



NEW MEXICO CORRECTIONS DEPARTMENT

Secretary
Alisha Tafoya Lucero

CD-141500 Restrictive Housing	Issued: 07/23/15 Effective: 07/23/15	Reviewed: 08/23/19 Revised: 08/23/19
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

AUTHORITY:

- A. Section 33-1-6 NMSA
- B. House Bill 364, 54th Legislature of the State of New Mexico, First Session, 2019

REFERENCES:

- A. ACA Expected Practices 5-4B-0001 through 5-4B-0035, *Performance Based Expected Practices for Adult Correctional Institutions, 5th Edition*

PURPOSE:

Establish guidelines for inmates who threaten the secure and orderly management of the institution, posing a threat to others or a danger to themselves. Inmates are removed from the general population and placed in designated units. Such assignments are made appropriately and justifiably and offenders placed into such categories are treated justly, humanely, in a constitutionally correct manner and prepared for return to less restrictive units.

APPLICABILITY:

All inmates and staff of the New Mexico Corrections Department.

FORMS:

- A. **Restrictive Housing Unit Placement** form (*CD-141500.1*)
- B. **RHU Transition Plan for Inmates with Serious Mental Disabilities** (*CD-141500.2*)
- C. **7 and 30 Day Review** form (*CD-141500.3*)
- D. **Restrictive Housing Quarterly Report** form (*CD-141500.4*)

ATTACHMENTS:

None

DEFINITIONS:

- A. Administrative Status – A form of separation from the general population administered by the classification committee or other authorized group when the continued presence of the inmate in the general population would pose a serious threat to life, property, self, staff, or other inmates or to the security or orderly running of the institution. Inmates pending investigation for trial on a criminal act or pending transfer also can be included.
- B. Alternative Meal Service – Foods provided to comply with the medical, religious, or security requirements. Alternative meals must be designed to ensure basic health needs are met and are provided in strict compliance with the policies signed by the chief executive officer, the chief

medical officer, and for the religious diets, by the appropriate religious leader.

- C. Behavioral Health Trained Staff – Correctional officers or other correctional personnel who may be trained and appropriately supervised to carry out specific duties with regard to the administration of mental/behavioral health care.
- D. Direct Threat – Significant risk of substantial harm to the health or safety of any person.
- E. Disciplinary Detention – A form of separation from the general population in which inmates committing serious violations of conduct regulations are confined by the disciplinary committee or other authorized group for short periods of time to individual cells separated from the general population. Placement in detention only may occur after a finding of a rule violation at an impartial hearing and when there is not an adequate alternative disposition to regulate the inmate's behavior.
- F. Extended Restrictive Housing – Housing that separates the offender from contact with general population while restricting an offender/inmate to his/her cell for at least 22 hours per day and for more than 30 days for the safe and secure operation of the facility.
- G. Extended Restrictive Housing with Medical and Behavioral Health Treatment – Offenders who are placed in long term Restrictive Housing to his or her cell for at least 22 hours per day and for more than 30 days that are in need of Behavioral health treatment and services.
- H. Juvenile – A person under the age of 21, or as defined in the local jurisdiction as under the age of majority.
- I. Multidisciplinary Treatment Team – Provides an integrated team approach to inmate care and treatment. The members meet together to develop and provide necessary health and behavioral health care services and individualized treatment for inmates with particular emphasis on addressing needs during confinement in Restrictive Housing and step-down programs. The team may include psychologists, psychiatric practitioners, licensed social workers, licensed mental health counselors, registered nurses, activity therapists, and correctional staffs.
- J. Protective Custody – Form of separation from the general population for inmates requesting or requiring protection from other inmates for reasons of health or safety. The inmate's status is reviewed periodically by the classification committee or other designated group.
- K. Restrictive Housing – A placement that requires an inmate to be confined to a cell at least 22 hours per day for the safe and secure operation of the facility.
- L. Serious Mental Disability – a serious mental illness, including schizophrenia, psychosis, major depression and bipolar disorder; or having a significant functional impairment along with a brain injury, organic brain injury, organic brain syndrome or intellectual ability.
- M. Special Management – Housing status inclusive of Administrative Segregation, Protective Custody, and Disciplinary Detention. Inmates in this status are placed in a cell in a special management unit for periods of time less than 22 hours per day.

- N. *Special Management Inmates* – Individuals whose behavior presents a serious threat to the safety and security of the facility, staff, general inmate population, or themselves. Special handling and/or housing are required to regulate their behavior.
- O. *Step-down Program* – A program that includes a system of review and establishes criteria to prepare an inmate for transition to general population or the community. Individualized programs involve a coordinated, multidisciplinary team approach that includes mental health, case management, and security practitioners. Medical personnel will be part of the multidisciplinary team when inmates who have chronic care or other significant medical accommodation needs participate in this program.

POLICY:

A. Admission to Restrictive Housing Units

- A. Placement of an inmate in Restrictive Housing shall be limited to those circumstances that pose a direct threat to the safety of persons or a clear threat to the safe and secure operations of the facility. The policy governing the placement of an inmate in Restrictive Housing shall include:
- the relationship between the threat the inmates poses and the behaviors articulated in the policy.
 - the impact that Restrictive Housing may have on medical and mental health conditions exhibited by the inmate and the possible alternatives that may be available to compensate for such conditions.
 - a description of alternatives that may be available to safely deal with the threat posed by the inmate other than restricted housing. **[5-4B-0001]**
- B. The Warden, Authorized Designee, or Shift Supervisor can order immediate removal from general population when it is necessary to protect the inmate or others. The action will be approved, denied, or modified within 24 hours by an appropriate and higher authority who is not involved in the initial placement. **[5-4B-0002]**
- C. Behavioral Health staff will complete a mental health appraisal within seven (7) days of placement of inmate in Restrictive Housing. The mental health appraisal will include a mental health screening that has been completed by health care personnel at the time the inmate is placed in restrictive housing. If confinement continues beyond 30 days, a behavioral health assessment by a mental health practitioner/provider is completed at least every 30 days for offenders with a diagnosed behavioral health disorder and more frequently if clinically indicated. For offenders without a behavioral health disorder, an assessment is completed every 90 days and more frequently if clinically indicated. The behavioral health assessment will be conducted in a manner that ensures confidentiality. **[5-4B-0010]**
- a) Regular psychological assessment is necessary to ensure the behavioral health of any inmate confined in such a unit beyond 30 days.
4. New inmates assigned directly to Restrictive Housing receive written orientation materials

and/or translations in their own language. When a literacy problem exists, a staff member assists the inmate in understanding the material. Completion of orientation is documented by a statement signed and dated by the inmate on the **Orientation Verification** form CD-041001.1. [5-4B-0028]

5. When an inmate is transferred to Restrictive Housing, health care personnel will be informed immediately and will provide a screening and review as indicated by the protocols established by the health authority.

The mental health portion of the screening should include at a minimum, but is not limited to:

- a) Inquiry into:
- whether the offender has a present suicide ideation
 - whether the offender has a history of suicidal behavior
 - whether the offender is presently prescribed psychotropic medication
 - whether the offender has a current mental health complaint
 - whether the offender is being treated for mental health problems
 - whether the offender has a history of inpatient and outpatient psychiatric treatment
 - whether the offender has a history of treatment for substance abuse
- b) Observation of:
- general appearance and behavior
 - evidence of abuse and/or trauma
 - current symptoms of psychosis, depression, anxiety, and/or aggression
- c) Disposition of offender:
- no mental health referral
 - referral to mental health care service
 - referral to appropriate mental health care service for emergency treatment

If the results of the inmate screening indicates the inmate is at imminent risk for serious self-harm, suicide, exhibits debilitating symptoms of a SMI, or requires emergency medical care, a health care professional shall be contacted for appropriate assessment and treatment.

Unless medical attention is needed more frequently, each offender in Restrictive Housing receives a daily visit from health care personnel to ensure that offenders have access to the health care system. The presence of health care personnel in Restrictive Housing is announced and recorded. The health authority determines the frequency of physician visits to Restrictive Housing units.

Unless mental health attention is needed more frequently, each offender in Restrictive Housing shall receive a weekly visit from mental health staff to ensure that offenders have access to the behavioral health system. The presence of a mental health staff in Restrictive Housing is announced and recorded. The mental health authority determines the frequency of mental health professionals to Restrictive Housing units. [5-4B-0029]

6. Inmates diagnosed with a serious mental illness will not be placed in Extended Restrictive

Housing, unless the multidisciplinary service team determines there is an immediate and present danger to others or the safety of the institution. There must be an active individualized treatment plan that includes weekly monitoring by mental health staff, treatment as necessary, and steps to facilitate the transition of the offender back into general population. **[5-4B-0031]**

7. Female inmates determined to be pregnant will not be housed in Restrictive Housing. **[5-4B-0033]**
8. Confinement of inmates under 18 years of age in Restrictive Housing is prohibited. **[5-4B-0034]**
9. An inmate will not be placed in Restrictive on the basis of Gender Identity alone. **[5-4B-0035]**
10. Inmates with serious mental illness will not be placed in Restrictive Housing unless they exhibit behaviors which pose a direct threat to the institution.
 - a) Inmates with serious mental illness who require placement in Restrictive Housing and are pending transfer into a Special Management Program (i.e., PBMP, SMP) will require a Treatment Plan (*CD-180108.1*).
 - b) Inmates with serious mental illness who remain in Restrictive Housing for over 48 hours require completion of **RHU Transition Plan for Inmates with Serious Mental Disabilities** (*CD-141500.2*)

B. General Restrictive Housing Policy

1. When Restrictive Housing Units exist, policy and procedure govern their operation. **[5-4B-0003]**
 - a) Facility Wardens will be responsible for implementing site-specific policies and procedures which govern the operation of Restrictive Housing Units at their facility.
2. Inmates placed in Restrictive Housing in Pending Transfer Hold status will be moved as soon as possible.
3. Inmates placed in Restrictive Housing for the purposes of placement in the Special Management Program require the investigation be completed within 5 days and forwarded to the Special Management Coordinator.
4. For inmates placed in Restrictive Housing, any time served in pre hearing detention is to be credited to the determinant Restrictive Housing sanction. **[5-4B-0007]**

C. Inmate Supervision and Conditions of Confinement

1. Restrictive Housing units provide living conditions that approximate those of the general inmate population; all exceptions are clearly documented. Restrictive Housing cells/rooms permit the inmates assigned to them to converse with and be observed by staff members. Space is available either inside the Restrictive Housing unit or external to the unit for treatment staff consultation with Restrictive Housing inmates. **[5-4B-0004]**
2. All cells/rooms in Restrictive Housing provide a minimum of 80 square feet, and shall provide 35 square feet of unencumbered space for the first occupant and 25 square feet of unencumbered space for each additional occupant. **[5-4B-0006]**
3. Restrictive Housing units have either outdoor uncovered or outdoor covered exercise areas. The minimum space requirements for outdoor exercise areas for special management units are as follows:
 - Group yard modules: 330-square feet of unencumbered space can accommodate two inmates. For each additional 150-square feet of unencumbered space, an additional inmate may use the exercise area simultaneously. (Formula: for each 150-square feet of unencumbered space exceeding the base requirement of 180-square feet for the first inmate, equals the maximum number of inmates who may use the recreation area space simultaneously). No more than five inmates are to use a group module at one time.
 - Individual yard modules: 180-square feet of unencumbered space. In cases where cover is not provided to mitigate the inclement weather, appropriate weather-related equipment and attire should be available to the inmates who desire to take advantage of their authorized exercise time. **[5-4B-0005]**
4. All Restrictive Housing inmates are personally observed by a correctional officer twice per hour, but no more than 40 minutes apart, on an irregular schedule. Inmates who are violent or mentally disordered or who demonstrate unusual or bizarre behavior or self-harm receive more frequent observation; suicidal inmates are under continuous observation. Observation shall be documented on a log. A qualified mental health professional will determine the type of observation (minimal to constant). **[5-4B-0011]**
5. Inmates in Restrictive Housing receive daily visits from the senior correctional supervisor in charge, daily health care rounds from a qualified health care professional (unless medical attention is needed more frequently), and visits from members of the program staff at least weekly. **[5-4B-0012]**
 - a) Inmates in Restrictive Housing are visited regularly by key staff members who can ensure that their health and well-being are maintained.
6. Procedures shall be established for the selection criteria, specialized training, supervision, and rotation of security staff who work directly with inmates in Restrictive Housing on a regular and daily basis. **[5-4B-0013]**

- a) The need and frequency of officer rotation will be determined by the intensity of the assigned post.
 - b) Specialized training should include but not be limited to crisis intervention, stress management and behavioral health.
7. All inmates in Restrictive Housing are provided medication as prescribed. **[5-4B-0015]**
8. All inmates in Restrictive Housing are provided suitable clothing, and access to basic personal items (e.g., eyeglasses, writing materials) 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. **[5-4B-0016]**
- a) Clothing should be that of the general population unless an adjustment is necessary for self-protection, such as removal of a belt to prevent a suicide attempt, and any clothing adjustment should be justified and documented in writing by an appropriate official.
 - b) If a supervisor judges that there is imminent danger that an inmate will destroy an item or use it to induce self-injury, the inmate may be deprived of the item; in such cases, every effort should be made to supply a substitute for the item or to permit the inmate to use the item under supervision of an officer.
9. Inmates in Restrictive Housing have the opportunity to shave and shower at least three times per week. In instances where inmates are not allowed to shave or shower, these instances must be documented and reviewed by the senior correctional supervisor in charge. **[5-4B-0017]**
- a) Inmates in Restrictive Housing should have the opportunity to maintain an acceptable level of personal hygiene unless these procedures cause an undue security hazard.
 - b) If conditions permit, the inmates should be able to shower daily.
 - c) Issued personal hygiene equipment should be controlled and accounted for.
10. Inmates in Restrictive Housing 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. **[5-4B-0018]**
11. Alternative meal service may be provided to an inmate in Restrictive Housing who uses food or food service equipment in a manner that is hazardous to self, staff, or other inmates. Alternative meal service is on an individual basis, is based on health or safety

considerations only, meets basic nutritional requirements, and occurs with the written approval of the warden/superintendent, or designee and facility health care authority or designee. The substitution period shall not exceed seven days unless it is extended with the review of the authorizing administrator and the approval of the health care practitioner. [5-4B-0019]

- a) The health assessment/evaluation should be done within 7 days to ensure that the inmate is not malnourished.
12. Whenever an inmate in Restrictive Housing 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. [5-4B-0020]
- a) Approval for removing all of an inmate's personal items should be obtained in advance from the warden/superintendent or designee. The report should identify the inmate, item or activity deprived of, and the reasons for the action. The report should be forwarded to the chief security officer as soon as possible.
 - b) No items or activity should be withheld for the purpose of punishment or for longer than necessary to ensure the safety and well-being of the inmate and others.

D. Programs and Services

1. Inmates in Restrictive Housing can write and receive letters on the same basis as inmates in the general population. [5-4B-0021]
2. Inmates in Restrictive Housing have opportunities for visitation unless there are substantial documented reasons for withholding such privileges. [5-4B-0022]
 - a) Every effort should be made to notify approved visitors of any restrictions on visiting; if time allows, the burden of this notification may be placed on the inmate.
3. Inmates in Restrictive Housing shall have access to legal materials. [5-4B-0023]
4. Inmates in Restrictive Housing shall have access to reading materials. [5-4B-0024]
 - a) Inmates in Restrictive Housing should be provided a sufficient quantity of reading materials and have an opportunity to borrow reading materials from the institution's library.
5. Inmates in Restrictive Housing receive a minimum of one hour of exercise outside their cells, five days per week, unless security or safety considerations dictate otherwise. [5-4B-0025]

- a) Inmates in Restrictive Housing should be provided with the opportunity to exercise in an area designated for this purpose, with opportunities to exercise outdoors, weather permitting, unless security or safety considerations dictate otherwise.
 - b) A written record should be kept of each inmate's participation in the exercise program. Reasons for imposition of constraints should be documented.
6. Inmates in Restrictive Housing are allowed at minimum telephone privileges to access the judicial process and family emergencies as determined by the facility administrator or designee unless security or safety considerations dictate otherwise. **[5-4B-0026]**
 7. Inmates in Extended Restrictive Housing have access to programs and services that include, but are not limited to the following: educational services, commissary services, library services, social services, behavioral health and treatment services, religious guidance, and recreational programs. **[5-4B-0027]**

E. Status and Release Reviews

1. Inmates in Restrictive Housing will have a status review completed by the classification committee or other authorized staff every seven (7) days for the first 60 days and at least every 30 days thereafter. **[5-4B-0008]**
 - a) A hearing shall be held to review the status of any inmate who spends more than seven (7) continuous days in restrictive housing to determine whether the reasons for the placement still exist.
2. Written policy, procedure, and practice specify the review process used to release an inmate from Restrictive Housing. **[5-4B-0009]**
 - a) The Unit Management Team will review the release of an inmate from Restrictive Housing.
3. Step down programs are offered to Extended Restrictive Housing inmates to facilitate the reintegration of the inmate into general population or the community. These programs shall include, at a minimum, the following:
 - pre-screening evaluation
 - monthly evaluations using a multidisciplinary approach to determine the inmate's compliance with program requirements
 - subject to monthly evaluations; to gradually increasing out-of-cell time to gradually increasing group interaction to gradually increasing education and programming opportunities to gradually increasing privileges
 - a step-down transition compliance review
 - post-screening evaluation **[5-4B-0032]**
4. The agency will attempt to ensure offenders are not released directly into the community from Extended Restrictive Housing. In the event that the release of an offender directly from Restrictive Housing into the community is imminent, the facility will document the

justification and receive agency level or designee approval (does not apply to immediate court order release). In addition to required release procedures the following must be taken at a minimum:

- development of a release plan that is tailored to specific needs of the offender (does not apply to immediate court order release)
- notification of release to state and local law enforcement
- notify releasing offender of applicable community resources
- victim Notification (if applicable/there is a victim) **[5-4B-0030]**



NEW MEXICO CORRECTIONS DEPARTMENT

Secretary
Alisha Tafoya Lucero

CD-141501 Restrictive Housing Placements	Issued: 07/23/15 Effective: 07/23/15	Reviewed: 08/23/19 Revised: 08/23/19
Alisha Tafoya Lucero, Interim Cabinet Secretary		<i>Original Signed and Kept on File</i>

AUTHORITY:

Policy *CD-141500*

- A. Placement of an inmate in Restrictive Housing shall be limited to those circumstances that pose a direct threat to the safety of persons or a clear threat to the safe and secure operations of the facility. The placement of an inmate in Restrictive Housing shall include:
- the relationship between the threat the inmates poses and the behaviors articulated in the policy.
 - the impact that Restrictive Housing may have on medical and mental health conditions exhibited by the inmate and the possible alternatives that may be available to compensate for such conditions.
 - a description of alternatives that may be available to safely deal with the threat posed by the inmate other than restricted housing. **[5-4B-0001]**
1. The placement of an inmate in Restrictive Housing will be documented on the Restrictive Housing Unit Placement form (*CD-141501.1*). The placement form shall state the specific reasons and justification for the placement.
 2. Every three months, every correctional facility shall produce a report that includes:
 - a. the age, gender and ethnicity of every inmate who was placed in restricted housing during the previous three months, including every inmate who is in restricted housing at the time the report is produced;
 - b. the reason restricted housing was instituted for each inmate listed in the report; and
 - c. the dates on which each inmate was placed in and released from restricted housing during the previous three months.The report shall be completed on the Restrictive Housing Quarterly Report form (CD-141500.3) and forwarded to the NMCD Central Office every three months, due on the following dates: January 5th; April 5th; July 5th; and October 5th.

NEW MEXICO CORRECTIONS DEPARTMENT
Restrictive Housing Unit Placement Form

Inmate Name: _____ NMCD#: _____

On (date): _____ at (time) _____

The placement was made for:

- Restrictive Housing (RHU): Must specify the reason for placement
- Pending Transfer to another facility
- An investigation is necessary to determine PBMP eligibility; the investigation will be completed within five (5) working days.
- 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 Restrictive Housing: 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:

Shift Supervisor/Unit Manager (receipt acknowledged) _____
Date

Inmate Signature _____
Time _____
Date

Served by (Staff Member) _____
Time _____
Date

24 HOUR REVIEW (For PHD/TRH Placement only) Release from PHD/TRH Continue PHD/TRH

Specific Justification for Action:

_____ _____ _____

Administrator or Duty Officer _____
Time _____
Date

Cc: Inmate File Records Security
Unit Manager / Seg Administrator

NEW MEXICO CORRECTIONS DEPARTMENT
RHU Transition Plan for Inmates with Serious Mental Disabilities

Written record of the facts and circumstances that necessitated the inmate's placement in restrictive housing:

Written action plan describing how the facility will transition the inmate out of restrictive housing at the earliest opportunity:

Notify the facility's health services administrator in writing that the inmate was placed in restrictive housing :

HSA notified: date _____ time _____ method of notification (must be in writing): _____

NEW MEXICO CORRECTIONS DEPARTMENT
7 and 30 Day Review

NAME	NMCD#	HOUSING UNIT	STATUS

7 DAY REVIEW (For PHD/TRH Placement only) Release from PHD/TRH Continue PHD/TRH
30 DAY REVIEW (For PHD/TRH Placement only) Release from PHD/TRH Continue PHD/TRH

Summary of Evidence:

DECISION: CONTINUE NO YES

Justification:

Unit Management Team or Authorized Group Signatures:

_____ Member Signature	_____ Member Signature
_____ Member Signature	_____ Member Signature

Date of Review:		
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_____ Date _____
 Inmate Signature (acknowledgement of receipt)

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

