

**U.S. Department of Justice** Federal Bureau of Prisons

PROGRAM STATEMENT OPI: CPD/CSB NUMBER: 5538.05 DATE: October 6, 2008

### **Escorted Trips**

/s/

*Approved*: Harley G. Lappin Director, Federal Bureau of Prisons

#### 1. §570.40. PURPOSE AND SCOPE

The Bureau of Prisons provides approved inmates with staff-escorted trips into the community for such purposes as receiving medical treatment not otherwise available, for visiting a critically-ill member of the inmate's immediate family, or for participating in program or work-related functions.

This Program Statement establishes the procedures to be followed when considering an inmate for an escorted trip and details the:

- Guidelines for selecting escort staff.
- Responsibilities of escort staff.
- Instructions for using restraint equipment including the Electronic Custody Control Belt for MAXIMUM custody inmates.

Escorted trips fall within two categories, i.e., medical and non-medical. The need and/or reason for an escorted trip may arise unexpectedly (e.g., to visit a critically-ill family member) or may be planned in advance (e.g., to attend an educational function).

#### a. Summary of Changes

*Directives Rescinded:* P5538.04 - Escorted Trips (12/23/96)

- Language was added to cover the use of restroom facilities by staff on an outside medical escort.
- Language was added to allow the Warden of the Administrative Maximum to approve the use of the Stun Belt for escorted trips.

Federal Regulations from 28 CFR are in bold type. Implementing instructions are in regular type.

- Language was added which indicates when no ISM staff are available after normal duty hours, Correctional Services staff will be responsible for keying in admission and release transactions.
- b. Program Objectives. The expected results of this program are:
- Escorted trips will be available for eligible inmates.
- Escorted trips will be supervised by the correct number and type of employee.
- Appropriate procedures, including those concerning restraint equipment, will be used during all escorted trips.
- The public will be protected from undue risk.
- Application of an Electronic Custody Control Belt will be authorized only:
  - For a MAXIMUM custody inmate who requires greater security than can be afforded through conventional restraints.
  - Where no medical condition precludes its use.
- An Electronic Custody Control Belt will be applied only to prevent escape and/or prevent serious bodily harm and activated only for the purpose of controlling that inmate.
- Lieutenants who apply the Electronic Custody Control Belt and/or escort an inmate wearing an Electronic Custody Control Belt will be properly trained in its application, operation, effectiveness, and follow-up requirements.
- Every incident involving the activation of an Electronic Custody Control Belt will be properly reviewed, documented, and reported.
- Violations of escorted trips will be processed in accordance with regulations.

c. **Pretrial/Holdover Procedures**. Procedures required in this Program Statement apply to pretrial and holdover inmates.

#### 3. §570.41. MEDICAL ESCORTED TRIPS

## a. Medical escorted trips are intended to provide an inmate with medical treatment not available within the institution. There are two types of medical escorted trips.

## (1) *Emergency Medical Escorted Trip.* An escorted trip occurring as the result of an unexpected life-threatening medical situation requiring immediate medical treatment not available at the institution. The required treatment may be on either an in-patient or out-patient basis.

When the inmate's custody level is not readily available at the time of the emergency medical escorted trip, the inmate, for purposes of the escorted trip, shall be considered to have the highest custody level housed at the institution, or be escorted at the Warden's discretion.

## (2) *Non-Emergency Medical Escorted Trip.* A pre-planned escorted trip for the purpose of providing an inmate with medical treatment ordinarily not available at the institution. The required treatment may be on either an in-patient or outpatient basis.

**In-patient.** In-patient treatment occurs when the inmate is admitted to the outside medical facility for care that extends beyond the day of admission.

**Out-patient.** Ordinarily, treatment is considered out-patient when the inmate departs and returns to the institution on the same day (prior to midnight).

P5538.05 10/06/2008 Federal Regulations: bold type. Implementing instructions: regular type.

Emergency out-patient treatment may extend beyond midnight (e.g., left institution at 11:00 p.m. and returned at 3:00 a.m.).

### b. The Clinical Director or designee is responsible for determining whether a medical escorted trip is appropriate.

See Program Statement P6031.01, Patient Care, utilization review procedures.

# c. *Escorted Trip Procedures - Out-Patient Medical Treatment*. A recommendation for an inmate to receive a medical escorted trip is prepared by medical staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden for review. The Warden may approve an inmate for an out-patient medical escorted trip.

Staff seeking approval must complete an Escorted Trip Authorization form (BP-S502.055) and route it and the Inmate's Central File through:

- The Case Management Coordinator (CMC) for screening and clearance.
- The Special Investigative Supervisor/Special Investigative Agent (SIS/SIA), for identifying any STG/management interest group, etc., information.
- The Captain for appropriate action.
- The Unit Manager and the appropriate Associate Warden for review and recommendation.

In making a determination, staff will consider the inmate's suitability for the trip and the degree of supervision necessary.

(1) **Emergency Out-patient.** Approval for an emergency out-patient escorted trip during nonduty hours may be provided by the Administrative Duty Officer (ADO) or, if the ADO is not available, by the Lieutenant on duty.

In an emergency, the Shift Lieutenant may give approval verbally, with paperwork to follow. The approving official during non-duty hours must notify the Warden immediately.

(2) **Non-emergency Out-patient.** Ordinarily, approval for a non-emergency out-patient escorted trip is obtained during regular duty hours.

The ADO may provide approval during non-duty hours. The authority during non-duty hours may not be delegated below the level of the ADO.

An inmate with OUT or COMMUNITY custody may be approved, at the Warden's discretion, for a furlough to obtain local medical treatment not otherwise available at the institution.

See the Program Statement on Furloughs for additional information.

(3) The Regional Director (or Regional Duty Officer if non-duty hours) must be notified of any medical escorted trip for a MAXIMUM custody inmate.

See Section 8 of this Program Statement for additional information.

(4) **Only the Regional Director** may approve any deviation from MAXIMUM custody escort guidelines.

# d. *Escorted Trip Procedures - In-Patient Medical Treatment*. A recommendation for an inmate to receive a medical escorted trip is prepared by medical staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. The Warden may approve an inmate for an in-patient medical escorted trip.

For non-emergency in-patient medical treatment, approval must be given prior to the inmate's transfer to a community medical facility using an Escorted Trip Authorization form (BP-S502.055).

(1) **Transfer to Medical Facility.** When the treatment is expected to extend beyond the day of a transfer, the inmate is considered transferred to the medical facility for in-patient care and the Regional Health Systems Administrator (RHSA) must be notified, ordinarily by the institution Health Services Administrator (HSA).

For a non-emergency medical escorted trip, notification should occur before the transfer has been effected. For an emergency medical escorted trip, this notification may be done after the transfer has occurred.

In all cases, the HSA is to notify the RHSA of the inmate's return to the institution.

(2) **Emergency In-patient.** The ADO may approve an emergency escorted trip for in-patient medical treatment during non-duty hours or, if the ADO is not available, the Shift Lieutenant may approve it.

The approving official during non-duty hours is to notify the Warden and, when applicable, the ADO, as soon as possible.

(3) **Non-emergency In-patient.** Approval for a non-emergency, escorted trip for in-patient treatment may not be delegated below the level of Acting Warden (or ADO).

(4) **Inpatient Admission.** If an escorted trip for medical purposes is expected to result in the inmate's being admitted to a community medical facility for in-patient treatment, these procedures must be followed:

(a) When applicable, the Captain or, in the Captain's absence, the Lieutenant is to contact the contract guard service to arrange for custodial coverage.

Contract guard services **will not be used** with MAXIMUM custody inmates as provided in Section 8. If the inmate is in pretrial status, the U.S. Marshals Service must be contacted to provide custodial coverage.

(b) Unit staff are to complete two sets of Transfer Orders (BP-S399.058). The first is used to transfer the inmate to the medical facility and the second authorizes the inmate's return to the institution. The latter transfer order is to have an open transfer date.

Inmate Systems Management (ISM) staff will produce sufficient copies of the Transfer Receipt (BP-821.051) to establish an appropriate chain-of-custody.

When unit staff are not available, the Lieutenant may prepare a temporary Transfer Order. Unit staff are to complete the required information as soon as possible.

(c) When the inmate returns, ISM staff will complete the "Return of Service" section on the applicable transfer order.

Transfer orders are not required for pretrial inmates; however, a Release Authorization form (BP-S392.058) is to be used as a receipt for custody.

(d) The Captain will develop post orders and log book procedures for correctional officers and contract guard services staff who provide custodial coverage for inmates receiving in-patient medical care to follow.

The designated officers are to sign a statement that indicates their awareness of the required procedures (Escort Instructions, BP-0939.055). (Forms are available on Sallyport.)

Escort officers will maintain the post orders and log book procedures during the community placement for medical purposes and return them to the institution upon completing the escorted medical trip.

Contract guard service providing custodial coverage must meet the requirements set forth in the post orders and log book procedures.

When medical treatment of an inmate is expected to extend beyond one day, only the Warden may approve reduction in restraints below the minimum requirements. When restraints are reduced under these procedures, the escort OIC, as well as the Operations Lieutenant, will document the Warden's approval in their respective official logs.

(5) The Regional Director (or Regional Duty Officer during non-duty hours) is to be notified of any medical escorted trip for a MAXIMUM custody inmate.

See Section 8 of this Program Statement for additional information.

(6) The Regional Director will have approving authority for deviations from MAXIMUM custody escort guidelines.

(7) Only when an inmate is actually released from the institution can overtime for the inmate's security be charged to the outside medical cost center (B325).

The inmate must be released for a visit to a medical consultant or a hospital visit under the SENTRY ARS category of "Local Hosp," or be released on transfer to a Medical Referral Center.

These procedures are necessary for any case in which the inmate is released from the institution even though it may only be for a few hours.

Institutions will not carry these temporary releases in out count status.

(8) The correctional officer(s) receiving overtime pay must provide security for an inmate outside the institution while the inmate is transferred from the institution to the consultant or hospital, or while he or she is transported back to the institution.

An officer may be allowed two hours of outside medical overtime to prepare for the detail.

(9) Medical overtime may not be charged for security provided within the institution, except if a staff member on-duty and assigned to an inside post is the only qualified available person for the outside escort and must be replaced.

(10) When overtime for a medical situation is credited to staff, a copy of SENTRY report Inmate History Inquiry, indicating the inmate's name and number and the time the inmate was in the release status of "Local Hosp," or "Transfer" to a Medical Referral Center, must be attached to the Time and Attendance sheet.

#### 4. §570.42 NON-MEDICAL ESCORTED TRIPS

a. Non-medical escorted trips allow an inmate to leave the institution under staff escort for approved, non-medical reasons.

There are two types of non-medical escorted trips.

(1) *Emergency Non-Medical Escorted Trip.* An escorted trip for such purposes as allowing an inmate to attend the funeral of, or to make a bedside visit to, a member of an inmate's immediate family. For purposes of this rule, immediate family refers to mother, father, brother, sister, spouse, children, step-parents, and foster parents.

(2) *Non-Emergency, Non-Medical Escorted Trip.* An escorted trip for such purposes as allowing inmates to participate in program-related functions, such as educational or religious activities, or in work-related functions.

b. *Escorted Trip Procedures - Emergency Non-Medical Reasons*. Unit staff are to investigate, and determine, the merits of an escorted trip following a review of the available information. This includes contacting those persons (e.g., attending physician, hospital staff, funeral home staff, family members, U.S. Probation Officer) who can contribute to a determination on whether an escorted trip should be approved.

(1) The government assumes the salary expenses of escort staff for the first eight hours of each day. All other expenses, including transportation costs, are assumed by the inmate, the inmate's family, or other appropriate source approved by the Warden.

The necessary funds must be deposited to the inmate's trust fund account prior to the trip. Funds paid by the inmate for purposes of the escorted trip are then drawn, payable to the Treasury of the United States. Unexpended funds are returned to the inmate's trust fund account following the completion of the trip.

Unit staff, in consultation with the Business Office, will determine the escorted trip's cost. The inmate is to complete a BP-199 form payable to the U.S. Treasury in the amount of the expenses to be paid by that inmate.

(2) A request for an inmate to receive an emergency non-medical escorted trip is prepared by unit staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. Except as specified in §570.43, the Warden may approve an inmate for an emergency non-medical escorted trip.

§570.43 refers to Section 8 of this Program Statement.

Unit staff, after obtaining the required information, will route the Escorted Trip Authorization form (BP-S502.055) and the Inmate Central File through the:

- CMC for screening and clearance.
- Captain for appropriate action.
- SIÂ/SIS for identifying any STG/management interest group, etc., information.
- Unit Manager and the Associate Warden for review and recommendation.

In making a determination, staff will consider the inmate's suitability for the trip and the degree of supervision necessary.

The ADO may grant approval for an emergency non-medical escorted trip during non-duty hours. This authority will not be further delegated.

c. *Escorted Trip Procedures - Non-Emergency, Non-Medical Reasons*. This type of escorted trip is considered for an inmate who has been at the institution for at least 90 days, and who is considered eligible for less secure housing and for work details, under minimal supervision, outside the institution's perimeter.

A recommendation for an inmate to receive an escorted trip for non-emergency, non-medical reasons is prepared by the recommending staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. Except as specified in §570.43, the Warden may approve an inmate for a non-emergency, non-medical escorted trip.

§570.43 refers to Section 8 of this Program Statement.

Ordinarily, escorted trips for emergency, non-medical cases are available only to inmates with either OUT or COMMUNITY custody. The requesting department will submit the Escorted Trip Authorization form (BP-S502.055).

For the review procedure, see Section 6.b.(2) of this Program Statement.

Specific arrangements for inmate town drivers may be established locally.

Approval for a non-emergency, non-medical escorted trip may not be delegated below the level of Acting Warden.

### 5. §570.43. INMATES REQUIRING A HIGH DEGREE OF CONTROL AND SUPERVISION

#### Only the Regional Director may approve a non-medical escorted trip (either emergency or non-emergency) for an inmate determined to require a high degree of control and supervision.

a. The Regional Director's approval authority may not be delegated below the level of Acting Regional Director.

b. The phrase "a high degree of control and supervision" ordinarily refers to an inmate with MAXIMUM custody or HIGH security.

P5538.05 10/06/2008 Federal Regulations: bold type. Implementing instructions: regular type.

The Regional Director may approve escorted trips for emergency and non-emergency, nonmedical reasons only upon receiving a favorable Warden's recommendation and his or her determination that the escorted trip is warranted.

In making this determination, all relevant information (e.g., inmate's sentence, time in custody, adjustment, as well as the nature of the request) must be considered. The Regional Director will maintain a written record, including reasons, for regional approval.

c. The Regional Director's prior approval is not necessary for an inmate requiring a high degree of control and supervision to receive an emergency medical escorted trip.

However, during non-duty hours, the Regional Director, or Regional Duty Officer must be notified as soon as possible of any medical escorted trip for a MAXIMUM custody inmate.

#### 6. §570.44. SUPERVISION AND RESTRAINT REQUIREMENTS

Inmates under escort will be within the constant and immediate visual supervision of escorting staff at all times. Restraints may be applied to an inmate going on an escorted trip, after considering the purpose of the escorted trip and the degree of supervision required by the inmate.

### Except for escorted trips for a medical emergency, an inmate going on an escorted trip must agree in writing to the conditions of the escorted trip (for example, agrees not to consume alcohol).

The escort OIC has the discretion to terminate an escorted trip (without contacting the institution) in circumstances where staff, the public or the inmate is at risk of immediate serious injury or death, or the inmate is attempting to or has demonstrated the intent and/or means to effectuate an escape.

Escort staff will contact the institution (i.e., the Operations Lieutenant or Captain) for guidance prior to terminating all other escorted trips. Any escorted trip which is terminated (by supervisor's instructions or by the escort OIC's decision), requires a written justification by the staff member canceling the escorted trip. This justification will be reviewed to ensure compliance with policy, and to determine if further action is needed (e.g., training, alternative escort locations, procedures, etc).

When arrangements are necessary for a staff member to use a restroom, additional restraints must be applied. The remaining staff must apply additional restraints before the staff member leaves the area and must continue constant visual supervision. Staff will leave the area only to use the nearest restroom facility.

For those institutions using escort staff with OUT or COMMUNITY custody inmates, the institution will make prior arrangements to address the security and supervision of the inmate, in the event it is necessary for staff to use the restroom.

An escorted trip merely extends the limits of an inmate's confinement.

Prior to an escorted trip, escort staff will be provided preparation time and are expected to read both this Program Statement on Escorted Trips and Chapter 7 of the Correctional Services Procedures Manual and are required to sign the Escort Instructions (BP-0939.055). This form also establishes the minimum requirements on using restraints. (Forms are available on Sallyport.)

All non-medical escorted trips, such as bedside visits and funeral trips, require the use, throughout the escorted trip, of at least the minimum restraints specified in the Escort Instructions. No exceptions will be made.

Except for medical emergency trips, the inmate must sign the Conditions of Escorted Trip (BP-0938.055). (Forms are available on Sallyport.)

#### 7. WITNESS SECURITY INMATES

Except for emergency medical escorted trips, prior authorization must be received from the Inmate Monitoring Section (IMS), Central Office, for a witness security inmate to go on an escorted trip.

In emergency medical situations, the inmate will be transported to the nearest medical facility in accordance with local procedures.

During normal working hours, the IMS must be notified as soon as possible by telephone. After normal working hours, the Central Office Duty Officer should be notified for further contact with the IMS Duty Officer.

Direct questions concerning this section to the institution's Case Management Coordinator.

#### 8. §570.45. VIOLATION OF ESCORTED TRIP

a. Staff shall process as an escapee an inmate who absconds from an escorted trip.

b. Staff may take disciplinary action against an inmate who fails to comply with any of the conditions of the escorted trip.

#### 9. SELECTION OF ESCORTS

The Captain, in consultation with the HSA, the Unit Manager, or others, as appropriate, selects the appropriate number of escorting staff.

The Captain will indicate, on the approval form, the specific staff member (ordinarily, the escort staff member with the highest correctional services rank), who will serve as the Officer-In-Charge (OIC). Where staff are non-custody, the Captain will indicate which staff member is the OIC. This person will have decision-making authority and responsibility while on the escorted trip.

Depending on the inmate's custody and other conditions the Warden imposed, the requirements outlined below apply. The designated staff, weapons, and restraint requirements for an escorted trip are to remain in effect while the inmate is in in-patient status. This provision also applies to contract guard services.

For MAXIMUM custody inmates, any deviation from the requirements listed requires the Regional Director's prior approval.

Escorts who carry weapons will abide by the requirements of Chapter 7 of the Correctional Services Procedures Manual, Firearms and Badges. Restraint requirements will be in accordance with the Correctional Services Manual.

Escort staff must be certified in Basic Prisoner Transportation (BPT) training.

An inmate who is in labor, delivering her baby, or is in post-delivery recuperation, or who is being transported or housed in an outside medical facility for the purpose of treating labor symptoms, delivering her baby, or post-delivery recuperation, should not be placed in restraints unless there are reasonable grounds to believe the inmate presents an immediate, serious threat of hurting herself, staff or others, or there are reasonable grounds to believe the inmate presents an immediate and credible risk of escape that cannot be reasonably contained through other methods.

If an inmate who is in labor or is delivering her baby is restrained, the restraints used must be the least restrictive restraints necessary to still ensure safety and security. The Captain, in consultation with the HSA, will determine the least restrictive restraints necessary. The Escorted Trip Authorization form (BP-S502.055) will reflect the restraints to be used (Part E, section 20) as well as the factors used to support the decision (Part C, section 18).

During unusual medical or "life-threatening" circumstances, the Warden, after consulting with the Captain and the HSA, will consider all factors concerning the type(s) of restraints that may be necessary to meet the security needs for the inmate. An example of such a circumstance includes transporting inmates with fractured limbs or serious neck injuries.

When similar factors are present, the Warden will balance the inmate security needs with his or her medical requirements.

The existence of unusual factors may cause the Warden or designee to:

- Not use all required restraints.
- Increase staff escorts.
- Consider authorizing the use of a weapon, or wheelchair, or soft or vinyl restraints, or chase vehicle, etc.

Should it be necessary to deviate from the norm, the Escorted Trip Authorization form (BP-S502.055), must reflect those factors used to support the decision.

a. MAXIMUM Custody. Contract guard services may not be used.

(1) **Staffing.** A minimum of three staff escorts are required for each inmate with one staff member holding the rank of at least GS-11 Lieutenant. In addition to the three staff with the inmate, there must also be staff in a back-up car (follow vehicle). It is recommended that two staff occupy the back-up car.

The staff-inmate ratio will be maintained regardless of the number of inmates supervised. At least one of the staff escorts, in addition to the Lieutenant, must be a non-probationary staff member.

(2) **Weapons.** At least one staff escort must be armed. Staff in the follow vehicle must also be armed. It is recommended that staff carry three fully loaded magazines of ammunition with each weapon, in addition to the magazine in the weapon.

(3) **Restraints.** Handcuffs with the C&S handcuff cover, martin chains, padlock, and leg restraints will be used at all times.

Refer to Section 12 above, for considerations when escorting pregnant inmates.

(4) **Protective Vests.** Staff members involved in escorting MAXIMUM custody inmates must wear protective vests (threat level III-A at a minimum).

b. **IN Custody.** Contract guard services may be used for IN custody inmates who are MINIMUM or LOW security levels.

Contract guard services will not be used for MEDIUM and HIGH security inmates.

(1) **Staffing.** A minimum of two staff escorts for the first inmate, with one additional staff member are required for each additional inmate. The Warden may require an additional number of escorts if he or she determines it is warranted. At least one of the staff escorts must be a non-probationary staff member.

(2) **Weapons.** The Warden is to determine if the escorting staff will be armed. If weapons are authorized, a minimum of two staff escorts are to escort IN custody inmates, with at least one staff member armed.

(3) **Restraints.** Handcuffs with martin chains will be used at all times. Other restraint equipment may be used at the escorting officers' discretion. Refer to Section 12 above, for considerations for escorting pregnant inmates.

(4) **Protective Vests.** Staff members involved in escorting IN custody inmates will wear protective vests (threat level III - A at a minimum), when the escort requires weapons.

c. **OUT Custody.** Contract guard services may be used.

(1) **Staffing.** At least one non-probationary staff member. One staff member may escort a maximum of five OUT custody inmates.

(2) Weapons. No weapons are required.

(3) **Restraints.** Restraint equipment may be used at the discretion of the escorting officer(s). Refer to Section 11 when escorting pregnant inmates.

d. COMMUNITY Custody. Contract guard services may be used.

(1) **Staffing.** At least one non-probationary staff member. One staff member may escort a maximum of five COMMUNITY custody inmates.

(2) Weapons. No weapons are required.

(3) **Restraints.** No restraints are required.

#### e. Other Considerations:

• At least one staff member of the same sex as the inmate will be assigned to escort inmates with IN, OUT, COMMUNITY, or MAXIMUM custody.

P5538.05 10/06/2008 Federal Regulations: bold type. Implementing instructions: regular type.

- Privately owned vehicles will not be used for escorted trips.
- Inmate movement from institution to institution by means other than a bus (e.g., van movements), will be conducted in the manner outlined in this Program Statement. Therefore, the staffing requirements for an escorted trip would pertain to the movement of the inmates.

#### 10. AUTHORIZATION FOR USING A CUSTODY CONTROL BELT

Electronic Custody Control Belts (e.g., REACT, Band-it) are approved for use with MAXIMUM custody inmates.

Only the Warden of an ADMAX, High, or Administrative security level institution or his or her designee may approve using an Electronic Custody Control Belt. The approving official will authorize using the belt only after determining that an inmate requires greater security than is afforded through conventional restraints and the inmate has no medical condition precluding its use.

a. Use of Other Restraints. The custody control belt is not intended for use in lieu of conventional restraints, but must be used in addition to such restraints.

Escorting staff may reduce minimum restraint requirements only if the Warden has given specific prior approval.

While the custody control belt is intended to provide a less-lethal security option for High-Risk escorts, in the interest of general safety, staff are to follow the requirements on the Use of Deadly Force contained in chapter 7 of the Correctional Services Procedures Manual, Firearms and Badges.

It is Bureau policy to use Electronic Custody Control Belts to prevent escapes or to prevent the loss of life or grievous bodily harm.

(1) **Escape Prevention.** The custody control belt may be used to prevent an escape. In the event of an attempted escape, verbal orders to halt will be given first to the inmate wearing the belt. When the inmate fails to halt immediately, the belt will be activated. If the inmate has escaped and is out of view of the escorting officer, a verbal warning to halt is not necessary.

This does not preclude, in certain circumstances, using deadly force, which may or may not be used without activating the custody control belt. This will be in accord with chapter 7, Firearms and Badges, of the Correctional Services Procedures Manual.

(2) **Preventing the Loss of Life or Grievous Bodily Harm.** Staff may use the custody control belt when there is a reasonable belief that the escorted inmate's actions are likely to result in the loss of life or grievous bodily harm to staff, inmates, or others.

The escort detail's OIC must exercise sound judgment when making a decision to activate the custody control belt. Verbal orders are not required if the staff member reasonably believes a danger of death or grievous bodily harm is imminent.

b. Authorized Official. The OIC of any escort detail when the Electronic Custody Control Belt is used must be a GS-11 Lieutenant trained in its use.

Training will encompass either training by a vendor representative of the Electronic Custody Control Belt or a Bureau employee whom a vendor representative has certified to provide this training. The Employee Services Manager will document training.

Only the escort detail's OIC may carry and use the activating device for the belt. Only after mandatory "Electronic Custody Control Belt Training" may a GS-11 Lieutenant serve as the OIC, or as a member of a team escorting an inmate approved to wear the custody control belt.

Prior to applying the custody control belt, the OIC must complete the Custody Control Belt Documentation form (BP-S599.055). The justification for the approval to use the control belt must be documented in detail on the Escorted Trip Authorization form (BP-S502.055).

#### 11. USING A CUSTODY CONTROL BELT

a. **Medical Staff Review.** When medical staff review the Escorted Trip Authorization form, a specific indication should be made for each MAXIMUM custody inmate as to whether any medical condition exists that would preclude using a custody control belt. The custody control belt provides a less lethal security option for high-risk escorts. Disqualifying medical situations include, but are not limited to:

- Pregnancy.
- Heart disease.
- Multiple sclerosis.
- Muscular dystrophy.
- Epilepsy.

Only a health services professional (Physician, Physician Assistant, or Nurse Practitioner) may be authorized to conduct this review, which will include a review of the Inmate's Health Record and other available documentation at the institution.

b. **Inmate Notification.** Prior to applying the custody control belt, the inmate will be advised by the OIC the belt is going to be placed on him or her, and under what circumstances it can be activated. This is done by allowing the inmate to read, or have read to him or her, the Inmate Notification form (BP-S600.055).

If possible, the inmate will be given the opportunity to sign the notification form. However, if this is not possible or if the inmate refuses, staff will document this refusal on the form.

#### 12. CUSTODY CONTROL BELT REPORTING REQUIREMENTS

If the custody control belt is activated while being worn by an inmate, the escort detail OIC will notify the approving Warden or his or her designee as soon as possible.

a. **Medical Examination.** Medical staff will examine the inmate as soon as possible after activation of the custody control belt and document that examination in the Inmate's Health Record. Any injuries, bruises, or marks on the inmate's body will be documented via photograph or videotape, which the Captain must retain.

When this examination may not be possible (e.g., lengthy escorted trip), escorting staff will proceed to a local medical facility for medical examination and possible treatment.

b. **OIC Reports.** The OIC will submit both a written report and page 2 of the Custody Control Belt Documentation (BP-S599.055) to the Warden whenever the custody control belt is activated while worn by an inmate. These reports must be submitted prior to the end of the OIC's tour of duty.

c. Use of Force Reports. Consistent with the Program Statement on Use of Force and Application of Restraints, both the Report of Incident (BP-583.055), and the After-Action Review Report form (BP-.586.055), will be completed and routed accordingly.

d. **Reports to Regional and Central Office.** The Warden will submit a full written report of an incident involving activation of the belt to the Regional Director within 24 hours. Copies of this report will be sent to the Assistant Director, Correctional Programs Division, and the Assistant Director, Health Services Division.

#### 13. TRAINING RESPONSIBILITIES

a. **Electronic Custody Control Belt**. The Correctional Services Administrator, Central Office, in conjunction with the Management and Specialty Training Center, will provide training regarding the Electronic Custody Control Belt. This will also be provided at each institution where the custody control belt is authorized.

The Warden at each High and Administrative security level institution is responsible for ensuring that only GS-11 Lieutenants who have been properly trained and certified with the Electronic Custody Control Belt's application, operation, effectiveness, and follow-up requirements are authorized to apply the belt.

b. **Escorted Trip**. The Captain at each Bureau institution is responsible for ensuring that all staff escorts are trained in accordance with this Program Statement.

#### 14. PROGRAM REVIEW RESPONSIBILITIES

The Program Review Division, Correctional Services Branch, will review the Escorted Trip Program. The Warden may select appropriate staff to conduct periodic internal reviews.

#### **15. SENTRY RESPONSIBILITIES**

ISM staff are responsible for entering admission and release transactions. After normal duty hours, if no ISM staff are available Correctional Services staff will assume the responsibility to complete these transactions.

#### 16. CONFIDENTIALITY

Except in unusual circumstances, inmates scheduled for an escorted trip may not be advised of the:

- Time.
- Date.
- Method of travel.
- Destination.

#### REFERENCES

#### **Program Statements**

- P5100.08 Security Designation and Custody Classification Manual (9/12/06)
- P5180.05 Central Inmate Monitoring System (12/31/07)
- P5280.08 Furloughs (2/4/98)
- P5500.11 Correctional Services Manual (10/10/03)
- P5500.12 Correctional Services Procedures Manual (10/10/03)
- P5540.06 Prisoner Transportation Manual (4/20/00)
- P5566.06 Use of Force and Application of Restraints on Inmates (11/30/05)
- P6031.01 Patient Care (1/15/05)
- P7331.04 Pretrial Inmates (1/31/03)

#### Federal Regulations

Rules cited in this Program Statement: 28 CFR 570.40 through 570.45.

#### ACA Standards

- 4th Edition Standards for Adult Correctional Institutions: 4-4189, 4-4190, 4-4199, 4-4204 (M), 4-4348, 4-4349, and 4-4445
- 4th Edition Performance Based Standards for Adult Local Detention Facilities: 4-ALDF-1B-06, 4-ALDF-2B-02, 4-ALDF-2B-04, 4-ALDF-2B-08 (M), 4-ALDF-4C-05, 4-ALDF-4C-06
- 2nd Edition, Standards for Administration of Correctional Agencies: None

#### **Records Retention**

See the Records and Information Disposition Schedule (RIDS) system on Sallyport.

#### Forms

After-Action Review Report form (BP-586.055) Conditions of Escorted Trip (BP-0938.055) Electronic Custody Control Belt Documentation (BP-S599.055) Escort Instructions (BP-0939.055) Escorted Trip Authorization form (BP-S502.055) Request for Withdrawal of Inmate's Personal Funds (BP-199.045) Inmate Notification of Electronic Custody Control Belt Use (BP-S600.055) Release Authorization (BP-S392.058) Report of Incident (BP-583.055) Transfer Orders (BP-S399.058) Transfer Receipt (BP-821.051)