mental illness. This determination will be documented in writing.
    - a. If the behavior is not related to a mental illness, the inmate will remain in Adjustment Controls.
    - b. If the behavior is related to mental illness, the case will be handled pursuant to the mental health staff member's directives.

**C. Correctional Staff Counseling and Intervention:**

1. The Area Classification Officer and/or Correctional Officers assigned to a unit shall communicate with the inmate in an attempt to resolve a problem and/or calm an inmate. If the inmate refuses to talk or continues to be disruptive, the Unit Management Team shall notify the Unit Manager and Sergeant.
2. The Housing Unit Security Supervisor (Sergeant or above) shall communicate with the inmate in an attempt to resolve the situation and calm the inmate. If they are unable to resolve the situation then the Shift Supervisor shall be notified.

**D. Placing an Inmate in a Control Cell**

1. APA inmates usually will be retained in the APA pod when placed in Adjustment Controls. Exceptions to this are outlined in ¶A.3.b, above, of this procedure.
2. The inmate will be allowed to retain only that property specified in the Table of Services. Property that is not specifically allowed by the Table of Services will be removed, inventoried, and placed in the North or South Unit property storage room.
3. Meals and drinks will be served on Styrofoam trays and cups. The Shift Supervisor shall complete and distribute a **Modified Meal Serving Memorandum** Form (CD-143003.2) to initiate Styrofoam trays for inmates placed on Adjustment Controls.
4. The Shift Supervisor or Unit Manager may consult with other staff (classification officer, teachers, mental health, medical) to resolve issues, calm the inmate, or take additional steps in the implementation of Adjustment Controls.
5. All incoming mail, magazines or newspapers will be secured in the facility Property room.
6. Only those privileges specifically authorized on the Table of Services will be allowed. Inmates will not be allowed to order or receive canteen during the initial 72-hour Adjustment Control Period.
7. Any property specifically authorized by the Table of Services may be removed if the inmate misuses or abuses the item(s) in any way.

**E. Alternative Meal Service: [4-4264]**

If appropriate, an inmate may be placed on Alternative Meal Service for using food or food service equipment in a disruptive or hazardous manner. The Shift Supervisor or Unit Manager shall prepare an **Alternative Meal Service Order Form** (*CD-142003.3*) for submission to the Warden.

1. Food loaf may be substituted for the inmate's regular meal for a period of up to seven days;
2. The highest ranking supervisor on duty (at least a Lieutenant) may place an inmate on the food loaf pending review by the Unit Management Team;
3. The Unit Management Team must review an inmate's placement on the food loaf within 24 hours of the documented behavior;
4. Inmates placed on food loaf during the weekend will be reviewed by the Unit Management Team the following Monday. The Unit Management Team may continue the food loaf for up to seven days and then the restriction will be automatically discontinued if the inmate has not exhibited any of the behavior that originally caused him to be placed on food loaf;
5. If an inmate continues to engage in any of the behaviors described above after being returned to regular meals, or at any time during the period that he is on the food loaf, he may be placed on the food loaf for an additional period not to exceed seven days;
6. The additional seven day period for food loaf is to be served after completion of the first seven days and after a 24-hour break;
7. An inmate cannot receive a food loaf in lieu of regular meals for more than seven consecutive days;
8. If an inmate is required to receive food loaf for more than seven consecutive days due to repeated offenses, the inmate will be placed on regular meals (3 full meals/no dessert) for a 24 hour break;
9. If an inmate engages in any of the behavior described above while on the 24-hour break, any remaining meals during the break may be sack meals. This 24-hour break will not be counted as a day on food loaf.



10. An inmate with special dietary needs will be provided nutritionally adequate food loaves that will meet his/her dietary requirements.
11. If an inmate refuses to eat for three consecutive days while on food loaf restriction, the Unit Management Team will notify Health Services that the inmate is on a hunger strike so that the offender may be appropriately monitored during the period of fasting. If the inmate is refusing liquids, Health Services will be contacted after 24 hours.

**F. Separation with Restraints:**

1. If the inmate continues to engage in ongoing assaultive, violent or excessively disruptive behavior such as continuous loud banging, destruction of state property, creation of hazardous living conditions (flooding, burning, etc.) or making threats to other inmates or staff, restraint devices may be used as follows:
  - a. Restraints are limited to handcuffs, belly chains, leg restraints, and hand tubes. Other restraints may be used pursuant to Policy *CD-170700, Use of Therapeutic Restraints*.
  - b. Restraints shall be appropriate to the behavior exhibited.
  - c. Restraints shall only be used when approved by the Deputy Warden or above.
  - d. The Shift Supervisor shall reassess the situation every two hours thereafter and determine whether the inmate shall continue to be restrained.
  - e. An inmate may be retained in restraints for a maximum of 48 consecutive hours. If, at the expiration of the 48 hours, the inmate is continuing to exhibit assaultive, violent or excessively disruptive behavior or is continuing to make threats to other inmates or staff, the Warden or the Deputy Warden may approve continuation in restraints in 6-hour increments, as follows:
    - 1) The approval must be in writing and signed by the Warden or Deputy Warden.
    - 2) The approval is for a maximum of 6 hours.
    - 3) The approval must document the specific behavior of the inmate that occurs at the end of the 48-hour period that necessitates continuation of restraints.

- 4) Continuations may be granted for 6 hour increments with the written approval of the Warden or Deputy Warden and documentation that the inmate, at the end of the 6-hour period, continues to actively engage in assaultive, violent or excessively disruptive behavior or continues to make threats to other inmates or staff.
  - f. The Shift Supervisor shall check the inmate when initially placed in restraints and every two hours thereafter while in restraints.
2. Video-Taping Requirements:
- a. If possible, an inmate's behavior shall be video taped before the inmate is placed in restraints.
  - b. The procedure of placing the inmate in restraints will be video taped.
  - c. The Shift Supervisor's welfare check of the inmate every two hours will be video taped.
  - d. Upon release from restraints, the inmate will be videotaped and checked by the Shift Supervisor.
3. Inmates shall be allowed to use the toilet at least once every six hours or as needed to attend to hygiene needs. This will be documented.
4. Medical staff will be contacted when security restraints are used to control disruptive behavior for more than two hours. Upon notification, medical staff will assess the inmate's medical condition.

**G. Use of Force:**

1. When force is necessary to implement Adjustment Controls, the Unit Manager or Shift Supervisor will ensure proper reporting has occurred in accordance Policy *CD-130600, Use of Force*.
2. Correctional Staff shall follow guidelines described in CD Policy *130600* and facility Use of Force policy. In the event that a disruptive and/or assaultive inmate refuses to present himself at the cell door for restraint procedure, the Shift Supervisor shall notify the Operations Director, Unit Manager, and Unit Deputy Warden.

**H. Documentation and Notification Provisions:**

1. Assigned correctional officer staff shall observe an inmate in a control cell every 30 minutes, unless more frequent observation is ordered by the Shift Supervisor, and document this fact on the **Intensive Supervision Activity Log** Form (*CD-143003.4*). [4-4257]
2. The Unit Management Team shall obtain and compile the Intensive Supervision forms so as to remain properly informed of the inmate's progress.
3. The Warden, Deputy Warden, or Duty Officer shall be notified and consulted concerning the need to implement and continue Adjustment Controls.

**I. Graduated Property Return:**

Dependent upon their positive behavior within the 72 Hour period while in Adjustment Controls, inmates may receive property back in increments, not to exceed that of Step 1. Property returned must be documented on the **Intensive Supervision Activity Log** Form (*CD-143003.4*).

**J. Legal Access**

1. Inmates in Adjustment Controls are not normally allowed legal access and attorney visits.
2. The Warden may make exceptions on a case-by-case basis. (For example, the inmate has an imminent deadline or court appearance.)

**K. Responsibility**

1. The Unit Manager or Shift Supervisor will be responsible for the following:
  - a. Determine the need for Adjustment Controls in accordance with this policy and complete the **Placement in Adjustment Controls Report** Form (*CD-143003.1*).
  - b. Check the inmate twice per shift and document on the **Intensive Supervision Log**.
  - c. Review Adjustment Controls and inform and consult with the Unit Manager and Deputy Warden as necessary.

2. The Unit Manager will be responsible for the following:
  - a. Review/monitor staff implementation and documentation of Adjustment Controls.
  - b. Review Adjustment Control logs.
  - c. Visit inmate(s) once a day during Adjustment Control period.
  - d. Make recommendation to the Shift Supervisor for possible Adjustment Controls extension if assaultive/disruptive behavior continues.
3. The Unit Management Team will be responsible for the following:
  - a. Ensure that Adjustment Controls documentation is prepared and maintained.
  - b. Visit inmate(s) once a day during Adjustment Control period. Initial and annotate the date and time of visit on the **Intensive Supervision Activity Log (CD-143003.4)**.
  - c. Make a determination and recommendation to the Unit Manager/Shift Supervisor as to what property (if any) is to be returned based on positive behavior within the 72 hour Adjustment Control period.
  - d. Once Adjustment Controls are lifted, sign the **Intensive Supervision Activity Log Form (CD-143003.4)**, gather all related documentation and attachments, and turn in to the Classification Officer. In the absence of the Unit Manager, make recommendations to the Shift Supervisor for possible Adjustment Controls extension if assaultive/disruptive behavior continues.
4. Mental Health Staff:

For APA inmates on 72-hour Adjustment Controls, Mental Health Staff will conduct a daily check during regular work days and on weekends and holidays will contact security to inquire about the inmate's behavior and Mental Health Staff will determine the need for a face-to-face meeting.

**L. Annual Review of Procedure:**

This policy and procedure shall be reviewed annually and revised as necessary.



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Placement in Adjustment Controls Report**

NAME:	NMCD#	HOUSING UNIT:	DATE:
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Adjustment Controls may be utilized if an inmate engages in misconduct, assaultive, disruptive or self-injurious behavior. In the case of self-injurious behavior, a Mental Health professional must make a determination that the self-injurious behavior is not related to a mental illness prior to placing the inmate in Adjustment Controls. Adjustment Controls will include placing the inmate in a control cell and implementation of specific property and privilege restrictions, as specified in 143003, for an initial period of 72 hours. The 72-hour period starts once the inmate is removed from his cell and is placed on control cell status. In addition, an inmate may be subject to separation in a cell in the intake or medical areas if such separation will assist in restoring order to the unit.

The inmate engaged in misconduct, disruptive behavior, or self-injurious behavior, specifically:

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Date and time of described behavior: \_\_\_\_\_

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**Correctional Staff Counseling and Intervention**

Prior to placement in Adjustment Controls, the following occurred:

- The area Classification Officer and/or Correctional Officers assigned to the unit communicated with the inmate in an attempt to resolve the situation and/or calm the inmate
- The Housing Unit Security Supervisor (Sergeant or above) communicated with the inmate in an attempt to resolve the situation and/or calm the inmate
- Notification of the Shift Supervisor

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**Shift Supervisor Authorization of Adjustment Controls**

The above inmate was placed on Adjustment Controls at: \_\_\_\_\_ a.m. / p.m. (time).

\_\_\_\_\_  
Shift Supervisor Signature

\_\_\_\_\_  
Date

Xc: Unit Manager  
Deputy Warden  
Deputy Director of Adult Prisons

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Modified Meal Serving Memorandum – Styrofoam**

DATE:

TO: Deputy Warden  
Food Service

FROM: Shift Supervisors

SUBJECT: Meal Serving Modification

Inmate \_\_\_\_\_ NMCD# \_\_\_\_\_, Cell # \_\_\_\_\_

has been placed on  Adjustment Controls  Behavioral Program Contract

He is to be fed on **Styrofoam trays** and **Styrofoam cups** as follows:

**BEGIN DATE:** \_\_\_\_\_ with  **Breakfast**  **Lunch**  **Dinner**

**END DATE:** \_\_\_\_\_ with  **Breakfast**  **Lunch**  **Dinner**

SUBMITTED BY:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

xc: Unit Manager  
Pod Lieutenant  
Affected Pod  
File

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Alternative Meal Service Order (Food Loaf)**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ am pm HU: \_\_\_\_\_

Custody Level: \_\_\_\_\_ Facility: \_\_\_\_\_

The above listed inmate is significantly disrupting feeding and food service by the misuse of food, food service equipment, or food packaging/containers. Therefore, it is requested the he be placed on alternative meal service (food loaf) for the next three meals served, or until such time that he can be served without significant disruption of the feeding process or food service operations.

**ALTERNATIVE MEAL SERVICE:**

**BEGIN DATE:** \_\_\_\_\_ with  **Breakfast**  **Lunch**  **Dinner**

**END DATE:** \_\_\_\_\_ with  **Breakfast**  **Lunch**  **Dinner**

1. The basis for the modified meal request is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. The medical unit was contacted on (date) \_\_\_\_\_ at (time) \_\_\_\_\_ (am/pm); the medical staff representative is (name) \_\_\_\_\_, who reports:

There is no medical concern  There is the following medical concern:

\_\_\_\_\_  
\_\_\_\_\_

3. The modified meal was approved by (name) \_\_\_\_\_ on (date) \_\_\_\_\_ at (time) \_\_\_\_\_ (am/pm). [NOTE: The approval can be made by the Deputy Warden or the Unit Manager].

4. Food service personnel were contacted on (date) \_\_\_\_\_ at (time) \_\_\_\_\_ (am/pm); and arrangements for a modified meal were completed. The food service personnel is (name) \_\_\_\_\_.

The following meal was served: \_\_\_\_\_  
\_\_\_\_\_

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Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Intensive Supervision Activity Log**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_ Cell: \_\_\_\_\_

**PLACEMENT**

Date \_\_\_\_\_ and time \_\_\_\_\_ am / pm intensive supervision implemented.

Type of intensive supervision implemented:

- Adjustment Controls
- Behavioral Program Contract
- Suicide Watch

Reason for placement: \_\_\_\_\_

Legal Access Notified Who: \_\_\_\_\_ date \_\_\_\_\_ time \_\_\_\_\_

**SECURITY**

Formal review every shift by Pod Officer:

SHIFT	DATE	TIME	SIGNATURE	SHIFT	DATE	TIME	SIGNATURE
Day				Day			
Swing				Swing			
Night				Night			
Day				Day			
Swing				Swing			
Night				Night			
Day				Day			
Swing				Swing			
Night				Night			

Date and Time Property Items Returned:

ITEM(S)	DATE	TIME	OFFICER SIGNATURE

Date \_\_\_\_\_ and time \_\_\_\_\_ am / pm of shower by officer \_\_\_\_\_

**RELEASE**

Authorized by:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date


Date \_\_\_\_\_ and time \_\_\_\_\_ am / pm released

**REVIEW**

\_\_\_\_\_  
Unit Manager

\_\_\_\_\_  
Date



 <b>CD-143004</b>	<b>NEW MEXICO CORRECTIONS DEPARTMENT</b>	<b>ISSUE DATE: 04/30/01</b> <b>EFFECTIVE DATE: 04/30/02</b> <b>REVIEW/REVISED: 07/27/11</b>
	<b>TITLE: Behavior Program Contracts</b>	

**AUTHORITY:**

Policy *CD-143000*

**PROCEDURES: [4-4249]**

**A. Exemption for APA Inmates:**

*INMATES ASSIGNED TO APA V/VI HOUSING ARE EXEMPT FROM THIS PROCEDURE.*

**B. Behavioral Program Contracts (BPC) Preparation:**

A draft BPC shall be prepared by the Unit Management Team for any inmate, regardless of Step, that persists in assaultive behavior, disruptive behavior, and/or acts of sexual misconduct. This conduct must be well documented by staff and reflect that the use of the other management tools used to correct the documented behavior has been ineffective. The Unit Management Team shall forward the completed draft to the Housing Unit Security Supervisor and the Unit Manager for BPC Review Committee consideration.

1. Each BPC will include the following:
  - a. Signatures of the inmate and Unit Management Team and the date the plan became effective. If the inmate refuses to sign, this will be witnessed by staff.
  - b. Description and examples of specific inappropriate behavior to be modified.
  - c. Actions to be taken in an attempt to modify the behavior.
  - d. Plan review date.
  - e. Signatures of the BPC Review Committee members that prepared the plan.

2. The BPC Review Committee may impose restricted Canteen as part of a BPC. If canteen is restricted the BPC will specify the dollar amount and the canteen items that the inmate is permitted to purchase. If implemented by the BPC review committee, all restrictions must be stated in the BPC.
3. A BPC contains two management conditions, Condition A and Condition B. An inmate on a BPC will initially be placed in Condition A, and may progress to Condition B if he or she meets the criteria.

**C. BPC Conditions A and B:**

1. **Condition A:** Upon occurrence or recurrence of inappropriate behavior specified in an inmate's individualized BPC, the inmate is placed on Condition A. Condition A is in effect the first three days of the BPC. Recurrence of specified inappropriate behavior anytime during activation of a BPC will result in the Shift Supervisor placing the inmate back to Day 1 of Condition A. Conditions of confinement in Condition A are:
  - a. A cell with only the property specified on the Table of Services for Adjustment Controls. Staff shall observe an inmate in a stripped cell at least once every fifteen minutes and document this information on the **Intensive Supervision Activity Log Form (CD-143003.4)**.
  - b. All property that is not allowed to be retained by the inmate shall be removed from the cell, inventoried by security staff, and placed in the facility property storage area.
  - c. No privileges (canteen, phone, visiting, programs, etc.).
  - d. No mail, except Legal and Privileged Mail as permitted under Legal Access. No magazines and newspapers. If delivered to the pod, staff shall mark on the outside of the envelope "BPC Condition A" and return the mailroom (or other location designated for mail).
  - e. Meals will be served on Styrofoam trays and cups, and/or milk cartons.
  - f. If on Condition A after the third day, the inmate shall be offered a shower and clean undergarments on the fourth day, and every fourth day thereafter, for the duration of time on Condition A, if behavior is appropriate. Pod staff will provide a hygiene pack and retrieve it following use.

- g. Inmates will be allowed to brush their teeth daily.
  - h. Inmates on BPC who indicate upcoming court proceedings and need access to legal material shall submit a request to Classification Staff and/or Library Staff.
  - i. Cells occupied by BPC inmates will be inspected daily by pod staff during Conditions A and B.
2. **Condition B:** The Unit Management Team shall review all condition documentation and if appropriate, progress the inmate to Condition B. Condition B is in effect for days four through ten. Upon successful completion of Condition B the Unit Management Team shall deactivate the BPC and progress the Inmate to Step 1. Confinement conditions on Condition B are the same as Condition A, except:
- a. Meals will be served on regular trays.
  - b. Three showers weekly (shower on the first day of Condition B), clean undergarments following each shower.
  - c. Five exercise periods weekly, if behavior is appropriate.
  - d. Pod staff will provide inmates with their personal hygiene items.
  - e. Provided yellow jump suit and shoes.
  - f. Delivery of all mail, except magazines and newspapers. Upon progression to Step 1, all withheld magazines and newspapers shall be delivered on a one-for-one exchange basis.

**D. Placing a BPC into Effect:**

Requires the appropriate Unit Management Team to serve the inmate with a copy of the BPC and to review the plan with the inmate. The inmate and Unit Management Team will sign the plan acknowledging the date and time of this review. The inmate's refusal to sign the plan shall be noted on the signature line. A BPC shall remain in effect for a period of six months. Notification shall be given to the Shift Supervisor, Operations Director, Unit Manager, and Deputy Warden.

**E. Activating a BPC:**

The plan is activated after it has been placed into effect and when the inmate's inappropriate behavior meets criteria stated in the plan. The Shift Supervisor or Unit Manager shall approve activation of the plan.

1. The Warden, Deputy Warden, or Duty Officer shall be notified and consulted concerning the need to activate a BPC.
2. A report shall be prepared indicating the date, time, and inmate's Step at the time the BPC was activated.
3. For regular meals, the Shift Supervisor shall complete and distribute a **Modified Meal Serving Memorandum – Styrofoam** Form (*CD-143003.2*), to initiate Styrofoam trays/cups for inmates placed on Condition "A" status.
4. If appropriate, and inmate may be placed on alternative meal service for using food or food service equipment in a disruptive or hazardous manner. The Shift Supervisor shall prepare an **Alternative Meal Service Order (Food Loaf)** Form (*CD-143003.3*), for submission to the Warden in accordance with NMCD Policy.

**F. Deactivating a BPC:**

An active BPC is deactivated by the Unit Management Team when an inmate successfully completes Conditions A and B of his BPC. This is accomplished by demonstrating acceptable behavior and compliance with the provisions of the plan. Notification shall be given to the Shift Supervisor, Operations Director, Unit Manager, and Deputy Warden.

1. Upon deactivation, the inmate is progressed to Step 1 and brought into Step 1 property compliance.
2. If at any time during the 6-month period of the plan, the inmate engages in misconduct that is addressed by the plan, the BPC may be reactivated.
3. All BPC paperwork (logs, etc.) shall be maintained in the Housing Unit Sergeant's office until Plan deactivation. Unit Management Team shall then review all BPC paperwork for completeness. The Unit Management Team will provide all completed paperwork to the Housing Unit Sergeant and inform the Shift Supervisor or Unit Manager.

**G. BPC Reviews:**

1. The BPC Review Committee may review a BPC any time prior to the scheduled review date. The BPC Review Committee may approve modification to correct new behaviors and/or restructure the plan.
2. Any inmate who remains on BPC, Condition A for ten consecutive days shall be referred to the appropriate Unit Management Team for initiation of a plan review by the BPC Review Committee.

**H. Responsibilities:**

1. Unit Manager:
  - a. Serve on the BPC Review Committee as required.
  - b. Review BPC's, inform and consult with the Deputy Warden or Warden as necessary.
  - c. Schedule and coordinate BPC reviews and serve as a chairperson of the BPC Review Committee.
  - d. Activate BPC if inmate behavior warrants
2. Shift Supervisor:
  - a. Maintain a notebook containing all BPC's that are in effect.
  - b. Evening/Morning Shift Supervisor: Shall visit inmates on BPC at least once each shift.
3. Housing Sergeant:
  - a. Serve on the BPC Review Committee as appropriate.
  - b. Determine the need for and/or modification of BPC's and draft the initial plans for review by the BPC Review Committee.
  - c. Visit inmates on a BPC at least weekly.


- d. Submit all deactivated BPC paperwork to the Deputy Warden's Secretary.
- 4. Unit Management Team:
  - a. Visit inmates on Condition A at least once each working day to ascertain their well being and compliance with the Policy/Procedure. Visits shall be logged on the inmate's **Intensive Supervision Activity Log Form (CD-143003.4)**.
  - b. Review Condition A documentation and recommend approval to the Unit Manager for inmate progression to Condition B status.
  - c. Ensure all BPC paperwork is completed and turned in to the Unit Manager upon BPC deactivation.
- 5. Medical and Mental Health Representatives: Serve on the BPC Review Committee, as required.
- 6. Pod Officer(s):
  - a. Maintain an **Intensive Supervision Activity Log Form (CD-143003.4)** to record an inmate's BPC Program.
  - b. Observe inmates on Condition A every fifteen minutes and document observations on the **Intensive Supervision Activity Log Form (CD-143003.4)**.
  - c. All facility staff members are responsible for being familiar with and adhering to this policy/procedure.



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

 <b>CD-143005</b>	<b>NEW MEXICO CORRECTIONS DEPARTMENT</b>	<b>ISSUE DATE: 04/30/01</b> <b>EFFECTIVE DATE: 04/30/02</b> <b>REVIEW/REVISED: 07/27/11</b>
	<b>TITLE: Programs, Activities and Services for Inmates in Level V and VI</b>	

**AUTHORITY:**

Policy *CD-143000*

**PROCEDURES: [4-4249]**

**A. Inmate Protection and Death-Sentenced Inmates:**

1. Programs, activities, and services will be governed by the Table of Services.
2. Such inmates are provided programs, activities, and services consistent with Step 5.
3. Inmate Protection and death-sentenced inmates will not be allowed congregate activities, unless approved by the Warden.
4. Inmate Protection and death-sentenced inmates who are later reclassified to Level V or Level VI based upon posing a threat to the security of the institution, or other behavior-based placement criteria will no longer be covered by this paragraph, and will receive programs and services consistent with their new Level and Step.

**B. Inmates in Pre-Hearing Detention or Disciplinary Segregation (if housed in Level V or Level VI): [4-4255]**

Inmates in pre-hearing detention (PHD) or disciplinary segregation will receive services and privileges as per Step 1 of the **Level VI Table of Services Attachment (CD-143002.B)**. After 60 days in PHD or disciplinary segregation, an inmate will be allowed Level VI, Step 2 privileges, as long as the inmate has maintained appropriate behavior but may be regressed based on unacceptable behavior by the inmate.

**C. UMT – Award of Good Time:**

The Unit Management Team will review and recommend monthly good time. In cases where an inmate has been recommended for less than maximum good time for the month and/or quarter, the Unit Management Team will include a representative from mental health. Good time earnings will not be determined solely by a correctional staff member who may make a negative notation on the inmate's behavior log. The UMT will consider any such notation, and make an independent determination as to whether to withhold good time, or not.

**D. Programs and Activities:**1. Recreation: [4-4270] [4-4273]

- a. Inmates shall be allowed the opportunity for one hour of outdoor recreation/exercise five times per week.
- b. Inmates in Step 4 and Step 5 will be provided congregate recreation for one hour per day in groups no larger than six. Inmate Protection and death-sentenced inmates are not eligible for group recreation unless approved by the Warden.
- c. The Unit Officer will ask all inmates if they wish to go to recreation and a list will be compiled.
  - 1) Inmates assigned to Steps 1, 2, and 3 have the option of refusing recreation.
  - 2) Inmates assigned to Steps 4 and 5 are required to participate in recreation as scheduled by the facility. Failure to participate in scheduled group recreation may result in Step reduction.
- d. Inmates in Steps 1, 2 and 3 will be restrained prior to exiting their cell, and will be escorted from their cell by the Escort Officers to the search cell where they will undergo an unclothed body search or other search procedure approved by the Warden. This procedure will be repeated when the inmate is returned from recreation. Once the search has been completed, the inmate will be escorted to the recreation area.



- e. The Recreation Officer/Sergeant will assign each inmate to a recreation area and document which inmate was assigned to which area and the duration of the recreation time.
  - f. Recreational clothing is governed by the **Table of Services**.
2. Religious Access: [4-4273]
- a. Inmates may receive visits from chaplains and/or volunteers approved by the Warden, but may be required to remain in their cells during visits. These decisions will be made on an individual basis, consistent with the security issues posed.
  - b. Inmates will be allowed to possess and retain religious items and books pursuant to the **Table of Services**.
  - c. For Native American inmates, best efforts will be made to provide sweat lodge services in accordance with the **Table of Services**. Sweat lodge privileges will be handled as follows:
    - 1) Sweat lodge will be supervised by a Correctional Officer. Efforts will be made to use a Native American Correctional Officer if possible.
    - 2) For inmates in Level VI, Step 3, only one inmate will be scheduled for sweat lodge at a time.
    - 3) Level V, Step 4 and 5 inmates are eligible for congregate sweat lodge as approved by the Warden.
    - 4) The Warden may approve a non-inmate spiritual advisor to assist with the sweat lodge.
    - 5) Restraints will be used as per the Warden's discretion.
  - d. For Native American inmates, access to pipe and smudge sticks will be provided in accordance with the **Table of Services**.
  - e. Misuse of the sweat lodge, pipe, or smudge stick privileges may result in suspension of such privileges for a period of six months. Misuse includes failure to comply with escort procedures to or from the sweat lodge, failure to return items upon the order of staff, and the like.

- f. For Native American sweat lodge, pipe, and smudge stick privileges, the Warden has the discretion to develop procedures and time schedules consistent with the above.

3. Mental Health Services: [4-4273]

Inmate will be provided mental health/counseling services in accordance with Policy *CD-180400* and *CD-180500*.

4. Library Service and Legal Access: [4-4273]

- a. Inmates will have the opportunity to check out or exchange general library books one time per week. This may be done through a book cart or a checkout list, consistent with housing unit library procedures. [4-4268] [4-4269]
- b. Once a week, the librarian (legal assistant) will distribute authorized legal supplies as per Policy *CD-121000*.
- c. Legal access will be provided in accordance with NMCD legal access policy *CD-121000*.
- d. A reasonable amount of postage for legal mail will be supplied by the institution as per policy *CD-151201*.
- e. The loss or destruction of library property or equipment may result in suspension of library privileges. Reinstatement may be contingent on reimbursement for the lost or damaged library property, and upon the recommendation of the Disciplinary Committee.

5. Visiting: Privileges will be provided in accordance with the **Table of Services**.

- a. As the general rule Level V and Level VI inmates will receive face-to-face, noncontact visiting. Exceptions to noncontact visiting will be made on a case-by-case basis.
- b. Inmate shall complete the **Visiting Request** Form (*CD-143005.3*) in full. Failure to complete the form may result in a denial of the visit. (Failure to provide a phone number will not be the sole reason for denial of a visit).
- c. Classification Officers shall collect all **Visiting Request** Forms for the next week from each inmate in each pod during weekly rounds.

- d. Visit requests shall be received directly from the inmates no later than the Thursday before the visiting week.
  - e. Classification Officer shall ensure each inmate who requests a visit is informed of the status of the visit (approved; denied; or time changed) by the Friday before the visiting week
  - f. Inmates may have visiting privileges temporarily suspended as per the Conditions of Confinement.
6. Attorney Visiting: Procedure will be consistent with requirements for general population.
  7. Televisions:

Inmates will be required to sign a **Television Set Agreement Form** (*CD-143005.1*) and a Debit Memo.

**E. Services:**

1. Telephones: Telephone use privileges will be provided in accordance with the **Table of Services**. [4-4271]
2. Canteen: Inmates will be allowed to receive canteen items as specified in the **Table of Services**. [4-4273]
3. Education: [4-4273]
  - a. Educational/Social Services Programming: [4-4273]
    - 1) Education/social services are provided via Educational Television (ETV) for inmates assigned to Steps 2 and 3. Education/social services may be provided by ETV and/or in small groups for inmates assigned to Steps 4 and 5. Facilities that do not have ETV capability will develop a written education program delivery plan.
    - 2) Educational offerings will include programs such as Corrective Thinking; Cognitive Education; Adult Basic Education for ILP-mandated inmates; Special Education for eligible inmates; and, English as a Second Language for ILP-mandated inmates who have been assessed as needing such services.

3) Self-help programming will be available via ETV and supported by appropriate work book materials. Such self-help programs will be voluntary. Enrolled inmates will have lessons handed out and picked up by education staff. The following self-help programs will be offered:

- Family Reunification
- Anger: Creating New Choices
- Success Stories: Family Issues and Support Systems
- Success Stories: Work, Anger, and Self Esteem
- Success Stories: Release Day
- Change is an Inside Job
- Building a Trust Account

b. Cognitive Education:

- 1) Inmates will be assigned to cognitive education by classification committee and will be expected to participate, consistent with any other program assigned by committee. Failure to participate in the assigned cognitive education program will be considered in the award of good time, in the same manner as other assigned programming.
- 2) Completion of cognitive education will not be a prerequisite for Step progression or Level completion.
- 3) Failure to complete cognitive education lessons will not be used, in whole or in part, for Step retention or Step regression, or for Level retention or regression unless the inmate has received a disciplinary report for failure to program.
- 4) In the event that an inmate is retained or regressed in Step based upon inappropriate behavior, he will continue his cognitive education, but will not be required to regress in lessons or repeat lessons already completed.
- 5) A completed lesson that is unresponsive or incomplete will be subject to one mandatory re-do. The educator will state why the lesson does not comply with instructions. After the mandatory re-do, regardless of content or completion, the inmate will be moved to the next lesson.

c. Suspension from Education Programs:

The Unit Management Team may suspend an inmate from Education Programs, with the exception of Special Education, if the inmate exhibits inappropriate or unacceptable behavior directed toward the Educator and the Educator documents such behavior.

- 1) The instructor will notify the Unit Management Team in writing requesting that the inmate be suspended from education.
- 2) The Unit Management Team will make a determination to suspend or not suspend the inmate from educational programming.
- 3) If the inmate is suspended he or she may submit a written request or reinstatement in educational programming after 30 days has elapsed from the date of the suspension.
- 4) The Unit Management Team will consider the inmate's request and make a determination to re-enroll the inmate or to continue the suspension.

4. Property:

- a. Allowed property will be provided in accordance with the **Table of Services**.
- b. Inmates will be provided clothing, state issued property and access to basic personal items, as specified in the **Level V Table of Services** Attachment (*CD-143002.A*) for Level V inmates and in the **Level VI Table of Services** Attachment (*CD-143002.B*) for Level VI inmates, for use in their cells unless there is imminent danger that the inmate, or any other inmate(s), will destroy the item, induce self-injury, or harm others.
- c. The appropriate staff will properly inventory and record each new inmate's authorized property in accordance with applicable policy and practice, including disposition of property that the inmate is not allowed to retain.

- d. The Deputy Warden is responsible for verifying with the property officer that each inmate receives both personal and state-issued property in accordance with the **Table of Services** within seven working days following the inmate's arrival at the Level V or Level VI facility. The Deputy Warden shall document this verification.
  - e. Upon approval of a step progression involving a change in the Table of Services., the Unit Manager will notify the property officer of the date that the inmate's property is to be increased according to the **Table of Services**.
  - f. Upon approval of a step regression, the Unit Manager will notify the property officer that the inmate's property is to be reduced according to the **Table of Services**.
  - g. The property officer will maintain an inventory of the property for each inmate. The property officer will document the property that is given or taken from the inmate.
  - h. The Deputy Warden is responsible for verifying with the property officer within seven working days following the step progression or regression that the inmate has the appropriate property in accordance with the **Table of Services**. The Deputy Warden shall document this verification.
5. In-Cell Hobby Craft Program:
- a. Level V and Level VI inmates assigned to Steps 4 and 5 will be allowed to apply for in-cell hobby craft privileges. The inmate will submit the **In-Cell Hobby Craft Application and Approval** form (*CD-143005.2*).
  - b. The following items may be authorized for possession, as specified for either Level V or Level VI inmates:
    - 1) Level V, Steps 4 and 5: (a) one roll of cellophane for papercraft; (b) 12 colored pencils not to exceed four inches in length; (c) 12 pastels
    - 2) Level VI, Step 4/5 privilege: (a) one roll of cellophane for papercraft; (b) 12 pastels

c. Rules for In-Cell Hobby Craft Program

- 1) Inmates will maintain a current inventory of approved items. This inventory will be posted in the cell at all times for the purpose of accountability and cell searches.
- 2) Inmates who trade, exchange, barter, or otherwise pass hobby craft items (either materials or completed items) to other inmates will immediately forfeit their in-cell privileges and will receive a negative behavior log notation.
- 3) Inmates will be required to mail out or transfer to a visitor (using a property transfer form) when crafts are completed. Storage or accumulation of completed crafts will not be allowed.

5. Barber/Haircuts:

Haircuts will be provided to all inmates assigned to Levels V and VI in accordance with Hygiene Policy, CD-151100. [4-4263]

- a. Inmates receiving haircuts will be restrained in belly chains.
- b. The facility will maintain a written log of inmates who have received haircuts.
- c. The barber kit will be retrieved from Master Control by staff only.
- d. Barber schedules will be posted in all control centers.

6. Correspondence:

Inmates will be provided correspondence privileges pursuant to Policy *CD-151200, Correspondence Regulations*. Inmates may receive unlimited correspondence; however, may retain in their possession only the number of letters up to the specified maximum. Once the maximum is reached, the inmate must send the excess home (at own expense) or destroy the correspondence that exceeds the maximum allowable. [4-4266]

7. Laundry:

Each designated Level V or Level VI facility will implement a laundry procedure and laundry schedule which shall be similar to inmates in general population. [4-4263]

- a. The Unit Officer will collect the laundry that is to be sent to the laundry area. The Officer will maintain written accountability that will be referred to upon the return of the laundry by the Laundry Officer. Any items not returned will be immediately reported by the Unit Officer to the Laundry and/or the area Security Supervisor. The laundry will be placed in the respective laundry carts for the Laundry Officer to pick up.
- b. Inmates will hand the items that need to be laundered to the Officer through the food port.

8. Meals:

Inmates will be provided meals three times a day in accordance with the Table of Services and medical/dietary needs.

9. Writing paper:

All Level V and VI inmates, at all Steps, may have up to 10 sheets of paper in their possession. Paper is replenishable up to a maximum of 10 sheets, unless the paper is being used inappropriately. Education assignments, pending or current legal papers allowed for pursuant to the legal access policy, mental health paperwork, and the like do not count toward the 10 sheet maximum.

**F. Removal of Any Usually Authorized Items or Activities:**

In cases where inmates are deprived of any usually authorized items or activities (e.g., television, telephone, canteen, visits, and recreation), a report detailing the suspension of services will be forwarded to the Shift Supervisor, Operations Director, Unit Manager, and Deputy Warden. [4-4265]

**G. Housing:**

The New Mexico Corrections Department shall ensure that inmates classified to Levels V and VI are housed in single occupancy cells. However, if an emergency makes living units unusable, two inmates may be housed in said cells or rooms for a period of short duration during which arrangements are made for alternate housing.



**H. Staff Requirements:**

1. A correctional officer must personally observe all inmates in Level V or VI every 30 minutes on an irregular schedule. [4-4257]
2. Correctional officers assigned to Level V or VI living areas shall be selected to meet the needs of inmates so classified. Each supervisor shall supervise and evaluate the on-the-job performance of employees assigned to Level V or VI living areas. Correctional Officers should have completed their probationary period as well as training in the following areas: [4-4259]
  - OJT/Level V and Level VI Training
  - Defensive Tactics
  - CPR/First Aid
  - Classification
  - Search Procedures
  - Special Needs Offenders
  - Interpersonal Communications
  - Crisis Intervention and Suicide Prevention
  - Emergency Preparedness and Use of Force
  - Forced Cell Movement
  - Gas Mask and Riot Line Exercise
3. Correctional Officers will maintain the **Individual Inmate Behavior Log** Form (CD-143002.2), which is a permanent log and documents the following: (a) activities for the inmate; (b) inmate behavior; and (c) refusal of any service(s). [4-4260]
4. A staff sign-in sheet will be maintained that documents all personnel entering the unit for inspection, programming or treatment for each inmate.
5. The Warden shall designate an official to be responsible for the administration and operation of Levels V or VI living areas that shall monitor and evaluate the entire program in the areas as often as necessary to insure compliance with all applicable policy statements.
6. The Area Classification Officer shall visit all areas daily in which Levels V or VI inmates are housed and shall be available no less frequently than once per week, to help each inmate who desires assistance or information. [4-4258]

- 7. A qualified medical professional shall conduct sick call daily in each Level V or VI living area and shall examine every inmate who so requests to determine what medical care, if any, is required. A log of all sick call visits shall be maintained. **[4-4258]**
  
- 8. The following personnel shall visit Level V or VI living areas: **[4-4258]**
  - Warden or Acting Warden-Weekly Visit*
  - Deputy Warden responsible for the Unit – Weekly*
  - Unit Manager – Weekly*
  - Operations Director/Chief of Security- Weekly*
  - Mental Health Clinician – Weekly Rounds*
  - Medical Personnel-Each Shift-Daily Visit **[4-4258]***
  - Classification Officer-Daily Visit*
  - Chaplain-Weekly Visit*
  - Shift Supervisor-Once per Shift **[4-4258]***
  - Fire, Safety, Sanitation Officer-Weekly Visit*
  
- 9. All personnel required to visit the Level V or VI living areas shall sign in by clearly printing their name and title without abbreviating as well as documenting the reason for entering the unit and shall enter the correct date and time that they entered and exited the unit.
  
- 10. The Facility Quality Assurance office is responsible for retrieving the sign in logs on a weekly basis for review and shall report any discrepancies to the Warden. The sign-in logs are to be maintained as permanent logs. **[4-4260]**



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Lupe Martinez, Secretary of Corrections  
New Mexico Corrections Department

07/27/11  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Television Set Agreement**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_

- This agreement is for:          State issued television  
       Inmate owned television

**If I refuse to sign this form I will not be issued a state-owned television or will not be allowed to retain my personally-owned television.**

Prior to receiving a state-issued television or retaining my personally owned television, as indicated above, I agree to the following conditions:

***IF STATE-ISSUED, THE FOLLOWING APPLY:***

1. For state-issued televisions (if indicated above), I agree to sign a debit memo for the price of the television set.
2. Prior to receiving another television set, I must pay replacement costs in full.

***FOR BOTH STATE-ISSUED AND INMATE-OWNED, THE FOLLOWING APPLY:***

1. I understand that if I tamper with, alter, and/or damage the television set I will lose the privilege of possessing that television.
2. I may temporarily lose possession of my television if my behavior is inappropriate. Examples of inappropriate behavior include, but are not limited to, the following:
  - a. Refusal to return eating utensils or food tray
  - b. Failure to clean or maintain cell in an orderly fashion
  - c. Personal hygiene is poor and will not take a shower
  - d. Pounding or kicking on cell door, shower wall or door, or exercise area
  - e. Failure to comply with escort procedures
  - f. Failure to turn in bedding and clothing for regular washing
3. Time frames for loss of television privilege: first offense, **three days**

I acknowledge that I have read and understood this agreement.

\_\_\_\_\_  
Inmate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**In-Cell Hobby Craft Application and Approval**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_

I am requesting approval for in-cell hobby shop privileges, as follows:

- |                          |  |               |
|--------------------------|--|---------------|
| <input type="checkbox"/> | 1 roll of cellophane for papercraft                              | Level V or VI |
| <input type="checkbox"/> | pastels (no more than 12)  | Level V or VI |
| <input type="checkbox"/> | colored pencils (no more than 12;<br>not to exceed 4" in length) | Level V only  |

If approved, I agree to comply with the following rules for in-cell hobby craft:

1. I will maintain a current inventory of approved items. This inventory will be available in my cell at all times for the purpose of accountability and cell searches.
2. I will not trade, exchange, barter, or otherwise pass items of hobby craft (either materials or completed items) to other inmates. If I do so, I understand that I will immediately forfeit my in-cell hobby privileges and that I will receive a negative behavior log notation.
3. I understand that when I have completed a hobby craft item, I will be required to mail the item out or transfer it to a visitor (using property transfer form).
4. I understand that I cannot store completed hobby craft items.

---

Signature

Date

---

**APPROVAL**

The inmate is approved to have the following in his possession:

- |                          |  |               |
|--------------------------|--|---------------|
| <input type="checkbox"/> | 1 roll of cellophane for papercraft                              | Level V or VI |
| <input type="checkbox"/> | pastels (no more than 12)  | Level V or VI |
| <input type="checkbox"/> | colored pencils (no more than 12;<br>not to exceed 4" in length) | Level V only  |

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Unit Manager

Date

Xc: Inmate

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V and VI Visiting Request**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_

Unit/Pod/Cell: \_\_\_\_\_ Step: \_\_\_\_\_

Requested Date / Time of Visit: \_\_\_\_\_ Length of visit: 2 hours

Name of Visitor(s): \_\_\_\_\_

Phone # of Visitor(s): ( ) \_\_\_\_\_ Qualified:  Yes  No

Approved:  Denied:  Scheduled for: \_\_\_\_\_ / \_\_\_\_\_  
Date Date

Classification Officer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
Print Sign

Given on: \_\_\_\_\_ / \_\_\_\_\_ Length of visit: \_\_\_\_\_  
Date Time

Security Officer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
Print Sign

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Level V and VI Visiting Request**

Inmate Name: \_\_\_\_\_ NMCD#: \_\_\_\_\_

Unit/Pod/Cell: \_\_\_\_\_ Step: \_\_\_\_\_

Requested Date / Time of Visit: \_\_\_\_\_ Length of visit: 2 hours

Name of Visitor(s): \_\_\_\_\_

Phone # of Visitor(s): ( ) \_\_\_\_\_ Qualified:  Yes  No

Approved:  Denied:  Scheduled for: \_\_\_\_\_ / \_\_\_\_\_  
Date Date

Classification Officer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
Print Sign

Given on: \_\_\_\_\_ / \_\_\_\_\_ Length of visit: \_\_\_\_\_  
Date Time

Security Officer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
Print Sign