

WICHITA TRANSITIONAL CENTER

Residential Re- entry Center

RESIDENT HANDBOOK

01/2022

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INTRODUCTION

Necesita asistencia en español, contamos con personal de habla hispana que están disponibles para responder preguntas. Formularios de admisión.

Welcome to the Wichita Transition Center (WTC). While you are here, we will do all we can to make this an opportunity for you to help yourself. By accepting the challenge, you will find this can be the place to learn new and better ways to live your life. We have sought to establish a program that is responsible to both the resident and community needs.

This handbook is designed to provide you with an understanding of the operations of this program. It is vital that you read and familiarize yourself with the contents of this handbook. Upon arrival, you will attend an orientation session, which will answer any questions you might have. FROM THE DAY YOU ARRIVE, YOU WILL BE HELD RESPONSIBLE FOR FOLLOWING ALL FACILITY POLICIES, RULES AND PROCEDURES.

Failure or refusal on the part of a resident to comply, participate or complete any of the above expectations may result in an unsuccessful discharge from the program and the reporting of such failure or refusal to the appropriate governing authority.

Daily activities follow a set schedule from initial wake-up call to lights out time. Residents are expected to fully participate in all community activities, attend all group sessions, meetings, seminars and classes, as well as perform their community support duties as may be assigned. Staff members facilitate the progress of residents' through a system of privileges, consequences and assignments. *Privileges* are earned by residents as they progress through the program and as the resident establishes a level of participation and responsibility equivalent to privileges desired. *Consequences* are handed down as a result of a resident's failure or refusal to comply with rules, regulations or program or transitional plan requirements.

For safety, security, or sanitation reasons, the rules and policies of this handbook may change. The facility reserves the right to make changes as needed from the United States Department of Justice Bureau of Prisons (BOP). It is our correctional philosophy that everyone should be treated with respect. It is our objective to see that you are treated humanely and given the assistance you need to reintegrate yourself back into society. You are expected to treat each other and the staff here with respect. This begins by you observing the rules and regulations in this handbook.

This handbook supersedes and replaces all other previous versions.

FACILITY STAFF

Facility Administrator
Lead Case Manager
Employment Specialist
Case Manager
Guard Supervisor
Guard
Accounting Clerk
Maintenance Technician

Chain of Command

Should questions or problems arise, all residents should follow the proper chain of command. It is, from lowest to highest, as follows:

ADMISSION

INTAKE/ORIENTATION

All residents and resident property will be searched immediately upon arrival.

A complete orientation and intake screening will be provided to each resident, including information regarding the Grievance Procedure, Disciplinary Procedure, and each resident will be provided a copy of the Resident Handbook within 24 hours of arrival.

Residents will be assigned to a room and issued linens.

Residents will be issued a facility identification card and sign an acknowledgement of ID card rules.

Residents will meet with Intake staff and complete releases and acknowledgement necessary for admission. Failure or refusal to sign these documents will result in a complete restriction.

CASE MANAGEMENT

Case Management intakes will be held within 24 hours of a resident's arrival, excluding weekends and holidays.

All residents will meet with their Case Manager for assessment and referrals to:

- Medical services
- Psychological services
- Affordable housing
- Family reintegrating
- Government assistance (SS, DARS, etc.)
- HIV services
- Other community resources as needed

EMPLOYMENT

New residents will be required to actively participate in an assessment of their employment skills, and a pre-employment workshop within five (5) working days.

RESIDENT RIGHTS

The facility and its employees will respect and protect resident rights. The Bill of Rights for all residents assigned to the facility will include the following:

- The right to a humane environment that provides reasonable protection from harm and appropriate privacy for personal needs.
- The right to be free from abuse, neglect, and exploitation.
- The right to be treated with dignity and respect.
- The right to be told about the program's rules and regulations before admission.
- The right to an individual program plan designed to meet resident's needs, and the right to take part in developing that plan.
- The right to meet with staff to review and update the plan on a regular basis.
- The right to refuse to take part in research without affecting regular care.
- The right to not be the subject of corporal or unusual punishment, humiliation, mental abuse, or punitive interference with the daily functions of living, such as eating or sleeping.
- The right not to be discriminated based on an offender's race, religion, national origin, gender, disability, creed, political view.
- The right not to be restrained or placed in a locked dorm alone unless the resident is a danger to themselves or others.

- The right to have personal information about you kept private and to be told about the times when the information can be released without permission.
- The right to communicate with people outside the facility. This includes the right to have visitors, to make telephone calls, and to send and receive sealed mail. The right may be restricted on an individual basis by the person in charge of the program if it is necessary for the resident's welfare or for security, but even then, the resident may contact an attorney or their supervising agency at any reasonable time.
- The right to receive an explanation of resident's rights and to have these rights explained in simple terms, in a way the resident can understand, within twenty-four (24) hours of being admitted.
- The right to make a complaint and receive a fair response from the facility within a reasonable amount of time.
- The right to complain directly to the Bureau of Prisons, United States Probation Office, and/or Pre-Trial Services any reasonable time.

A legible copy of resident rights will be posted in prominent locations (e.g., common areas, all meeting rooms) where residents have the opportunity to read it at their leisure. A legible copy of resident rights will be contained within the resident handbook that the resident will receive during orientation. Additionally, at any time throughout the span of assignment, upon request of the resident, he/she will receive an explanation of resident rights.

ACCESS TO COURTS, COUNSEL AND PUBLIC OFFICIALS

Every resident has the right of access to state and federal courts, and to legal counsel and public officials and agencies. Residents may present any issue, redress for improper conditions, remedies for civil law problems, claims against staff and other governmental authorities, and other rights protected by constitutional or statutory provisions or by common law. Residents may confer or correspond about legal matters and have the right of access to attorneys and their authorized representatives, including paralegal, law students, investigators, and other assistants to counsel. Staff will ensure and facilitate access to counsel and assist residents in making confidential contact with attorneys and their authorized representatives; such contacts may include but are not limited to, telephone communications, correspondence and visits.

No staff member, employee or agent of CSG may interfere with, harass, punish or otherwise penalize any resident as a result of the resident gaining access to courts, counsel or public officials.

ACCESS TO PROGRAMS AND SERVICES

All decisions made regarding a resident's assignment to program services, work assignments, dorm assignments and other administrative decisions shall be made without regards to the resident's race, religion, national origin, sex, handicap or political views. Should the facility house male and female residents, separate sleeping quarters, but equal access to available services and programs, will be provided. Neither male nor female residents will be denied opportunities solely on the basis of their numbers within the resident population.

ACCESS TO MEDIA

Residents shall have access to communicate with media officials, subject to the limitations necessary to protect resident privacy. Media requests to interview residents and the resident's consent to be interviewed, shall be in writing, except in emergencies.

UNREASONABLE SEARCHES

Residents shall be protected from unreasonable searches. Searches of residents and personal property will be in accordance with approved search policy and procedures and/or with the approval of the facility management unless immediate action is necessary; in such cases the approving authority or designee shall be fully informed of the circumstances as soon as possible after the completion of the search. All residents are subject to the following searches:

- ✓ pat search
- ✓ strip search (after prior approval has been obtained from supervising agency representatives)

- ✓ dormitory search
- ✓ general area search
- ✓ property search
- ✓ vehicle search

All residents are expected to comply with requests of staff and are required to submit to any of the above searched without incident.

PRISON RAPE ELIMINATION ACT (PREA)

In September of 2003, the Prison Rape Elimination Act (PREA) was signed into law. PREA is a federal mandate of “Zero Tolerance” to sexual assaults on a national forum. PREA is the first national law to be passed addressing sexual assault behind bars. The law was passed unanimously and quickly by both Houses of Congress and signed into law by President George W. Bush. Some of the components of PREA include: establishing a zero-tolerance standard for the incidence of rape in prisons in the United States; make the prevention of prison rape a top priority in each prison system; develop and implement national standards for the detection prevention, reduction, and punishment of prison rape; and increase the availability of data and information about the incidence of prison rape.

ZERO TOLERANCE POLICY

The WTC has a “Zero-Tolerance” policy concerning the detection, prevention, and punishment of the sexual abuse and sexual harassment, including consensual sexual contact, of offenders in the custody of CSG. As a resident of WTC you have the right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents.

What is Sexual Assault?

- Sexual assault is a crime
- Anytime another resident sexually touches you, forces you to touch the sexual parts of their body, or has sex with you without you’re ok, or forces you to have sex with someone else without you’re ok, it is sexual assault.
- Anytime a staff member sexually touches you or has sex with you it is against the law. Even if you wanted or invited the staff person, the staff person is not allowed to respond.
- Anytime a staff member makes sexual advances, engages in a relationship with a resident, or prevents anyone from reporting a PREA incident it is against CSG policy and is not tolerated.
- It is also against policy for you or a staff member to make sexual related comments to another person. This is called sexual harassment.
- It is also against the law for you to sexually touch a staff member or force them to touch you.

There are exemptions for touches that may be necessary, such as for medical care and routine searches.

Definitions Related to Sexual Abuse

- 1. Sexual Abuse by another resident** includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:
 - a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - b. Contact between the mouth and the penis, vulva, or anus;
 - c. Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and,

- d. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person, excluding contact incidental to a physical altercation.

2. Sexual Abuse by an Employee, Contractor, or Volunteer includes:

- a. Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
- b. Contact between the mouth and the penis, vulva, or anus;
- c. Contact between the mouth and any body part where the Employee, Contractor, or Volunteer has the intent to abuse, arouse, or gratify sexual desire;
- d. Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the Employee, Contractor, or Volunteer has the intent to abuse, arouse, or gratify sexual desire;
- e. Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks that is unrelated to official duties or where the Employee, Contractor, or Volunteer has the intent to abuse, arouse, or gratify sexual desire;
- f. Any attempt, threat, or request by an Employee, Contractor, or Volunteer to engage in the activities described in paragraphs (a) – (e) of this section;
- g. Any display by an Employee, Contractor, or Volunteer of his or her uncovered genitalia, buttocks, or breast in the presence of an Individual in a CSG facility or Program, and, Voyeurism by an Employee, Contractor, or Volunteer.

3. Sexual Harassment includes:

- a. Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one resident directed toward another; and,
- b. Repeated verbal comments or gestures of a sexual nature to a resident by an Employee, Contractor, or Volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

4. Voyeurism by an Employee, Contractor, or Volunteer means an invasion of privacy of a resident by staff for reasons unrelated to official duties, such as peering at a resident who is using a toilet or in his or her housing area to perform bodily functions; requiring a resident to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a residents naked body or of a resident performing bodily functions.

Examples of sexual abuse

- Rape.
- Someone forcing you to have sex with them or another person to repay a debt.
- Someone offering you protection in exchange for sex.
- A staff person offering you a privilege or a favor in exchange for sex.
- Intentional sexual touching, including directly or through the clothing.

Occurs without a resident's consent; OR when a resident is unable to consent or refuse.

Examples of sexual harassment

Deliberate or repeated statements of a sexual nature including:

- Demeaning references to gender.
- Derogatory comments about body or clothing.
- Repeated profane or obscene language or gestures.

What to do if you've been assaulted or if sexual misconduct has occurred.

- Get to a safe place.
- Even if you want to clean up immediately after the assault, it is important to save any evidence.
- Don't use the bathroom, brush your teeth, shower, change your clothes, or eat. Save sheets and any clothing that was involved in the incident.
- Evidence may be able to be gathered from your body and your clothing.

REPORTING SEXUAL ASSAULTS

Staff

Due to the serious nature of sexual abuse/sexual harassment, any staff member knowledgeable of an offender-on-offender or staff-on-offender sexual assault that occurs within the ETC is required to immediately report the allegation to unit administration in accordance with agency policies.

Residents

Residents of the ETC may report allegations of sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse/harassment, or staff neglect or violation of responsibilities that may have contribute to incidents of sexual abuse/harassment. Residents may submit their report of these concerns in writing, or verbally, to facility staff, facility administrator, or CSG's PREA Coordinator. In addition, offenders may report allegations of sexual abuse and sexual harassment retaliation, or staff neglect/violation of responsibilities, through the facility's grievance process.

Residents may also report abuse or harassment to a public or private entity or office that is not part of CSG and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to CSG officials, allowing the resident to remain anonymous upon request. Residents may make these reports to the National Sexual Assault Hotline, the Local Rape Crisis Center, or the state's PREA Ombudsman Office. You don't need to have any evidence to report that an assault happened. You can report an assault anytime: right after it happened or weeks later. Tell ANY staff person (counselor, teacher, chaplain, volunteer, nurse, etc.). Talk to any staff member you trust. You cannot be punished for reporting sexual abuse or sexual harassment.

We will work with you to keep you safe. If the allegation is substantiated, we will keep you separated from the perpetrator throughout your incarceration.

All staff is required to report the allegation / incident to Facility Directors which will start the investigation process. This includes medical and mental health care providers. EVERY report is investigated. We take all allegations of sexual assault seriously. We will conduct a thorough investigation and all perpetrators will be held accountable. We will do our best to keep the information you report as confidential as we can while conducting our investigation. We expect the same of all residents involved in the investigation (alleged victims, suspects, and witnesses). We will also ensure you receive a referral to mental health services for follow up treatment and counseling.

Family and Friends

Family and Friends of offenders at WTC, may report allegations of sexual abuse or sexual harassment to the same persons in which residents report allegations. They may also report allegations through CSG's website at www.csprograms.com

Reporting Allegations

Provide all known information pertinent to the allegations to include the following, if known:

1. The names and locations of alleged persons involved.
2. The name of any witnesses to the alleged incident; individual's number (if known)
3. A brief description of the alleged incident
4. Date, time and location of where the alleged incident occurred.
5. Reporting person's contact phone number and address if you wish to do so.

An investigation is conducted by facility management and the PREA Coordinator upon receipt of allegations of sexual abuse and sexual harassment. The investigation will commence immediately

See Grievance Procedure below for further PREA information of sexual abuse and sexual harassment

REPORT SEXUAL ABUSE OR SEXUAL HARASSMENT:

Due to the serious nature of sexual assaults, anyone knowledgeable of an offender-on-offender or staff-on-offender sexual assault that occurs within a BOP correctional facility is encouraged to immediately report the allegation to:

CSG's PREA COORDINATOR

Carrol Powell

P.O. Box 7760

Tyler, TX 75711

(903) 630-6291 X301

www.csgprograms.com

Wichita Area Sexual Assault Center

355 N. Waco, Suite 100 Wichita, KS 67202

(316) 263-3002

National Sexual Assault Hotline

1-800-656-4673 toll free

The facility resident phone system is a regular phone system, not an inmate phone system (monitored call system), therefore calls to any of the above organizations are not monitored. Calls made to National Sexual Assault Hotline for outside victim advocate support or to report sexual abuse/sexual harassments are free through their toll-free number.

Administrative Remedies Procedures

It is the policy of Correctional Solutions Group, LLC to provide all residents with an administrative means for the resolution of complaints and the identification of potentially problematic management areas within facilities. This administrative means shall provide residents with a method for the resolution of complaints arising from institutional matters, so as to reduce the need for litigation and afford management, supervisory and front-line staff with the opportunity to improve facility operations. All residents will be given a copy of the BOP Administrative Remedy Policy by staff during orientation and will have the process explained in clear, simple terms, which the resident understands. Further upon the resident acceptance into the program the resident will be advised that they can:

- file a grievance about any violation of resident rights;
- file a grievance with any staff member;
- have personal access to the Facility Director and / or the supervising agency at some point in the grievance process;
- submit a grievance in writing and get help writing it if they are unable to read or write; and
- request pens, paper, envelopes, postage, and access to a telephone for the purpose of filing a grievance.

A legible copy of the Administrative Remedy procedure is prominently posted on each resident bulletin board and is included within the handbook so as to allow residents the opportunity to read this procedure at their leisure. Additionally, administrative remedy forms are specifically made available in each activity meeting area for easy resident accessibility.

It is the strict policy of Correctional Solutions Group, LLC that no facility, staff member, volunteer, etc., shall discourage, intimidate, harass, or seek retribution against any resident (s) who try to exercise their rights to file a grievance. Further, the facility or any of its staff shall not restrict, discourage, or interfere with resident communication with an attorney or with supervising agency representatives for the purposes of filing a grievance.

FILING OF COMPLAINTS

Correctional Solutions Group, LLC is required to implement the Bureau of Prisons Administrative Remedy procedures at all facilities housing federal residents. The Administrative Remedies Policy is posted on bulletin boards throughout the facility for review by residents. BP 229 forms are available at all times to be used in the submission of a complaint to the Residential Reentry Manager of the Bureau of Prisons. These forms are not restricted by staff and residents do not have to request these forms from staff. In addition, the names, addresses and telephone numbers for all relevant oversight agencies are posted on the resident bulletin boards to aid residents in submitting complaints. Indigent residents may request pens, paper and postage supplies from the facility in order to submit complaints. All BP 229 complaints are responded to by the Bureau of Prisons and employees or agents of Correctional Solutions Group, LLC do not have any influence in the answer and/or decision of the responding official.

INSTRUCTIONS ON HOW TO WRITE AND SUBMIT GRIEVANCES

1. You should always try to solve your problem with staff at the facility prior to submitting a grievance. Residents can obtain grievance forms from the forms area found within the facility. After you fill out the grievance form, you are to mail it to the Residential Reentry Manager of the Bureau of Prisons.
2. You should write your grievance briefly and clearly. Attach additional pages to the grievance form only if necessary. You should be very specific about your grievance or problem. Provide an explanation or evidence to help the reviewer to understand your grievance. The best grievances are ones that give facts, not conclusions. Facts can be verified.
3. Stick to one issue all the way through the steps and don't bring up a new grievance issue on the appeal.
4. Write clearly and legibly so that your grievance can be read and understood. Explain how the grievance or problem affects you personally. The grievance you write is yours, with your signature, about your problem, not about somebody else's problem.
5. You can use the grievance procedure to complain a) about the interpretation or application of policies, rules, regulations and procedures, b) about any action by an individual employee or another person in physical custody, including any denial or access to the grievance procedure; c) about reprisals for submitting a complaint through this procedure; d) about the loss of or damage to property you are authorized to possess; or e) about any other matter relating to conditions of care or supervision, which are within the authority of the facility to remedy.

EMERGENCY GRIEVANCE

Processing for emergency grievances will begin with the initial determination by the designated grievance coordinator that the issue raised is a life-threatening situation. Emergency grievances will be given top priority and will be investigated and responded to within twenty-four (48) hours of the date of receipt.

Residents feeling, they are at substantial risk of imminent sexual abuse shall file an emergency grievance. Once filed, the emergency grievance will be forwarded to a level that can take immediate corrective action and shall provide an initial response within 48 hours. The facility will have a final decision within 5 days of submission. If an emergency grievance indicates a resident is subject to substantial risk of imminent Sexual Abuse, the Facility Director will take immediate corrective action to protect the potential victim.

PREA RELATED GRIEVANCE

The following is required for processing and handling PREA related grievances filed on behalf of sexual abuse/sexual harassment concerns. These requirements supersede requirements in this policy for non-PREA related grievances.

- There is no time limit imposed on when a resident may submit a grievance regarding an allegation of sexual abuse.
- Residents shall not be required to use any informal process to resolve the grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.
- A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and
- Such grievance is not referred to a staff member who is the subject of the complaint.
- CSG shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within the 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by residents in preparing any administrative appeal.
- CSG may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. CSG shall notify the resident in writing of any such extension and provide a date by which a decision will be made.
- At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, the resident may consider the absence of a response to be a denial at that level.
- Third parties, including fellow residents, staff members, family members, attorneys, and outside advocate, shall be permitted to assist residents in filing request for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.
- If a third-party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. If the resident declines to have the request processed on his or her behalf, CSG shall document the resident's decisions.
- A grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse are handled as emergency grievance.
- After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, the grievance will be immediately forward to the Facility Administrator, Assistant Facility Administrator, and PREA Coordinator so that immediate corrective action may be taken. An initial response will be provided within 24 hours and shall issue a final decision within 5 calendar days. The initial response and final decision shall document CSG's determination of whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.
- CSG may discipline a resident for filing a grievance related to alleged sexual abuse only when CSG can demonstrate the resident filed the grievance in bad faith.

Every staff member must know the procedures residents use to file a grievance and the proper manner of how to respond, therefore, all staff members and volunteers shall receive training and become familiar with the resident grievance procedures during pre-service training. Initial staff training shall outline procedures of how grievances are filed; appropriate forms to be used, time limitations, methods of investigation, appropriate response to grievances, and the process if there are allegations of sexual abuse.

STAFF TRAINING

Every staff member must know the procedures residents use to file a grievance and the proper manner of how to respond, therefore, all staff members and volunteers shall receive training and become familiar with the resident grievance procedures during pre-service training. Initial staff training shall outline procedures of how grievances are filed; appropriate forms to be used, time limitations, methods of investigation, appropriate response to grievances, and the process if there are allegations of sexual abuse.

RESIDENT ORIENTATION

Upon admission to the facility each resident will be provided a copy of the resident grievance procedures. In addition, each new admission to the facility will receive an orientation to the grievance procedures. This orientation will explain the process in clear, simple terms, which the resident understands, cover methods of filing grievances appropriate forms to be used, where forms can be obtained, and time limitations. Residents will be informed at this orientation that they have the right to submit grievance directly to the Bureau of Prisons at any time.

GRIEVANCE RECORDKEEPING

The facility will document all grievances, including the final disposition, and keep the documentation in a central file. This log and master file of all grievances filed will include the date of receipt by the facility, date of response, issue (s) grieved, and the grievance decision.

CONFIDENTIALITY

All written grievances will be considered to be of a confidential nature; the President or Vice President will release copies of grievance documents only upon written authorization as prescribed within this policy.

DISCIPLINARY SYSTEM

When an employee witnesses or has knowledge of any act committed by a resident which is in violation of the rules and regulations of the facility, the employee will first attempt, if appropriate, to resolve the matter informally. Such informal resolution may include counseling, verbal reprimand, or the giving of an instruction, warning or order. If the employee cannot appropriately handle a violation or is a serious nature, he/she will complete an incident report, and issue a copy to the resident being charged.

HEARING PROCESS

Whenever possible the hearing regarding the charges listed in the violation report will be held within three (3) working days (excluding weekends and holidays) from the time the violation was reported. The Center Disciplinary Committee who is designated by the Administrator shall conduct the hearing.

Residents shall be served with notification of the violation at least twenty-four (24) hours prior to the disciplinary hearing. The employee serving notification will explain the violation to the resident in terms that he/she can understand. At the time a member is served with notice of the violation report and charges the notifying employee will advise him/her that he/she has the right to submit a written statement of the CDC and that he/she has the right to make a verbal statement to the CDC during the hearing process.

Upon convening the disciplinary hearing, the resident will be given the opportunity to submit a written statement in response to the charges listed in the violation report. In addition, the resident will be allowed to make a verbal statement in his behalf during the hearing process. The resident will be allowed to call witnesses in his defense during the hearing process at the discretion of the CDC. The CDC may exclude witnesses from the hearing process at his/her discretion if the testimony to be given is irrelevant to the charges listed in the violation report. In addition, a resident may request a staff representative to be present during the disciplinary process to ensure the resident's rights are not infringed upon.

Upon conclusion of receiving all written statements, verbal statements and testimony from any allowed witnesses, the CDC will exclude the resident from the hearing in order to make a determination of guilt or innocence regarding the charges and if found guilty the assessment of consequences.

The CDC may take into consideration the following factors when determining the appropriate consequences to be imposed:

1. Nature and seriousness of the violation(s);
2. Extent of injury to person(s) or damage to property caused by the violation(s);

3. Resident's prior disciplinary record, including disciplinary reports for the same or similar violation(s);
4. Period of time since the last violation;
5. Penalties given to other residents for the same or similar violations;
6. Minimum and maximum consequences allowed by policy.

After this determination the CDC will call the resident back will be advised of the decision regarding the charges and consequences imposed resulting from the resident's behavior, as well as appropriate alternative behavior. At the time of the conclusion of the hearing process, the resident will be given a copy of the completed violation report. In addition, the CDC will inform the resident of his right to appeal the finding of guilt and the penalty imposed by utilizing the administrative remedies procedure and will also inform the resident of the method for filing such an appeal. If the resident requests an administrative remedy grievance form, the CDC will make it available at that time.

APPEAL OF DISCIPLINARY ACTIONS

There are three (3) basic grounds for appeal of the CDC decision. These grounds for appeal are as follows:

First, the member may argue that one or more of his procedural rights were violated such as he did not receive notice of the violation at least twenty-four hours prior to the hearing.

Second, the member may argue that there was insufficient evidence to find him guilty of the charges. A finding of guilt by the FHO must be based upon a preponderance of the credible evidence presented at the hearing.

Third, the member may argue that the consequences imposed were not within the guidelines set by policy.

ACTS WHICH CONSTITUTE A VIOLATION

The following circumstances represent violations of the facility rules and regulations. A violation of these rules may consist of any of the following:

1. Engaging in the specified behavior;
2. Attempting to engage in the specified prohibited behavior;
3. Conspiring to engage in the specified prohibited behavior;
4. Aiding others in conspiring, attempting, or engaging the specified prohibited behavior or,
5. concealing information or intentionally providing false information regarding a specified prohibited behavior.

BOP PROHIBITED ACTS

Greatest Severity Level Prohibited Acts and Sanctions

<i>CODE</i>	<i>GREATEST SEVERITY LEVEL PROBITED ACTS</i>	<i>AVAILABEL SANCTIONS FOR GREATEST SEVERITY LEVEL PROHIBITED ACTS</i>
100	Killing	A. Recommend parole date rescission or retardation.
101	Assaulting any person, or an armed assault on the institution's security perimeter (a charge for assaulting any person at this level is to be used only when serious physical injury has been attempted or accomplished).	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time (up to 100%) and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
102	Escape from escort; escape from any secure or non-secure institution, including	

<p>103</p> <p>104</p> <p>105</p> <p>106</p> <p>107</p> <p>108</p> <p>109</p> <p>110</p> <p>111</p>	<p>community confinement; escape from unescorted community program or activity; escape from outside a secure institution.</p> <p>Setting a fire (charged with this act in this category only when found to pose a threat to life or a threat or serious bodily harm or in furtherance of a prohibited act of Greatest Severity, e.g., in furtherance of an riot or escape; otherwise the charge is properly classified Code 218, or 329).</p> <p>Possession, manufacture, or introduction of a gun, firearm, weapon, sharpened instrument, knife, dangerous chemical, explosive, ammunition, or any instrument used as a weapon.</p> <p>Rioting.</p> <p>Encouraging others to riot.</p> <p>Taking hostages</p> <p>Possession, manufacture, introduction or loss of a hazardous tool (tools most likely to be used in an escape or escape attempt or to serve as weapons capable of doing serious bodily harm to others; or those hazardous to institutional security or personal safety; e.g. hacksaw blade, body armor, maps, handmade rope, or other escape paraphernalia, portable telephone, pager, or other electronic device).</p> <p>(Not to be used).</p> <p>Refusing to provide a urine sample; refusing to breathe into a Breathalyzer; refusing to take part in other drug-abuse testing.</p> <p>Introduction or making of any narcotics, marijuana, drugs, alcohol, intoxicants, or</p>	<p>B1. Disallow ordinarily between 50% and 75% (27-41 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).</p> <p>C. Disciplinary segregation (up to 12 months).</p> <p>D. Make monetary restitution.</p> <p>E. Monetary fine.</p> <p>F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).</p> <p>G. Change housing (quarters).</p> <p>H. Remove from program and/or group activity.</p> <p>I. Loss of job.</p> <p>J. Impound inmate's personal property.</p> <p>K. Confiscate contraband.</p> <p>L. Restrict to quarters.</p> <p>M. Extra duty.</p>
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	related paraphernalia, not prescribed for the individual by the medical staff.	
112	Use of any narcotics, marijuana, drugs, alcohol, intoxicants, or related paraphernalia, not prescribed for the individual by medical staff.	
113	Possession of any narcotics, marijuana, drugs, alcohol, intoxicants, or related paraphernalia, not prescribed for the individual by the medical staff.	A. Recommend parole date rescission or retardation.
114	Sexual assault of any person, involving non-consensual touching by force or threat or force.	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time (up to 100%) and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
115	Destroying and/or disposing of any item during a search or attempt to search.	
196	Use of the mail for an illegal purpose or to commit or further a Greatest category prohibited act	B1. Disallow ordinarily between 50% and 75% (27-41 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
197	Use of the telephone for an illegal purpose or to commit or further a Greatest category prohibited act.	C. Disciplinary segregation (up to 12 months).
198	Interfering with a staff member in the performance of duties most like another Greatest severity prohibited act. This charge is to be used only when another charge of Greatest severity is not accurate. The offending conduct must be charged as "most like" one of the listed Greatest severity prohibited acts.	D. Make monetary restitution. E. Monetary fine. F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
199	Conduct which disrupts or interferes with the security or orderly running of the institution or the Bureau of Prisons most like another Greatest severity prohibited act. This charge is to be used only when another charge of Greatest severity is not accurate. The offending conduct must be charged as "most like" one of the listed Greatest severity prohibited acts.	G. Change housing (quarters). H. Remove from program and/or group activity. I. Loss of job. J. Impound inmate's personal property. K. Confiscate contraband.

		L. Restrict to quarters. M. Extra duty.
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High Severity Level Prohibited Acts

<i>CODE</i>	<i>HIGH SEVERITY LEVEL PROHIBITED ACTS</i>	<i>AVAILABLE SANCTIONS FOR HIGH SEVERITY LEVEL PROHIBITED ACTS</i>
200	Escape from a work detail, non-secure institution, or other non-secure confinement, including community confinement, with subsequent voluntary return to Bureau of Prisons custody within four hours.	A. Recommend parole date rescission or retardation.
201	Fighting with another person	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 50% or up to 60 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
202	(Not to be used).	B1. Disallow ordinarily between 25% and 50% (14-27 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
203	Threatening another with bodily harm of any other offense.	C. Disciplinary segregation (up to 6 months).
204	Extortion; blackmail; protection; demanding or receiving money or anything of value in return for protection against others, to avoid bodily harm, or under threat of informing.	D. Make monetary restitution. E. Monetary fine.
205	Engaging in sexual acts.	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
206	Making sexual proposals or threats to another.	G. Change housing (quarters). <input type="checkbox"/> 15 <input type="checkbox"/> H. Remove from program and/or group activity.
207	Wearing a disguise or a mask.	I. Loss of job.
208	Possession of any unauthorized locking device, or lock pick, or tampering with or	J. Impound inmate's personal property.

209	<p>blocking any lock device (including keys), or destroying, altering interfering with, improperly using, or damaging any security device, mechanism, or procedure.</p> <p>Adulteration of any food or drink.</p>	<p>K. Confiscate contraband.</p> <p>L. Restrict to quarters.</p> <p>M. Extra duty.</p>
210	(Not to be used).	
211	Possessing any officer's or staff clothing.	A. Recommend parole date rescission or retardation.
212	Engaging in or encouraging a group demonstration.	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 50% or up to 60 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
213	<p>Encouraging others to refuse to work, or to participate in a work stoppage.</p> <p>(Not to be used).</p>	<p>B1. Disallow ordinarily between 25% and 50% (14-27 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).</p>
214	(Not to be used).	
215	Giving or offering an official or staff member a bribe, or anything of value.	C. Disciplinary segregation (up to 6 months).
216	Giving money to, or receiving money from, any person for the purpose of introducing contraband or any other illegal or prohibited purpose.	D. Make monetary restitution.
217	Destroying, altering, or damaging government property, or the property of another person, having a value in excess of \$100.00, or destroying, altering, damaging life-safety devices (e.g. fire alarm) regardless of financial value.	E. Monetary fine.
218	Stealing; theft (including data obtained through the authorized use of a communications device, or through unauthorized access to disks, tapes, or computer printouts or other automated equipment on which data is stored).	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
219	Demonstrating, practicing, or using martial arts, boxing (except for the use of a punching bag), wrestling, or other forms	G. Change housing (quarters). <input type="checkbox"/> 15 <input type="checkbox"/>
		<p>H. Remove from program and/or group activity.</p> <p>I. Loss of job.</p> <p>J. Impound inmate's personal property.</p> <p>K. Confiscate contraband.</p>

220	of physical encounter, or military exercises or drill (except for drill authorized by staff).	L. Restrict to quarters.
221	Being in an unauthorized area with a person of the opposite sex without staff permission.	M. Extra duty.
222	(Not to be used).	
223	(Not to be used).	A. Recommend parole date rescission or retardation.
224	Assaulting any person (a charge at this level is used when less serious physical injury or contact has been attempted or accomplished by an inmate).	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 50% or up to 60 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
225	Stalking another person through repeated behavior which harasses, alarms, or annoys the person, after having been previously warned to stop such conduct.	B1. Disallow ordinarily between 25% and 50% (14-27 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
226	Possession of stolen property.	C. Disciplinary segregation (up to 6 months).
227	Refusing to participate in a required physical test or examination unrelated to testing for drug abuse (e.g. DNA, HIV, tuberculosis).	D. Make monetary restitution.
228	Tattooing or self-mutilation.	E. Monetary fine.
229	Sexual assault of any person, involving non-consensual touching without fore or threat of force.	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
296	Use of the mail for abuses other than criminal activity which circumvent mail monitoring procedures (e.g., use of the mail to commit or further a High category prohibited act, special mail abuse; writing letters in code; directing others to send, sending, or receiving a letter or mail through unauthorized means; sending mail for other inmates without authorization; sending correspondence to a specific address with directions or intent	G. Change housing (quarters). □15□ H. Remove from program and/or group activity. I. Loss of job. J. Impound inmate's personal property.

297	<p>to have the correspondence sent to an unauthorized person; and using a fictitious return address in an attempt to send or receive unauthorized correspondence).</p> <p>Use of the telephone for abuses other than illegal activity which circumvent the ability of staff to monitor frequency of telephone use, content of the call, or the number called; or to commit or further a High category prohibited act.</p>	<p>K. Confiscate contraband.</p> <p>L. Restrict to quarters.</p> <p>M. Extra duty.</p> <p>A. Recommend parole date rescission or retardation.</p> <p>B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 50% or up to 60 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).</p>
298	<p>Interfering with a staff member in the performance of duties most like another High severity prohibited act. This charge is to be used only when another charge of High severity is not accurate. The offending conduct must be charged as "most like" one of the listed High severity prohibited acts.</p>	<p>B1. Disallow ordinarily between 25% and 50% (14-27 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).</p>
299	<p>Conduct which disrupts or interferes with the security or orderly running of the institution or the Bureau of Prisons most like another High severity prohibited act. This charge is to be used only when another charge of High severity is not accurate. The offending conduct must be charged</p>	<p>C. Disciplinary segregation (up to 6 months).</p> <p>D. Make monetary restitution.</p> <p>E. Monetary fine.</p> <p>F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).</p> <p>G. Change housing (quarters). □15□</p> <p>H. Remove from program and/or group activity.</p> <p>I. Loss of job.</p> <p>J. Impound inmate's personal property.</p> <p>K. Confiscate contraband.</p> <p>L. Restrict to quarters.</p>

		M. Extra duty.
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MODERATE SEVERITY LEVEL PROHIBITED ACTS

<i>Code</i>	<i>MODERATES SEVERITY LEVEL PROHIBITED ACTS</i>	<i>AVAILABLE SANCTIONS FOR MODERATE SEVERITY LEVEL PROHIBITED ACTS</i>
300	Indecent Exposure.	A. Recommend parole date rescission or retardation.
301	(Not to be used).	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 25% or up to 30 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
302	Misuse of authorized medication.	
303	Possession of money or currency, unless specifically authorized, or in excess of the amount authorized.	
304	Loaning of property or anything of value for profit or increased return.	B1. Disallow ordinarily up to 25% (1-14 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
305	Possession of anything not authorized for retention or receipt by the inmate, and not issued to him through regular channels.	C. Disciplinary segregation (up to 3 months).
306	Refusing to work or to accept program assignment.	D. Make monetary restitution. E. Monetary fine.
307	Refusing to obey an order of any staff member (may be categorized and charged in term of greater security, according to the nature of the order being disobeyed, e.g. failure to obey an order which furthers a riot would be charged a 105, Rioting; refusing to obey an order which further a fight would be charged as 201, Fighting; refusing to provide a urine sample when ordered as part of a drug-abuse test would be charged as 110).	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation). G. Change housing (quarters). H. Remove from program and/or group activity. I. Loss of job.
308	Violating a condition of furlough.	J. Impound inmate's personal property. □19□
309		

310	Violating a condition of a community program. Unexcused absence from work or any program assignment.	K. Confiscate contraband. L. Restrict to quarters. M. Extra duty.
311	Failing to perform work as instructed by the supervisor.	A. Recommend parole date rescission or retardation.
312		B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 25% or up to 30 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
313	Insolence towards a staff member.	B1. Disallow ordinarily up to 25% (1-14 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
314	Lying or providing a false statement to a staff member. Counterfeiting, forging, or unauthorized reproduction of any document, article of identification, money, security, or official paper (may be categorized in terms of greater severity according to the nature of the item being reproduced, e.g., counterfeiting release papers to affect escape, Code 102).	C. Disciplinary segregation (up to 3 months).
315		D. Make monetary restitution.
316	Participating in an unauthorized meeting or gathering.	E. Monetary fine.
317	Being in an unauthorized area without staff authorization.	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
318	Failure to follow safety or sanitation regulations (including safety regulations, chemical instructions, tools, MSDS sheets, OSHA standards).	G. Change housing (quarters).
319	Using any equipment or machinery without staff authorization.	H. Remove from program and/or group activity.
320	Using any equipment or machinery contrary to instructions or posted safety standards.	I. Loss of job.
321	Failing to stand count.	J. Impound inmate's personal property. □19□
322	Interfering with the taking of count.	K. Confiscate contraband. L. Restrict to quarters. M. Extra duty.

323	(Not to be used).	
324	(Not to be used).	
325	Gambling.	
326	Preparing or conducting a gambling pool.	A. Recommend parole date rescission or retardation.
327	Possession of gambling paraphernalia.	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 25% or up to 30 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
328	Unauthorized contacts with the public.	B1. Disallow ordinarily up to 25% (1-14 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
329	Giving money or anything of value to, or accepting money or anything of value from, another inmate or any other person without staff authorization.	C. Disciplinary segregation (up to 3 months).
330	Destroying, altering, or damaging government property, or the property of another person, having a value of \$100.00 or less.	D. Make monetary restitution.
331	Being unsanitary or untidy; failing to keep one's person or quarters in accordance with posted standards.	E. Monetary fine.
332	Possession, manufacture, introduction, or loss of a non-hazardous tool, equipment, supplies, or other non-hazardous contraband (tools not likely to be used in an escape attempt, or to serve as a weapon capable of doing serious bodily harm to others, or not hazardous to institutional security or personal safety) (other non-hazardous contraband includes such items as food, cosmetics, cleaning supplies, smoking apparatus and tobacco in any form where prohibited, and unauthorized nutritional/dietary supplements).	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation).
		G. Change housing (quarters).
		H. Remove from program and/or group activity.
		I. Loss of job.
		J. Impound inmate's personal property. □19□
		K. Confiscate contraband.
		L. Restrict to quarters.
	Smoking where prohibited.	M. Extra duty.

333	Fraudulent or deceptive completion of skills test (e.g. cheating on a GED or other educational or vocational skills test).	
334	Conducting a business; conducting or directing an investment transaction without staff authorization.	
335	Communicating gang affiliation; participating in gang-related activities; possession of paraphernalia gang affiliation.	A. Recommend parole date rescission or retardation.
336	Circulating a petition.	B. Forfeit and/or withhold earned statutory good time or non-vested good conduct time up to 25% or up to 30 days, whichever is less, and/or terminate or disallow extra good time (an extra good time or good conduct time sanction may not be suspended).
396	Use of the mail for abuses other than criminal activity which do not circumvent mail monitoring; or use of the mail to commit or further a Moderate category prohibited act.	B1. Disallow ordinarily up to 25% (1-14 days) of good conduct time credit available for a year (a good conduct time sanction may not be suspended).
397	Use of the telephone for abuses other than illegal activity which do not circumvent the ability of staff to monitor frequency of telephone use, content of the call, or the number called; or to commit or further a Moderate category prohibited act. □18□	C. Disciplinary segregation (up to 3 months). D. Make monetary restitution. E. Monetary fine.
398	Interfering with a staff member in the performance of duties most like another Moderate severity prohibited act. This charge is to be used only when another charge of Moderate severity is not accurate. The offending conduct must be charged as “most like” one of the listed Moderate severity prohibited acts.	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation). G. Change housing (quarters). H. Remove from program and/or group activity.
399	Conduct which disrupts or interferes with the security of orderly running of the institution or the Bureau of Prisons most like another Moderate severity prohibited act. This charge is to be used only when another	I. Loss of job. J. Impound inmate’s personal property. □19□ K. Confiscate contraband. L. Restrict to quarters.

	charge of Moderate severity is not accurate. The offending conduct must be charged as "most like" one of the listed Moderate severity prohibited acts.	M. Extra duty.
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LOW SEVERITY PROBITED ACTS

<i>CODE</i>	<i>LOW SEVERITY PROHIBITED ACTS</i>	<i>LOW SEVERITY AVAILABLE SANCTIONS</i>
400	(Not to be used).	B1. Disallow ordinarily up to 12.5% (1-7 days) of good conduct time credit available for year (to be used only where inmate found to have committed a second violation of the same prohibited act within 6 months); Disallow ordinarily up to 25% (1-14 days) of good conduct time credit available for year (to be used only where inmate found to have committed a third violation of the same prohibited act within 6 months (a good conduct time sanction may not be suspended).
401	(Not to be used).	
402	Malingering, feigning illness.	
403	(Not to be used).	
404	Using abusive or obscene language.	
405	(Not to be used).	
406	(Not to be used).	
407	Conduct with a visitor in violation of Bureau regulations.	
408	(Not to be used).	
409	Unauthorized physical contact (e.g. kissing, embracing).	
498	Interfering with a staff member in the performance of duties most like another Low severity prohibited act. This charge is to be used only when another charge of Low severity is not accurate. The offending conduct must be charged as "most like" one of the listed Low severity prohibited acts.	F. Loss of privileges (e.g., visiting, telephone, commissary, movies, recreation). G. Change housing (quarters). H. Remove from program and/or group activity. I. Loss of job. J. Impound inmate's personal property. K. Confiscate contraband.

499	<p>Conduct which disrupts or interferes with the security or orderly running of the institution or the Bureau of Prisons most like another Low security prohibited act. This charge is to be used only when another charge of Low severity is not accurate. The offending conduct must be charged as “most like” one of the listed Low severity prohibited acts..</p>	<p>L. Restrict to quarters. M. Extra duty.</p>
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FACILITY RULES

1. Residents shall comply with temporary release programming rules and regulations to include curfews.
2. Residents who are on outside work assignments such as community service projects or outside work details shall not leave their assigned area or communicate with members of the public without authorization.
3. Residents shall not impersonate any employee or any other person in any manner.
4. Residents shall not be in possession of any security keys, badges, employee identification or clothing.
5. Residents shall not possess outdated or unauthorized types or quantities of medication, nor shall they sell or exchange medication.
6. Residents shall not smuggle or attempt to smuggle or solicit others to smuggle any item in or out of the facility, or from one area to another.
7. Residents shall not alter, forge, or counterfeit any document. Residents shall not distribute any facility document without authorization.
8. Residents shall not alter, rewire, tamper or attempt to repair electrical outlets or any electrical device.
9. The false reporting of fires, emergencies, disturbances, or other threats to the safety of the facility endangers the health and safety of others and is prohibited.
10. Residents shall not tamper with any fire alarm or extinguishing devices unless authorized by a facility staff member.
11. Fraternalization between residents, including, but not limited to, bodily exposure, kissing, embracing, hand holding, note passing, etc. is prohibited.
12. Personal relationships between residents and staff are strictly forbidden. This includes the exchanging of personal information, phone numbers, addresses, family information, etc. that does not fall within the boundaries of professional relationships. In addition, at no time are staff and residents to enter into any type of relationship of a sexual nature.
13. Residents are not allowed to touch staff in any manner, except in cases of emergency. This includes hugging, fixing collars, tapping shoulders, etc.
14. Residents shall not use tobacco products in unauthorized areas and must abide by all rules of the tobacco use policy.
15. Residents shall not be out of place in any area of the facility.
16. Residents shall not purchase, sell, loan, give, or exchange, personally owned articles without authorization.
17. Residents shall comply with all search procedures.
18. Residents shall participate in fire drills and firm alarms in a prompt and orderly fashion.
19. Residents shall not possess lottery tickets or participate in lotteries.
20. Residents shall comply with and follow the guidelines, instructions and rules given by staff regarding facility visitation procedures.
21. Residents shall comply with and follow the guidelines and instructions given by staff regarding facility correspondence procedures.
22. Residents shall comply with and follow the guidelines and instructions given by staff regarding facility package procedures.
23. Residents shall not possess nude or pornographic materials.
24. Residents shall not request or solicit or services from any business or any person other than immediate family members without consent and approval of the Facility Director or designee.

25. Residents shall not engage in conduct that disturbs the order of any part of the facility. This includes, but limited to, loud talking in the Dining Room or Corridors.
26. Residents shall not engage in any verbal or physical altercations.
27. Residents shall immediately report any illness/ injury to a staff member.
28. Residents shall maintain the cleanliness and orderliness of their living quarters, clothes, and person.
29. Resident shall not communicate by telephone with any facility employee without the authorization of the Facility Director or designee.
30. Residents shall comply with and follow the guidelines and instructions given by the staff regarding telephones.
31. Residents shall not remove food items, containers, utensils, etc, from the Dining Hall.
32. Residents shall not remove chairs from housing quarters.
33. Residents shall not possess clothing or bedding in excess of authorized issue. The altering of issued clothes or bedding is prohibited. Residents shall be required to pay clothing or bedding that has been altered without authorization.
34. Residents shall not eat or have a beverage other than water in their living quarters.
35. Residents understand all confiscated items have a 72-hour MAX holding time frame. If items are not picked up by family or sent home, they will be disposed of or donated.

SUSTAINED FINDINGS OF THE ABOVE FACILITY RULES WILL RESULT IN THE ISSUANCE OF EXTRA DUTY ASSIGNMENTS BY THE FACILITY DIRECTOR. EXTRA DUTY ASSIGNMENTS WILL NOT EXCEED 50 HOURS PER SUSTAINED FINDING.

GENERAL RULES

1. Resident's person, dorms and personal effects are subject to search at any time by staff without prior notification. This is not harassment but rather is for the protection of all residents of the facility.
2. The facility is not responsible for the safeguarding of resident personal property. Residents are not to borrow, loan money, clothing, or other items of personal property. Residents should ensure that personal property is securely stored in their locker prior to leaving their dorm.
3. Meals are to be eaten in the dining room or designated areas only. Food, utensils, cups, plates, or glasses may not be taken from the dining area. All food items must be eaten in the dining area. Consumption or possession of food or drinks of any kind are not permitted in any resident's living areas. Any food/drinks in these areas will be subject to confiscation and disciplinary.
4. Smoking is strictly prohibited at this facility. Smoking in dorms, hallways, dayrooms, and other areas is forbidden.
5. Residents are required to be appropriately and fully dressed at all times, except when in the bathroom areas taking care of personal hygiene or using the toilet. Sleeveless-shirts, undershirts, underwear, or sleepwear (including shifts that have had the sleeves removed) are not permitted to be worn during the day (0700am -1130pm) inside or outside of the dorm areas. , Shirts are to be fully buttoned at all times, even with an undershirt. Residents are required to change clothes in the bathroom and should never be exposed in the dorm living areas.
6. Glues, aerosol sprays, mouthwashes, colognes, and any other items containing alcohol and/or toxic substances are strictly prohibited. Flammable substances and materials are strictly forbidden in the facility. Any item of this nature found being introduced into the RRC or found within the RRC will be disposed of at the Facility Director's discretion.
7. Residents are not allowed to wear athletic apparel, sleeveless shirts, while on facility work assignments. In all instances where a resident is assigned to a facility work assignment the resident is required to remain in compliance with facility dress code. Hats, sunglasses, and Walkman radios are not allowed in a resident's possession during attendance of a scheduled activity. In addition, residents are not to wear sunglasses in the facility.
8. Loud and boisterous talking is not permitted. Personal radios used with the use of earphones are the only items allowed. Earphones cannot be used in the facility.
9. Residents are not allowed to loiter on the exits, hallways, and laundry or parking areas. Residents are expressly prohibited from entering dorms other than their assigned dorm unless specifically authorized by a staff member.
10. Residents are not allowed to be in bed between the hours of 6 AM and 4 PM on normal programming days with the exception of those residents who are deemed night workers or those who are ill.
11. All residents on the facility may be called upon at any time and required to participate in sanitation activities.

12. The recreation area on the grounds is open throughout the day. Sitting, standing or otherwise loitering outside the authorized recreation area, leaning up against the building(s), and/or going behind building or to the parking lot unless authorized to do so by a staff member is prohibited.
13. Residents of the opposite sex are not to be alone 1:1 in any location (indoors or outside) on the facility. Any resident finding himself or herself in this situation for any reason must immediately remove himself or herself from the situation. Residents of the opposite sex are not to converse in the hallways, recreation and are strictly forbidden to pass notes. Physical aggression including horse playing of any kind is strictly forbidden.
14. Residents of the opposite sex will not participate together in the same recreational activities, nor share the same areas. Designated recreation areas may be exchanged for the day to afford residents equal access to basketball and other forms of recreation. This will require staff approval.
15. For the purpose of confidentiality cameras and all recording devices are strictly prohibited. Pictures of residents, cameras and all forms of recording devices will be subject to confiscation and will not be returned.
16. Hats and ALL other forms of headdress are not to be worn indoors. The only exception will be for religious requirements.
17. Muscle shirts, undershirts, cut-off shorts, or excessively tight or otherwise revealing attire of any kind is prohibited. NOTE: Recreation time is not a sporting/athletic event. Residents must be playing basketball, etc. if athletic apparel is worn outside of the dorm. Shower shoes are not to be worn outside of the dorm. Sandals or other shoes that do not adequately cover the entire foot must be worn with socks if outside of the dorm.
18. Resident dress when in areas other than their assigned room or recreation activities must be appropriate for mixed gatherings. Shorts must be at least fingertip length. Cut-offs or clothes with holes are allowed. Tank tops, halter tops, half shirts, tube tops, nightgowns, pajamas, and bathrobes are prohibited. Shirts/blouses with buttons, zippers, snaps, etc., should be fastened appropriately. Shirts/blouses are required to have sleeves. Proper undergarments are shoes (shoes must have stiff outer covering, made of leather or fabric that covers the toes and heel, and includes a stiff sole that fully protects the bottom and sides of the foot) must be worn at all times. Wearing or possession of "logo" clothing denoting or promoting gang affiliation, sexual misconduct, racism, violence, foul or offense language, food or drink establishments, delivery series, or use of alcohol or drugs is prohibited. Head coverings are prohibited in the building. Bandanas and durags are prohibited. All clothing will be worn as designed and secured in place, i.e. no sagging pants, shoes laces tied, etc.
19. Residents are expected to be clean-shaven and well-groomed each day. Mustaches and beards are to be kept clipped and neatly groomed. Hair should be kept well-groomed and no trendy hairstyles are allowed that are deemed to be non-conducive to the halfway environment and goals.
20. Horseplay is unacceptable and against the rules.
21. Cursing, vulgar, or abusive language will not be tolerated.
22. Physical contact of any kind between residents is prohibited.
23. Any violation of law is considered a rule violation.
24. No spitting on floors or the ground.
25. The courtyard has designated areas for female residents and male residents. Male and female residents must remain inside their designated recreation areas while in the courtyard. Residents of the opposite sex will not participate together in recreational activities.
 1. Residents must be supervised at all times while in staff offices. Residents are not allowed in the following areas:
 - Males: Female Rooms, Female Dayrooms and Female Laundry Rooms
 - Females: Male Rooms, Male Dayrooms and Male Laundry Rooms
26. All Residents-Administration Program Office unless supervised by Staff.
27. Smoking is not permitted at Wichita Transition Center. Any/all tobacco products will be considered contraband and will be disposed.
28. While residing at the facility, residents are not allowed to possess a motorized vehicle without approval of the Unit Administrator. The Unit Administrator or designee may also allow bicycles upon written approval. Bicycles, and motorized vehicle will not be authorized unless resident is fully current on all fees.
29. Residents are financially liable for property damage they inflict. They may also be held criminally liable.
30. When talking to an employee, or official, residents will call them Mr., Ms. or use their title.
31. Residents will obey Staff orders at all times.
32. Belligerence, rebellious actions or comments, insolence, or antagonism towards Staff will not be tolerated.

33. All persons and property must enter through the front/side door and pass through the metal detector. All property and persons must be searched. Any property brought into the facility in any other manner will be confiscated as contraband and either held as evidence or destroyed.
34. All financial transactions between residents, residents and staff, and residents and volunteers are strictly prohibited.
35. Residents must obey all warning and facility signage. Tampering with facility signage will result in disciplinary action. Vandalism will be prosecuted.
36. Vending machines are a privilege, not a requirement. The machines are not to be shaken or mishandled in any way.
37. Requests for maintenance should be made at the Monitor Station.
38. Anything used to transport personal property (backpacks, handbags, purses, wallets/billfolds), or any other type of container will be subject to search at any time.
39. All medication must immediately be given to the monitor supervisor upon entering the facility. The monitor supervisor may designate or authorize certain medication as "Keep on Person" (KOP)/
40. Any medication with a KOP authorization must be stored with the resident's copy of the KOP.

PROHIBITIONS

1. Possession of Drugs (Synthetic drugs such as K2, spice, and bath salts are considered drugs)
2. Smoking is prohibited/ any type of smoking product, cigarettes/chewing Tabaco is NOT PERMITTED – WTC is a smoke free Facility.
3. Alcoholic Beverages, or drug/alcohol paraphernalia
4. Use and/or intoxication from alcohol, drugs, or any other substance.
5. Weapons of any kind
6. Tampering with the fire alarms, exits, exit doors, exit signs, lights, or smoke detectors.
7. Destruction of facility property
8. Introduction of food, drinks, hygiene, or other merchandise/items without having received appropriate approval to travel to the location where purchased.
9. Possession or tools, electrical equipment, or other devices not specifically identified in the property limitation notification as approved.
10. Possession of cell phones without authorization
11. Gambling of any kind.
12. Tattoo machines, equipment, ink used for tattooing, and either giving or receiving tattoos is prohibited.
13. Possession of pornography or sexually explicit pictures, items, or reading material of any kind.
14. Lying to staff.
15. Entering of any establishment or business whose primary purpose is the sale of alcohol for on premises consumption, or other businesses within a 500 foot radius of the facility.

LIVING AREAS RULES

1. Dorm bunks will not be covered with any item (paper, blanket, etc.). Vents will not be covered nor will any item be Paced into the vent. Cardboard boxes will not be allowed in resident's dorms.
2. Residents will be assigned to a dorm and bed upon arrival at the facility. Residents are not allowed to change dorm or bed assignments without specific authorization. Residents are responsible for determining that the bed and locker assigned to them are free from all items of contraband.
3. Residents are not allowed to tape, glue, or otherwise affix any item to the dorm doors, walls, dividers or bed.
4. Residents are responsible for the cleanliness of their assigned dorm, bed and locker area. The floor around and beneath the bed is to be kept clean and clear of items. An alteration to any bunk or facility fixture (shelves; mounting lights or fans etc.) is prohibited. All property must be stored in the assigned locker and drawer when not in use.
5. Beds must be properly made in a uniform fashion at all times when the resident is not physically in his / her bed. Sheets will be tucked fully under the mattress, and the facility issued blanket will be used to cover the bunk, tucked neatly around the edges. Ant personal items left unattended on the bunk will be subject to confiscation.

6. No property is permitted between mattress and the bunk frame, or under the pillow or bed linens. All bunks will contain one facility issued mattress and one facility issued pillow. Each resident is responsible for turning in linens and facility issued property prior to their departure. Failure to do so can result in a delay in the resident's discharge from the facility.
7. Personal items such as radios, etc., will not be taken to the dayroom, with the exception of personal radios with earphones. These may be played only with earphones and only at a level that can only be heard by the listener.
8. Residents are not allowed to sleep on the floor, or on any other location other than the bunk to which they are assigned.
9. Candles, incense, air fresheners, night-lights; extension cords, multi-plug adapters are prohibited.
10. All personal property is required to be stored properly under the resident's assigned bunk in the lock box provided, or in the standing locker when not in use. This includes hats, coats, towels, and books. All authorized appliances (except alarm clock) must be unplugged not in use. No property - is allowed on top of the bunk or hanging on the bunk or chair. Alarm clocks are the only exception to this rule. These may be left on our assigned bunk.
11. Possession of tools, electrical equipment or devices (coffee makers, typewriters, lamps, fans, soldering irons, tattoo guns, video games, miniature televisions, etc.), electronic communication equipment (pagers, two-way radios, etc.), of any kind are prohibited, without written consent from the Unit Director. Only those items specifically identified on the Property Limitation Notification is permitted. Large "boom box" type radios are not allowed. Only small Walkman or dock radios are permitted.
12. Residents are allowed to decorate their dorm area with posters, personal possession and pictures. They may not glue, paste or make holes on the walls bunks or lockers in order to hang pictures or other personal items.
13. Acts of vandalism may result in a facility "lock-down" until an investigation can be completed. During a "lock-down" residents are required to stay inside of their dorms with a complete absence of privileges.
14. Dorm chairs are not permitted outside of the dorm door except for scheduled program groups such as morning/evening meeting or AA meetings, or as otherwise directed by staff. Chairs or other equipment may not be used to prop doors open at any time.
15. No haircuts are allowed at the facility.

EMPLOYMENT RULES

1. Residents are required to attain full time, verifiable employment within thirty (30) days of arrival at the facility. Failure to attain full time employment in this time frame may result in disciplinary action. A resident claiming a disability is responsible for providing verifiable proof of such a disability. Residents must maintain stable full-time employment if full-time employment is available and the resident is medically capable of working. Residents are not permitted to accept, terminate, or change employers or hours of employment without prior approval from the Employment Specialist and/or Social Service Coordinator.
2. Residents are required to return to the facility as scheduled, immediately at the end of his/her workday. Prior approval is required for any overtime work or when a resident will late be to his/her employment; only a resident's case manager or other administrative staff member may approve a request for overtime. Telephone calls do not excuse returning late unless it is specifically job related and verified.
3. Residents are required to sign in and out with staff approval each time they enter or leave the facility. Residents must take an Employment Search Verification Form on each job interview to be completed and turned into the Employment Specialist upon return to the facility. Residents are responsible for their own employment search or work schedule, as approved by the Employment Specialist.
4. Residents are prohibited from traveling to any location other than those identified on the Job Search Form, and then ONLY to pursue employment. Residents found to be bringing merchandise back to the facility that was purchased while resident was signed out to job search or work will have the merchandise confiscated as contraband This contraband will be disposed of in accordance with the facility policy.
5. Residents who are sick or who will not attend work must immediately notify the Employment Specialist and their employer each day the resident will not report for work. All notifications of being absent due to sickness should be provided to both the Employment Specialist and employer at least six (6) hours prior to work reporting time.

SAFETY RULES

1. When assigned to work assignments within the facility, residents are required to wear approved personal protective equipment when needed or when or requirements exist.

2. Residents are required to respond to fire drill evacuations. Fire drills are conducted at random, at which time residents are required to evacuate the building immediately as instructed by staff. All facility visitors must conduct drill as well.
3. Residents are required to report immediately to staff any condition or practice that may cause injury. If a resident is injured, they are required to immediately report such to a staff member.
4. Residents must keep all radio and TV volumes down low enough to hear emergency alarms or announcements over the intercom system.

RESIDENTS RESPONSIBILITIES

1. All residents are assigned to house duties and responsibilities. It is the resident's responsibility to report at the designated time and place for these house duties and assignments and to notify staff he/she is reporting. Residents who failed to report or fail to carry out their assigned house duties or facility work assignments will be subject to disciplinary action and their failure will be considered as a refusal to fully participate in programming activities. Residents who gained employment will be required to complete any house duty assigned to them by RRC Staff.
2. Residents who fail to return to the facility as scheduled, or residents who are found to be missing from the location that is specified on his/her monitoring schedule or travel pass, will be reported to the appropriate department as an escape/absconder. Accountability is maintained by the resident's physical presence at the facility. A telephone call will not be an excuse for being late, however it may prevent the resident from being reported as an absconder/escape. Residents are required to telephonically contact the facility during any approved movement for employment or social purposes. Specifically, each resident must contact the facility upon arrival and at the time of departure from any and all movements to allow for appropriate tracking of resident movement.
3. Random urine specimens are taken from residents without prior notification. If notified of the need for a specimen, residents have two (2) hours in which to give it. Residents will remain under staff surveillance until completed specimen is given. Failure to give a specimen within the two-hour period is considered a stall and a stall is considered a positive which will result in disciplinary action.
4. ALL residents who are not attending a scheduled program activity are required to be inside of their assigned dorms by 9:00pm. No resident is to be outside of his/her assigned dorm after 9:00pm without a legitimate medical or other emergency. Lights out at this facility is at 10:30 PM Sun.-Thur. 11:00 pm Fri. & Sat. All residents are required to be in their assigned bunk "Feet Off Floor" FOF by that time.
5. "Lay-in" policy at this facility requires that any resident lying in a bunk during the day from 6:00 am until 6:00 pm Monday through Friday must have one of the following: A written authorization form, their assigned Case Manager indicating that there is a medical necessity for the lay-in; A written authorization form from the Employment Specialist verifying that the resident is a FULL TIME (40 hour week minimum) resident that works NIGHTS; A written authorization from an Administrative Staff member indicating the need for the lay-in
6. All residents are expected to maintain an appropriate disposition when communicating with staff members. If given a directive or otherwise instructed by a staff member to do something, it is expected that the resident comply with the request given. If the resident believes that the request is unreasonable or otherwise objectionable, they must utilize the grievance procedure, rather than display open disregard, disrespect, loud or argumentative attitude, or refusal to comply. This will only result in the resident receiving further sanctions.

VISITATION RULES

1. All visitors entering the facility must register with the staff member on duty and must present valid identification (photo identification-Driver's License or DPS Identification Card) prior to being allowed entrance into the facility.
2. Only visitors on the resident's approved visitation list will be allowed to visit.
3. Visitors must be appropriately dressed to enter and visit within the facility. No shorts, see-through clothing, halter-tops, etc., will be allowed. Visitors who are not appropriately dressed will not be allowed to visit at the facility.
4. Visitors may not bring any items or articles into the facility to be given to residents without prior approval of staff items which visitors wish to give to a resident must be presented to staff for inspection prior to the item being given to the residents.

5. Visitors are required to sit across the table from the resident whom they are visiting. Visitors and residents are not permitted to sit side-by-side or next to each other during visits.
6. Visitors are allowed to bring food items into the facility to be consumed during the visit. The food items must be presented to and inspected by staff prior to entering the visitation area. Liquid items (i.e., soda water, drinks, etc.) are only permitted if brought in a sealed, unopened container.
7. Residents are permitted one brief embrace and kiss at the beginning and end of their visit. Behavior displayed by residents or a visitor that is considered inappropriate for a family style visitation (i.e., continuous kissing, petting, etc.) will not be permitted nor tolerated during visitation period. Failure to abide by this regulation may terminate a visit.
8. Visitors are expected to ensure the children brought into the facility during visitation are properly supervised. Children are not allowed to play on the equipment in the visitation area and they must not become disruptive and disturb other visits. Should children become disruptive the staff on duty may terminate the visit.
9. Residents and visitors will be given assigned seating by the staff on duty. Once assigned residents and visitors are required to remain in their assigned seating with the exception of obtaining drinks at the vending machines or going to the restroom areas.
10. Visitors will be allowed access to the restrooms in specified areas only. In either instance neither the resident nor the visitor may accompany each other to the restroom areas.
11. Residents and visitors must remain in the visitation area at all times during the visit with exception of leaving for the restroom. Walking around or leaving visitation for any other reason (s) is not permitted and will result in termination of the visit. Visitors are not permitted to bring smoking materials within the confines of the facility.
12. Visitors may not take a purse, cell phone, or camera to the visit area. A diaper bag is allowed for infants.

The Unit Administrator may develop and implement additional rules and regulations as may be deemed necessary for the operations of the facility. These rules and regulations will be posted on all resident bulletin boards. It is the responsibility of each resident to review these postings and become familiar with any changes and/or new rules and regulations that may be implemented.

EXTRA DUTY ASSIGNMENT

Upon the conclusion of a disciplinary hearing in which a resident is assigned to extra duty it shall be the resident's responsibility to ensure such extra duty is completed in timely manner. Until such time as the resident completes all extra duty assignments he shall be held on "Work Only" restriction status. Specifically, any resident who has extra duty assignments will be ineligible for all privileges (sign-out, passes, etc.) until the completion of all extra duty assignments. No exceptions may be made to this policy without the specific authorization of the facility director.

RESTRICTION STATUS

Residents who fail to comply or who violate program requirements, rules, and/or regulations may be placed either through the established disciplinary process or by an administrative decision on restriction status. The Wichita Transition Center utilizes the following restriction(s):

Type of Restriction	Restrictions Which Are Imposed
Work-Only Restriction	Resident is allowed to leave the facility only for employment purposes. Sign-out privileges and pass privileges are completely restricted.
Full-House Restriction	Resident is confined to the facility and may only leave his/her designated dorm for mealtimes or if summoned by a staff

	member. Sign-out privileges, pass privileges visitation privileges are completed restricted.
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Administratively with the approval of a supervisory staff member a resident may be placed immediately on either of the above restriction status until the completion of a disciplinary hearing, investigation and/or treatment team meeting. This administrative placement on restriction status is not considered disciplinary action but rather only administrative action until proper disciplinary action or authorities can be notified of the resident's behavior/actions

UA TESTING

This facility is an alcohol and drug free program. Residents of the facility will not use intoxicants of any kind, either in or out of the facility. Residents will not possess alcoholic beverages either in or out of the facility. Residents may not use or possess K2 or any other synthetic drugs/ incense or similar products. The time, place, and amount of intoxicants are of no consideration to the staff of the facility. Any resident can be asked at any time to submit to urinalysis or breathalyzers. Any resident refusing to submit to such forensic testing will be subject to disciplinary action. All residents have two hours to provide a urine sample for urinalysis from the time he/she was asked for a urine sample. Residents may only consume one 8-ounce cup of water provided by staff. Drinking water or any other liquids not authorized by staff will result in a disciplinary action. The resident may not leave the direct sight and supervision of staff until such sample has been provided. Failing to provide a urine sample within the two-hour allotment will be considered a stall and a positive result.

Upon admission into the program, each resident is required to sign an acknowledgement and release concerning the administering of urinalysis, as it is the policy of the Wichita Transition Center to provide random, routine and for cause drug testing of all residents admitted to the facility. Drug testing of residents may occur under any of the following circumstances:

- when the resident's behavior suggests the possibility of drug / alcohol use:
- when drugs / alcohol is found in the resident's dorm, assigned living area, or personal property;
- when a resident returns late for curfew or returns from an absconcion to the facility;
- when statements are made by the resident or another resident which suggests the possibility of use
- when staff have a belief that the resident is possibly intoxicated or under the influence;
- when a supervising agency requests that the procedure be done;
- when a resident return from pass or weekend privileges; or
- at any other time determined appropriate and necessary by staff.

Random urine specimens may be taken from residents without prior notification. If a resident is notified of the need for a specimen, the resident will have one (2) hours in which to give the specimen. Failure to give a specimen within the two- hour period is considered a stall and a stall is considered as a positive, which will result in disciplinary action.

All specimens will be collected under the "direct sight and sound" supervision of a staff member. If the collecting staff member has reason to believe that a resident may have adulterated or substituted a specimen the resident may be ordered to give an additional specimen.

CONSUMPTION OF POPPY SEEDS AND INHALERS OR OTHER OVER THE COUNTER-MEDS:

It has been determined that the consumption of poppy seeds may cause a positive drug test, which will result in disciplinary action. As a condition of each resident's participation in the community programs, the resident must agree not to consume poppy seeds or items containing poppy seeds. By the resident signature on the Handbook Acknowledgement form, they attest that they understand that consumption of these food items will not be accepted as an excuse for a positive drug test indicating the presence of codeine or morphine. Furthermore, by the resident signature, the residents attest that they understand that they are not allowed to use or possess Vicks or Benzedrex/Nyquil, inhalers or similar items without a doctor's certificate. Use of these items will not be accepted as an excuse for a positive drug test indicating the presence of methamphetamine.

CLEARING THE FACILITY

Once all cleaning assignments have been completed and inspected the house clearing process will begin. No resident will be eligible for television privileges or recreation until his/her dorm has been inspected and cleared by a staff member. This process of clearing the house will be accomplished by dorms / housing areas. Residents may only leave their assigned dorms when their dorm / housing area is called or for attendance at the groups / activities for which they are scheduled.

OFF LIMIT AREAS

Areas within the local community may be determined as "OFF LIMITS" to residents of the facility. Specific areas which contain establishments that serve alcoholic beverages (bars, nightclubs, etc.) are considered as off limits to facility residents. However, the Facility Director may declare any other areas within the community as off limits which he / she determines such area (s) to be detrimental to the successful transition of facility residents.

RESIDENT PROPERTY AND PHYSICAL SEARCHES

All residents assigned to the facility are subject to a physical search of their person and their property at any time with or without cause. Any resident who refuses an order by a staff member to be searched will be subject to immediate FULL HOUSE RESTRICTION and disciplinary actions. Staff of the facility will search routinely residents who are entering and / or leaving the facility, resident dorms, common areas, vehicles and all property items. Additionally, all items brought into the facility either by residents and/or visitors will be subject to search.

CONTRABAND ITEMS

All contraband items that are found as a result of these searches will be confiscated and violation reports will be issued to all residents who are found in possession of contraband. All illegal drugs, drug paraphernalia, alcohol and / or weapons found during searches will be confiscated and turned over to the custody of local law enforcement officers. CHARGES WILL AGAINST ALL INDIVIDUALS WHO INTRODUCE DRUGS, ALCOHOL OR WEAPONS ONTO FACILITY PROPERTY. IN ADDITION, ALL RESIDENTS FOUND TO HAVE COMMITTED A MISDEAMENOR OR FELONY WHILE AT THE FACILITY WILL PROSECUTED TO THE FULLEST EXTENT OF THE LAW.

All items designated as contraband by the Unit Administrator shall be prohibited from entering facility property. Staff and residents will be advised in written communication from the Unit Administrator regarding those items that are considered as contraband. Security staff will physically search the facility on a routine basis to discover and remove contraband items. All other staff will physically search their areas of assignment daily to discover and remove contraband items.

For the purposes of this policy and facility operations contraband shall be defined as any item that falls in the following categories:

- Items not issued through approved channels or approved by policy;
- Items not approved by the appropriate staff member;

- Items not approved for a visitor to introduce;
- Items otherwise approved but altered from their original approved condition;
- Unauthorized items passed from one resident to another;
- Any dangerous item, unauthorized tool, drug, intoxicant, corrosive, flammable or other item not issued by or under the direct supervision of staff member using prescribed procedures;
- Any article specifically prohibited by statute, policy, or regulation;
- Personal items or valuables whose ownership cannot be determined; and
- Excessive amounts of any authorized item
- Unattended food items/cups, radios, chargers etc. left under bunk, mattress, locker will be picked up and disposed.

PROPERTY LIMITATION NOTICE

All residents assigned to a Correctional Solutions Group, LLC, resident residential facility will be allowed to retain personal property in the manner and limitations stated within this process. It is the intent of this process to facility a safe and sanitary living condition. All personal property will be stored in the locker or drawer provided by the facility unless otherwise approved by the unit Administrator. Any property that cannot be stored properly will be considered excessive and must be disposed of in a proper manner by the resident. Failure to do so will result in the property being confiscated and disposed of in accordance with the Wichita Transition Center policies.

The following list of personal property is the maximum allowed amounts a resident may have in their possession in their assigned room/dorm:

(7) four pants, dress or jeans	(1) one Walkman
(7) four dress shirts	(1) one watch
(7) four pull over shirts	(1) one alarm clock
(7) four pair of under garments	(1) one calculator
(3) two pair of gym shorts	(1) one electric razor
(1) one house coat/gown	(2) one hairdryer
(3) three pair footwear (any combination boots, tennis shoes, dress shoes)	(1) one set of curlers/curl iron
(1) one pair of house shoes/shower shoes	(5) five books (hardback/paperback/magazines combined) Newspaper not more than one day old.
(1) I-pod type radio with headphones	

In order to accommodate residents with work uniforms the allowed amount of pants, dress shirts, and pull over shirts may be mixed and matched, however, the total amount may NOT EXCEED 10 PANTS, 10 SHIRTS (COMBINATION WORK AND DRESS), 7 T-SHIRTS (UNDERSHIRTS WORN UNDER REGULAR SHIRT), 10 PAIR OF SOCKS, AND 3 PAIRS OF SHOES ((WORK, DRESS, EXERCISE), AND 1 PAIR OF SHOWER SHOES. IF A FEMALE BRINGS A DRESS, IT WILL REPLACE 1 PANT AND 1 SHIRT. Hygiene items shall be limited only to the amounts that can be stored properly in the resident's assigned storage. Food and drink items shall be prohibited from all dorm areas and lounges. All vending machine or other food items must be consumed in the dining area(s). Resident's must not have an excess of books or, magazines. Any excessive property or clothing will be confiscated and donated to a charity.

If property is left out of your lockers or storage, it will be confiscated. The first offense will be a warning; the second, your property will be confiscated and returned to you at a later time; the third time your property is left out unattended; it will be confiscated and not returned to you. It will be donated to a charity as well.

Due to space limitations items such as: Typewriters, fans, coffee makers, bicycles, etc., will require written permission from the Unit Administrator or designee before they will be allowed on the facility. This written permission may consist of a posted memo from the unit Administrator or specific documentation on a case by case/item by item basis. Otherwise, all property must be stored in the assigned lock box or closet space.

Any property to be found in excess of the amounts dictated by this process or property that is found not stored properly will be considered contraband and will be confiscated and disposed of in accordance with the facility policy for disposition of contraband. Furthermore, any authorized electrical item left on while the resident is out of the immediate area will be considered contraband and will be confiscated. Staff will notify the resident who has property items confiscated in writing of all personal property items that are confiscated. The resident will have (30) thirty days to make arrangements for disposition of property. After this allotted time the facility will dispose of the property in the manner outlined. Any item for human consumption that are not approved by the Director or designee will be considered contraband and disposed of immediately. Food items will not be returned, stored, or allowed for pick up and will be disposed of immediately due to health risk. (spoiled food etc.)

PROPERTY DISPOSITION NOTICE

All property items known or believed to be the property of a resident who leaves the facility without receiving their property shall be disposed of in the manner stated within this procedure.

Upon the departure of a resident from the facility the resident will be required to obtain and take with them all items of personal property. As part of the discharge process each resident will be required to sign a document which states that upon their discharge they are in possession of and have departed the facility with all items of their personal property.

In the instance, where a resident is discharged from the facility without receiving their property (i.e., absconding, arrest, hospitalization, etc.) staff on duty at the time of the resident's discharge will collect all identifiable items of personal property belonging to the resident from their assigned living area. Staff will make every effort to identify the property items belonging to the resident. However, staff will not be held responsible should property items not be found or in cases where property items are lost. This property will be inventoried and will be placed in secure storage pending proper disposition.

DISPOSTIION OF PROPERTY

Property items which are held for residents who left the facility without receiving their property shall be held for a maximum period of THIRTY (30) days before it is destroyed, except for items of property which pose a health risk (i.e., spoiled food, etc.) which may be disposed of immediately. The Facility Director or designee will prepare and retain written documentation describing any items destroyed and the reasons for such action.

In the instance that a resident wishes to allow another individual to pick up his property the resident must provide said individual with a signed notarized release for the property. Property cannot be picked up by another resident of the facility. The signed release may consist of a written notarized letter addressed directly to the Unit Administrator that specifically states the following information and/or statement.

"I (Resident's Name) do hereby authorize the following named individual to pick up all property items belonging to me that remain at the (Name of the Facility). The individual so authorized is (individual's name, address and telephone number). I understand that by authorizing this individual to pick up my property I am releasing the facility from any and all liability and responsibility for the loss of any property".

The individual, upon picking up the resident's property, will be required to provide photographic identification to prove that they are in fact the named individual; a copy of the identification card will be made and attached to the signed release. This signed release will then be attached to the property inventory. Further, the individual picking up the property will be required

to sign a Release of Responsibility releasing the facility and all concerned from any and all liability regarding the resident's property.

The company/facility shall not be responsible for more than \$50 value of a resident's personal property which is loss of misplaced due to the proven negligence of staff.

In instances where the resident absconds from the facility or leaves the facility against treatment advise and fails to obtain their property prior to their departure or when a resident leaves his/her property in the possession of another resident, the company not facility shall be responsible for the loss of any of the resident's property.

DISPOSITION OF CONTRABAND

All confiscated contraband shall be immediately turned over to the supervisor on duty. Upon receipt of the contraband the supervisor shall ensure that the contraband items are tagged with the date and time of discovery, resident's name (if applicable) and/or the location the contraband was found.

A report must be written by the staff member discovering the contraband that describes the contraband and when and where it was found. This report shall be given to the supervisor on duty, who will initial and date the report and forward it along with the contraband items to the Unit Director. The Unit Director shall secure all contraband in the facility evidence locker until disciplinary cases have been completed and/or local authorities assume custody.

Items that are not needed by local authorities for investigative purposes will be destroyed (food items). Items that have value or usefulness will be donated to local non-profit charitable organizations, food items will be immediately disposed, and will not be returned to the resident. Items introduced into the facility as contraband will not be returned to the resident.

PASS PRIVILEGES

Correctional Solutions Group, LLC will consider and approve only five (5) different types of passes for its residential programs. Normally these passes cannot be taken in combination but must be requested and taken separately. Combination of pass privileges may only be done with the expressed permission of the Unit Director or Designee. Passes that may be requested by residents for approval are as follows: .

HOME PASS, which -is approved to begin on a resident's day(s) off from school or work and cannot not be before 5:00 PM or upon the completion of the resident's assigned groups and/or in-house responsibilities whichever comes first. This pass is concluded no later than forty-eight or twenty-four hours of when the pass began. Resident's length of time on a home pass is determined by the amount of hours they are programming. If resident works more than 36 hours, is a full-time student, or volunteering over 36 hours; a resident is permitted to stay at their approved home for forty-eight hours. A resident is permitted to stay twenty-four hours at their approved home if they work less than 32 hours, are a part time student, or volunteer for less than 32 hours.

12 HOUR DAY PASS, which is approved for a specific day. This type of pass begins no earlier than 7:00 AM on the specified day and ends not later than 7:00 PM on the same day. A 12-hour pass can be allowed with the approval of the Facility Director.

WORK PASS, which is approved for Saturday / Sunday and / or other days which are considered as holidays by the facility, This type of pass normally begins at 7:00 AM on the specified day (passes to begin earlier than 7:00 AM must have special approval) and ends no later than 7:00 PM on the same day or upon the conclusion of work whichever comes first.

EMERGENCY PASS, which is approved for a period not to exceed 48 hours for a death or critical illness within the resident's immediate family or in a situation where it is necessary to further the resident's progress. Immediate family for the purposes of an emergency pass is defined as mother; father, brother, sister, grandmother,

grandfather, wife, or children. Emergency passes for non-immediate relatives or other persons will not be approved. Emergency passes may only be approved by the Unit Director or Designee and require authorization from the resident's supervising agency (BOP, USPO, Pre-Trial).

12 HOUR HOLIDAY PASS, which is approved for a designated day as determined by the Unit Director or Designee. This type of pass normally begins no earlier than 7:00 AM on the specified day and ends not later than 7:00 PM on the same day. The Facility Director or Designee may impose special restrictions or eligibility requirements as he/she deems necessary.

Holiday passes are normally given only on nationally recognized holidays (i.e., Christmas, Thanksgiving, etc.) and will be posted in writing as to the day which will be offered, special restrictions and eligibility requirements. Holiday passes may only be approved by the Unit Director or Designee and may not exceed (12) hours in duration. Extended Holiday passes are at the discretion of the RRM.

PASS PROCEDURES

Residents that have obtained and maintained stable full-time employment (40 hours per week), are a full-time student or volunteer 40 hours may request a pass. Passes must be completed and turned in by 9 p.m. on Wednesday of each week. Passes will be reviewed and approved by the Facility Director or Assistant Director by Friday of each week. Weekend passes may begin only after the resident returns to the facility from work or school on Friday afternoon. Residents will not be allowed to leave on pass each Friday until after 5 p.m. Passes will terminate on Sunday evening and the residents are to report back to the facility before the 7 p.m. curfew. Before being approved for passes, the resident must submit to the assigned Case Manager a prospective pass site. This pass site must be inspected by facility staff before the resident will be approved for any passes. This pass site must have a working telephone that does not have any of the following services options; call waiting, call forwarding, Caller I.D., three way calling, call notes or other unauthorized services. Residents are required to submit monthly telephone bills for this approved pass site so staff can verify that such services have not been added after the initial site inspection. In the event that the pass site utilizes any service options, the use of these features must be discontinued during the time the resident is at the pass site location, if the service options are unable to be removed, the resident will be returned to the facility until the features are completely removed.

Upon leaving for pass, the resident is to go immediately to the pass site and advise a facility staff member confirming their arrival. Residents may not leave the pass site for the remainder of his/her pass to be in accordance with the approved Pass Request. The resident may only leave the pass site to travel to approved locations which were identified and verified on the Pass Request form and only at the approved times identified. Before each movement, the resident is to advise a facility staff member that a movement is about to be made and where the movement will be. Resident must also advise a staff member of their return to the approved home. At all locations, the resident must be able to be contacted by the facility. The resident is required to do an accountability check, while at their pass site location, between the hours of 8:00pm — 9:00 p.m. Random accountability calls will be made to pass site locations and travel locations during the pass. Residents must return to the approved pass site by 8 p.m. each night. There will be no movement from the approved pass site from the hours of 9 p.m. to 6 a.m.

For residents who work at least 32 hours during the week, but less than the required 40 hours, a day pass is the only pass available. Day passes will allow the resident to leave the facility up to twelve hours. The resident may choose to take this day pass on either Saturday or Sunday. Residents may leave the facility on day pass beginning at 7 a.m. and must return to the facility within the eleven-hour period or by the 7 p.m. curfew, whichever comes first. Day passes must be requested in writing just as weekend passes. Pass sites must also be verified before the resident will be allowed to leave

for pass. All criteria listed above as it relates to telephone services and accountability calls must be adhered to when on a day pass.

To be eligible for passes, the resident must meet the following criteria:

Weekend Passes

- Must be employed full time (40 hours per week)
- Full time Student
- Volunteering (40 hours)
- Must have pass site location submitted in advance and inspection have taken place
Telephone services must be verified by staff
- Must have submitted an acceptable budget to the assigned Case Manager
- Subsistence payments must be current and paid in full
- Must submit a Pass Request form by Sunday night at 9 p.m. prior to the week before the pass.
- No incident reports
- Have active savings account

Day Passes

- Must be employed and worked at least 32 hours each week. Part time student
- Volunteer (less than 32 hours)
- Must have pass site location submitted in advance and inspection have taken place
Telephone services must be verified by staff
- Must have submitted an acceptable budget to the assigned Case Manager
- Subsistence payments must be current and paid in full
- Must submit a Pass Request form by Sunday night at 9 p.m. prior to the week before the pass
- No incident reports
- Have active savings account

SIGN OUT PRIVILEGES

Maintaining accountability of all residents is the first order of business for the staff of the Wichita Transitional Center. Because accountability is the essence of all the policies, the following guidelines have been established for residents who wish to sign-into and out of the facility.

Each resident will be required to work with their assigned Case Manager to establish an approved schedule that will identify time(s), day(s), and location(s) to which travel to is approved. All movement will be managed through Securmanage and through Daily Plans.

Residents are not allowed to sign out to any location that does not have a working telephone and/or a physical address.

- Each resident will be required to sign out electronically through Securmanage in the Monitor's Station. Each time a resident wishes to leave the facility, they must provide their approved schedule to the facility staff so that verification can be made that such movement has been approved. After verification has been made, Monitor Staff will fill in the required information needed so that a resident may leave the facility. Required information is the following: Date and time of departure, destination, method of transportation return time and date. Facility staff will then review the entry, and if correct, staff will electronically sign out resident by Securmanage.
- A resident can only sign out for one specific location. Residents must return to the facility before they can sign out again to a different location.
- Residents must return immediately after work to sign in.

- Residents must sign out for a specific location when leaving the facility. Residents must note the exact time of sign out, according to the office clock. Residents must also note the expected time of return to the facility. The dates, times, and locations of such sign outs must correspond to the approved schedule.
- Upon the resident arriving at the approved location, they must contact the facility by telephone to report that they have arrived to the approved location. In addition, the resident must contact the facility again by telephone when they leave the approved location to begin travel back to the facility. Cellular telephones may not be used in calling the facility.
- All residents returning to the facility must immediately report to the facility staff before they enter into the main living areas. Upon returning, the resident will electronically sign in thru Securmanege and by signing daily plan.
- Residents who are ill are to report such to the facility staff so that they may be approved to be in bed during the day and so that staff may check in on the resident. Residents too ill to report to their respective employment will not be allowed to sign-out for recreation.

It should be noted that no resident may sign out of the facility for any purpose without prior written authorization. Residents who are seeking employment must submit an employment search request for the whole week to the Employment Specialist no later than 9 PM on the Wednesday prior to starting the job search. Job search will begin no earlier than 7:30 AM and be back within the facility no later than 4:30 PM. Employment search is not permitted on Saturday, Sunday, or holidays.

No resident may sign out of the facility for employment purposes to a job site without first submitting an Employment Resource Form and by completely filling out the employment information on their respective sign in/sign out log. Travel times for employment are approved by the Case Manager or Employment Specialist only.

No resident may sign out for an overnight pass without prior approval for the specific pass. In addition, no resident may sign out for any other purpose without first having secured an approved Movement Request. In addition, residents are not allowed to sign out of the facility for daily movement for more than twelve hours without written authorization from the Employment Specialist or Case Manager.

CONDITIONS RELATED TO SIGN OUT PRIVILEGES

Residents are allowed to leave the facility only under the following conditions: WHEN GOING TO OR FROM:

- An approved job interview;
- An approved job search
- Approved employment
- Approved social pass
- Approved religious services
- Approved recreational functions; and
- Approved passes to social services agencies to conduct business regarding family matters and any other functions or outings as approved by staff that may necessitate the residents being away from the family.

CURFEW HOURS

All newly arriving residents to the Center will be restricted to the facility for a minimum of twenty-four hours if arriving during the week or until the following Tuesday if arriving on Friday in order to undergo the admission process, orientation, and establish a relationship with facility staff. After this initial restricted period, the resident will then be allowed to begin employment search through the approval of facility staff. The resident will adhere to the 4:30 p.m. curfew until they have gained employment. After the resident has gained employment, the curfew may be extended up to 9:00 p.m., depending

upon the work schedule of the resident. Each resident is responsible for notifying facility staff immediately of unavoidable delays that will result in the resident arriving late for curfew.

All residents are required to be on the premises every Thursday at 6:30 p.m. to attend a Mandatory Resident Meeting and to participate in the weekly house cleaning process. Residents who begin work must make accommodations with their employers to be present at this required weekly meeting (if possible). All residents who have an alcohol or drug aftercare condition are required to participate in the facility's aftercare program, (as scheduled by the Drug counselor).

9:00 PM is the national curfew for all residents under federal jurisdiction, unless approved to work during this time. All residents who do not work night hours or not attend school in the evenings must be at the facility by 9:00 PM. Residents will be in their assigned dorms by 9:00 PM each weeknight. Residents will be in their assigned bunks by 10:00 PM and lights out will be at 10:00 p.m. during the week and at 11:00pm on Fridays and Saturdays. Residents will not be allowed to wander through the facility after the 9:00 PM unless it is an emergency.

IN-HOUSE WORK ASSIGNMENT

All residents will be responsible for maintaining the sanitation of their assigned living quarters and other areas of the facility in which the resident frequents, to include the dining hall, counseling rooms, common areas, laundry rooms, etc. Each resident is expected to maintain proper sanitation in their assigned living areas at all times, to include bed made, floor swept and mopped and/or vacuumed, furniture dusted, windows cleaned, bathroom facilities maintained, etc. Food, drinks, candy and other items that might attract vermin and insects are forbidden to be kept in the living quarters.

On a weekly basis, a work duty roster will be posted that will assign specific residents to specific tasks around the facility. Each resident will be responsible for reviewing this work duty roster to identify areas that may be assigned. At the designated nightly house cleaning time, each resident assigned a specific in-house duty will report to the facility staff to obtain cleaning items, chemicals, protective wear, etc. in order to begin the assignment. Once the assignment has been completed, facility staff must review the work to verify that the resident completed the assigned task satisfactorily. If the task is not completed in accordance with the facility expectations, the staff will give guidance and the resident will complete the task again until the outcome meets the expectations of the facility. Assignments to this work duty roster be alternated every Monday morning and the revised work duty roster will be posted on the resident bulletin board. It should be noted that some of these duties have specific times to be completed. These duties must be completed within the specified time for good reasons, and exceptions will not be made.

In addition to assigned tasks, residents are expected to clean up for themselves during their normal activities. Residents are expected to appropriately place soiled dishes away after meals and to maintain the sanitation of the area in which they ate,, In addition, residents are expected to pick up items they use in the laundry area, dayroom areas, meeting areas, counseling areas, etc. In addition, staff may request the assistance of residents in performing incidental tasks that may not necessarily be itemized on the work duty roster. Residents are required to cooperate with staff in completing these tasks.

Each Thursday the Center will hold a weekly "conference" meeting, in which all residents will be required to attend. After this conference meeting, a weekly facility sanitation inspection will be conducted by the facility administration to include all living areas and all department areas of the facility. At this time, residents will perform detailed cleaning activities to ensure the facility the sanitation expectations of the facility administration. Listed below are the housekeeping plans for the respective assigned areas:

AREA	DESCRIPTION
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Assigned Living Quarters	Beds are to be made each time the resident awakes. Clothes are to be placed neatly (hung or folded) in lockers or property boxes at all times. Clothing and other articles may not be left lying around. Bathrooms are to be cleaned on a daily basis. Trash is to be emptied daily, Floors are to be swept and/or mopped on a daily basis. Walls are to be cleaned weekly or as needed. .
Clean-up Service Crew	Maintain the cleanliness and sanitation of the common areas by providing clean-up services such as sweeping, mopping, dusting, emptying of trash receptacles, etc.) as directed by staff

ANY INDIVIDUAL WHO DOES NOT REPORT FOR OR PERFORM THEIR ASSIGNMENT AS INSTRUCTED WILL AUTOMATICALLY BE PLACED ON RESTRICTION. WHEN A LIVING AREA IS FOUND NOT TO BE IN COMPLIANCE WITH SANITATION STANDARDS ALL INDIVIDUALS ASSIGNED TO THE LIVING AREA WILL BE PLACED ON RESTRICTION. ALL APPOINTMENTS WITH FACILITY STAFF (LIFE SKILLS, EMPLOYMENT, ETC,) MUST BE SCHEDULED AT TIMES OTHER THAN THE TIMES OF COMMUNITY WORK ASSIGNMENTS.

EVALUATION OF PROGRESS

Residents admitted into the facility are evaluated and monitored on a continuous basis for the following:

- progress made toward identified treatment goals and objectives listed in the resident's Individualized program plan
- progress made toward requirements placed upon the resident by the supervising agency; and
- compliance with program rules, regulations, requirements, and processes.

Evaluation and monitoring takes place on a scheduled basis. Each of these evaluation periods will involve facility program staff, resident, and the appropriate supervising agency representatives.

The resident's supervising representative is immediately notified by telephone with a follow-up written correspondence in all instances where the resident is involved in a serious or unusual incident, absconds from the facility, produces positive results on a drug test, exhibits behavior that is non-conducive to the treatment goals of the program, or refuses to actively participate in required activities.

RELEASE PLANNING

Each resident will participate fully in the release planning process. Residents are required to submit a written release plan to their assigned case manager no less than ninety days (90) prior to their projected release date which address ongoing identified needs and include at minimum the following:

- living arrangements;
- employment;
- activities / services to sustain recovery;

- budget and savings;
- stress management;
- leisure activities; aftercare services; and
- referral sources.

HOME DETENTION

Home Detention permits a resident to reside at his/her own home and work at gainful employment or attend educational courses. The earliest home detention date is determined by the sentencing guidelines of a resident's most recent convictions. That date is specified in the initial paperwork received from the Bureau of Prisons. However, the facility has requirements that residents must meet as well. All residents eligible for Home Confinement must have:

- established a pattern of consistency and accountability with their employment or school and observance of Center Rules;
- successful/y completed at least two passes with no reported violations or problems; • paid subsistence at least once and be current with subsistence payments; .
- pass/release site must be approved by staff prior to Home Detention date including current telephone bills to ensure it has been paid and the service does not include call forwarding, caller I.D. or other unauthorized services.

All Home Detention residents shall return to the Center at least once each week for routine progress reviews, counseling, urine testing and other required programming. Residents on Home Detention are required to maintain the 9:00 p.m.-6:00 a.m. curfew each day unless so indicated and approved by the RRM and Facility Director.

All Home Detention individuals with driving privileges may drive to work and to the Center for designated functions. Upon arrival at the Center keys must be turned in to the front office staff.

APPLIED LIFE SKILLS

Applied Life Skills Is the practical "real life" application and use of life skills tools. As part of a resident's program who is assigned to residential or Halfway housing, he / she will' be required to participate in applied life skills programming. During this process resident will be taught, discuss and receive hands on experience in subjects such as personal finance management, problem recognition, problem solving, job seeking techniques, appropriate dress and appearance, etc,. Resident will then be provided with opportunities to actually apply this knowledge while seeking employment through job placement and other transitional opportunities within the community at-large.

BUDGET PLANNING

Upon obtaining employment, the assigned Case Manager and the Resident will establish an individualized budget plan as a part of life skills programming. This budget plan will include the review of all expenses and obligations such as 25 % subsistence fees, child support, court fees, restitution payments, and other financial obligations. Once established, the resident will be required and expected to strictly adhere to the agreed budget plan as established.

Variances from the established budget plan may only be approved prior to the expenditure of funds and after a meeting between the resident and the Case Manager is completed. Expenditure of funds not approved by the resident's established plan or expenditure of funds without prior approval will result in the denial of passes and / or imposition of consequences.

SUBSISTENCE

All residents arriving to the facility from the Federal Bureau of Prisons and United States Probation Office must pay subsistence once they obtain employment. Subsistence is calculated by multiplying the gross salary dollars by 25%. All subsistence collected is rounded down to the closest whole dollar amount. These monies go to offset the residents housing costs incurred while at the facility. Subsistence must be paid within forty - eight (48) hours of the resident receiving their paycheck. Payment will be made in the form of a money order and any other type of payment (cashier's check, cash, etc.) will not be accepted. Failure of any resident to submit this payment within the required timeframes will result in immediate disciplinary action and will result in pass denials until the payment is made in full.

Subsistence must be collected on all income earned during a resident's placement at the facility (This includes retirement benefits, disability income, interest income etc.). **SUBSISTENCE IS DUE WITHIN FORTY-EIGHT HOURS OF THE RESIDENT'S RECEIVING THEIR PAYCHECK.**

SAVINGS ACCOUNTS

Upon admission into the facility residents will be required to establish and maintain a savings account. After the resident becomes employed the amount specified in budget agreement with the Case Manager will be required to be deposited into savings account each week. Failure to do so will result in the denial of passes and violation reports for failure to prescribe to program rules / regulations.

WORK DISABILITY

Any resident who is assigned to the facility and unable to work due to a permanent or temporary disability must have documentation in his/her chart. This documentation must be at a minimum a letter from a licensed health care provider, which states the resident, is unable to be employed while at the facility and provide medical reasons why employment is should be prohibited.

SOCIAL SECURITY BENEFITS

Residents that receive SSI benefits are not always precluded from obtaining employment while at the facility. While a resident may be receiving SSI benefits for physical, mental or other reasons these payments are normally very small and do not equate to wage job. Therefore, the possibility of a resident losing his / her disability benefit check due to gaining employment is unlikely. Thus, a resident receiving SSI benefits is not a justification for a resident not obtaining employment while at the facility. If a resident is capable of obtaining employment, the resident will be employed.

EMPLOYMENT PLACEMENT

Job Placement is connective services that are provided to residents for the purposes of promoting and establishing stable employment. During the first week of admission, residents will meet individually with the Employment Specialist to determine their possible employment opportunities, skill level, strengths, weakness, interests, etc. It is the responsibility of the resident to obtain full time employment (40 hours per week) within the thirty (30) days of admission into the facility. Staff are available to assist each resident with obtaining employment; Residents are expected to coordinate all employment searches with the respective Employment Specialist. All interviews and job search schedules must be approved by the Employment Specialist prior to the resident leaving the facility for employment search. After potential employment has been found, the respective job site must be visited by the Employment Specialist within seven days of

the resident beginning work. Residents may work during the night, but only after the Facility Director has approved such a request. All employment must receive the approval of the Facility Director before the resident can begin employment. Any resident, who is unable to find stable employment within the thirty (30) days, will be issued an incident report and such failure reported to the respective Residential Reentry Manager of the Bureau of Prisons. Residents may not change employers without first obtaining the written approval of the Employment Specialist and the Facility Director.

QUALIFICATIONS FOR SEEKING EMPLOYMENT

The facility has an Employment Specialist on staff to provide residents with assistance, guidance and a planned approach to obtaining stable long-term employment. Residents are required to obtain employment within the first 30 days of arrival to the facility. Failure to obtain employment within this time frame will result in disciplinary actions. Residents must coordinate job-seeking activities with assigned Case Managers and Employment Specialists.

JOB SEARCH PROCESS

A daily schedule of appointments and interviews with possible employers will be established and agreed upon between the resident and the Employment Specialist. Resident will be responsible for checking in at the end of each search day with the Employment Specialist to discuss the progress of the employment search and any leads that may have been made for that day. Additionally, interviews and appointments for the next day will be discussed and agreed upon. This procedure will be followed on a daily basis until appropriate employment is obtained. The Employment Specialist, prior to any acceptance of any employment offer must review and approve all employment and/or changes in employment.

Within seven days of the resident obtaining employment the Employment Specialist will conduct a physical inspection of the job site and discuss with the potential employer the requirements of the facility.

SUITABLE EMPLOYMENT

Employment opportunities that are not considered as suitable employment for residents while they are residing at the facility are as follows:

- Stores, bars or restaurants whose main source of income is the sale or serving of alcoholic beverages;
- Subcontracting work or out-of-town work;
- Telemarketing or sales jobs which work primarily off of commission or sales quotas; (all telemarketing jobs must be specifically approved by the Employment Specialist)
- Employment or temporary work that does not meet the minimum required work hours of 30 hours per week; and
- Self-employment or jobs that income is based on tips (e.g., car washing, detail work, contracting, landscaping, etc.)

MEDICAL SERVICES/PRESCRIPTIONS

Access to health care services is made by contacting one of the local clinics or county hospital. Medical care is not provided by the facility and it is the responsibility of the resident to seek and obtain routine medical care. However, in instances of emergency, facility staff will assist residents in transportation to health care facilities and in obtaining necessary medical services. In either instance of routine or emergency the facility takes no responsibility or liability for the cost or services rendered by medical care providers.

Additionally, the facility is not responsible for providing funds to purchase medication prescriptions. It is the responsibility of the resident to provide funds for the payment for medication prescriptions.

EMERGENCY MEDICAL PLAN

When a situation arises requiring intense care necessitated by a resident's condition or when the medical emergency is of a life-threatening nature you should immediately notify facility staff who will evaluate the situation and call local medical emergency staff to handle the situation. Emergency medical staff will be summoned by dialing 911. Minor medical emergencies will be handled by transporting the resident to a local clinic or the emergency room of the local hospital.

The victim of a serious accident or illness should always have medical care even if they appear or seem to be fine. If the emergency occurs near a telephone, staff may be able to call right away, if it is in a remote location staff may examine the victim and give first aid before being able to send for help. However, if the staff member is the only person available to give first aid, they will stay and keep the victim alive and wait for others to respond. If the victim does not appear to need constant attention, the staff member may go for help or take the victim to medical assistance.

If you are the first resident on the scene, stay on the scene until you can turn the victim over to a staff member, or a doctor, rescue squad, or police. Tell the responding authorities what happened, what the victim said, what the witnesses saw, and what has been done for the victim.

During the time while the staff member is awaiting the arrival of the emergency medical team, he/she will administer the necessary emergency procedures (CPR/First Aid). The individual should not be moved but should be kept as comfortable as possible. You may assist the staff be reassuring the individual, being attentive and caring, and keep constant and close observation pending arrival of the emergency medical staff.

AFFORDABLE HEALTH CARE ACT

Effective January 1, 2015, all United States Citizens need to be enrolled in an approved health care insurance plan. Failure to enroll will result in a monetary fine assessed by the United States Government. While incarcerated persons are excluded from the requirement, I will be required to enroll upon release from custody of the Bureau of Prisons. You can start your application online at www.healthcare.gov or via telephone at 1-866-893-8446. It should also be noted there is a computer lab with internet access and telephones to assist with the application process at the Wichita Transition Center.

MEDICATION / SELF ADMINISTERED MEDICATION PROGRAM

Prescribed Non-Addictive or Over the Counter Medications is allowed only if medically necessary for the relief of temporary or pro-longed illnesses. Residents taking over the counter, non-psychotropic or non-addictive medications are allowed to keep them in their lockers or carry with them and self-administer these medications. Residents are required to advise Security Staff when they purchase any medication meeting the criteria as a KOP's medication. Security staff will inspect the medication and ensure the medication is not psychotropic or addictive medication.

Security staff will conduct random inspections of all medication's residents are approved to self-administer and keep on person. Staff will ensure medications are kept locked in the resident lockers and the Keep On Person Form "KOP" and Patients Education Form is kept with the medication in a zip lock bag. The original KOP will be executed and kept in a binder in the Monitor Station. The form will indicate the name of the medication and the purpose it is used for. If the Medication is prescribed a copy of the pharmacy Patients Education Form is attached to the KOP Form. Residents are required to keep in the medication in a zip lock bag with a copy of both forms in their locker.

All medications prescribed by a physician that is brought into the facility by a resident or other person during their entire residency at the center must be surrendered upon entering the facility. Staff will inventory and record these medications under the resident's name and medications will be kept for dispersal at the designated medication pass out times or as prescribed by the physician.

Staff will administer and discontinue medications exactly as ordered by the physician. All medications will be self-administered by the resident under the direct "sight and sound" supervision of a staff member.

MAIL DELIVERY

Mail is delivered each day except national holidays. Mail call will be held each evening. Each resident will sign for mail received. COD mail will not be accepted. Residents are prohibited from sending packages COD.

All outgoing resident's mail is required to be placed in the appropriately marked mail container for pickup. Mail pickup time is determined by the US Post Office. Offender's mail, both incoming and outgoing, may be opened and inspected for contraband, when based on legitimate facility interests of order and security, mail may be read or rejected. The offender is notified when incoming mail is returned, or outgoing mail is withheld.

Residents who are indigent and do not have correspondence materials may receive a limited supply of these materials by contacting a staff member. Writing supplies will only be provided by the facility until the resident is employed and receives their first paycheck.

You are required to address your mail or have mail sent to you addressed as follows:

**Your Name
Wichita Transition Center
701 East 21st Street North
Wichita, KS 67214**

LAUNDRY

Upon arrival and admission into the facility, residents will be issued the following necessity items:

- Two (2) sheets
- One (1) pillowcase
- One (1) mattress
- One (1) pillow
- One (1) blanket
- One (1) Combination Master Lock

Laundry facilities are available at the center at no cost to indigent residents. Residents are expected to keep all issued and personal clothing and linens clean and sanitary. Upon your discharge from the facility, it is your responsibility to bring all items that have been issued to you to the monitor's station prior to leaving the facility.

All personal clothing and issued items are to be laundered by the resident. You are encouraged to affix a tag to their items of personal clothing which contains your name as the facility will not be held responsible for any personal items of clothing that are lost during the laundering process.

HYGIENE ITEMS

Necessity items for personal hygiene such as toilet paper, toothbrushes, toothpaste, razors are provided by the facility for all indigent residents. Items are distributed on a scheduled and non-scheduled basis.

CLOTHING

The facility only provides access to clothing items for residents who are indigent and does not routinely provide clothing items to residents who possess the funds necessary to obtain clothing. Residents who possess sufficient funds are responsible for obtaining their necessary clothing items such as shirts, pants, undergarments, shoes, etc. In cases where a resident is indigent and cannot obtain such items, the facility will assist the resident in making the contacts necessary at local clothing banks, Salvation Army, etc. Case Managers will make residents aware of local charities that may be a resource for low income individuals.

MEAL SERVICES

The facility provides three (3) well balanced nutritional meals each day to residents as directed by our dietitian and (2) meals brunch and dinner on weekends. Meal service will be closed promptly at the posted times and residents who arrive after the hours of meal service will not be served unless prior arrangements have been made with food services staff. Residents who cannot attend meal service due to circumstances beyond their control at the above specified hours must make arrangements with staff on duty in order to receive meals. Special diets are available for those residents who have such authorized by medical authorities or who require such due to their observed religious dietary practices. Meal menus are posted in bulletin boards outside the dining room.

TELEPHONE CALLS

Residents are allowed unobstructed access to telephones on a daily basis as dictated by facility postings. Coin, calling card and collect call phones are available in the common area. It is the Wichita Transition Center's policy that residents limit calls to no more than 15 minutes per call in order to allow other residents access to the telephones. All telephone calls must be made either by coin, calling card or collect to the party being called. Billing to a third party is not allowed. Staff members are not allowed to take messages for calls coming into residents on the facility business lines. Exceptions will be made for emergency calls and/or calls from perspective employers.

When making phone calls residents are not allowed to bring chairs into the area (s) where telephones are located to sit while making a phone call.

There are phones designated for male and female residents.

VISITATION

Correctional Solutions Group, LLC recognizes that visitation provides a means whereby family ties and relationships can be reestablished and strengthened, especially after a period of separation. However, for the safety and security of all residents, staff and visitors, the following visitation rules apply.

Males and Females will rotate every month as follows for a two-hour visit:

January, April, July, October:

Saturday:

Females 8am – 11am

Males Last Name (A – K) 1pm – 4pm

Sunday:

Males Last Name (L – Z) 1pm -4pm

February, May, August, November:

Saturday: Males Last Name (L – Z) 8am – 11am Females 1pm – 4pm

Sunday: Males Last Name (A – K) 1pm -4pm

March, June, September, December:

Saturday:

Males Last Name (A – K) 8am – 11am

Males Last Name (L – Z) 1pm – 4pm

Sunday: Females 1pm – 4pm

- ✓ No more than four (4) adult visitors may visit at any one time. Children over the age of thirteen constitute an adult. The only restrictions related to children under thirteen are that they remain quiet and be respectful of the other visits taking place. Residents and adult visitors are expected to supervise all children during visitation. At NO time will children be allowed to leave sight of the supervising adult. Visits may be terminated at the discretion of RRC staff in this regard.
- ✓ All visitors must be listed on the resident's visitation list and must have a valid form of picture identification when reporting to the facility. No more than ten individuals may be included on the visitation list. Children under the age of thirteen are not required to be placed on the visitation list.
- ✓ **Residents may only receive one visit (maximum of two hours in length) each weekend.**
- ✓ A resident may embrace and kiss the visitor once at the beginning of the visit and once at the end of the visit. The public display of affection throughout the course of the visit is prohibited. Residents and visitors may hold hands during the visit. Remember, someone's children may be watching your actions.
- ✓ All visits will be restricted to two hours in length, or until the time of the visitation session is over. Special consideration up to three hours may be made for those visitors traveling over 250 miles; however, this consideration must be requested from the facility administration prior to the day of the visit.
- ✓ All visitors must dress appropriately. No revealing clothing, see-through clothing, or clothing which promotes or advertises alcohol, drugs, sex, or violence.
- ✓ Residents and visitors are expected to maintain appropriate levels of speech. Yelling, screaming, arguing loudly and/or the use of vulgar or abusive language will not be tolerated.
- ✓ Visitors may not bring in cellular telephones, pagers, weapons, alcoholic beverages, illegal drugs and/or narcotics or any other form of contraband into the facility.
- ✓ Visitors may bring in food to be eaten during the visit, as long as it is within reason. However, at the end of the visit, all food must be disposed of or taken home with the visitor. **ALL drinks have to be in form of a sealed bottle or can.**
- ✓ Residents are expected to notify all persons on their visitation list of the dates, times and rules of visitation.

- ✓ Any resident on restriction due to disciplinary infractions will not be allowed a visit until such restrictions are lifted.
- ✓ Former residents of the Center may not visit current residents unless authorized in writing by the Facility Director.
- ✓ Residents and visitors are encouraged to utilize bathroom facilities prior to the visit beginning.
- ✓ At no time will visitors be allowed to bring in any purses, bags, diaper bags or any other type of bag. Visitors with infants will be allowed to bring in 2 baby bottles, and a maximum of four diapers.
- ✓ Visitors are prohibited from smoking while at the Residential Re-entry Center.
- ✓ All visitors are to park in the resident parking area. At no time will visitors be authorized to park in the employee parking lot.
- ✓ As within any Community Correction Facility, visitors are to dress appropriately as defined below:
 1. No cut off shorts of any kind will be allowed
 2. No sleeveless shirts or tank tops will be allowed
 3. Shorts and skirts must come to mid-thigh on all visitors
 4. No see-through clothing of any kind will be allowed
 5. Hats, caps or other head gear must be removed prior to entering the facility
 6. Clothing that promotes or advertises alcohol, drugs, sex or violence is prohibited
 7. Visitors may not wear revealing or mid-riff clothing.

Facility staff will supervise the visitation process and will make determinations of the compliance of residents and visitors with the above noted rules. Failure of any resident or visitor to abide by the facility visitation rules will result in the termination of the visit. Any visitor that becomes belligerent and/or abusive to a resident, staff or other visitors will not be allowed back onto the facility grounds thereafter for visitation purposes.

TRANSPORTATION

Residents assigned to the Residential Re-entry Center may access public transportation to attend job interviews, employment, recreation or any other form of approved activities. Indigent residents may qualify for bus tokens until such time as they become gainfully employed. For those residents who are eligible, driving privileges may be obtained through the submission of the appropriate documentation. To obtain driving privileges, the resident must submit proof of a valid driver's license, proof of current vehicle registration, title and inspection, and proof of current liability insurance with coverage that is continuous throughout the resident's scheduled placement at the RRC. The liability insurance must specifically identify the resident's name on the insurance card. If the vehicle is the property of someone other than the resident, a notarized authorization must be provided giving the resident permission to drive such vehicle. Driving privileges will be based upon the need of the resident and will be coordinated through the assigned Case Manager. Residents with extensive traffic violations, DUI's, DWI's and assaultive histories will not be considered.

RESIDENT VEHICLES

Residents are allowed to have a vehicle during your stay at the facility only, if approved by designated staff. In order to obtain and keep a vehicle while at the facility, residents must meet the following criteria and obligations:

Resident Obligations

- . resident will be responsible for parking their vehicle within the resident parking area and upkeep of the vehicle;

- . resident will be financially liable for the vehicle.
- . Residents may not loan the automobile to another resident.
- . Resident must maintain compliance with ALL facility rules and regulations.
- . Keys to automobiles must be turned in to the monitor's station each day immediately upon returning to the facility.
- At no time will residents be authorized to work on their vehicles (i.e., change the oil, or anything mechanical) in the parking areas of the facility.
- Residents will not be authorized to play any loud music
- Residents will not be authorized to play any loud music.

Resident vehicles are subject to search at any time. Residents are expected to keep their vehicles clean of contraband items. Residents are to keep their vehicles locked at all times.

BUS FARE

All residents assigned to the facility may qualify for bus fare to be used to access the local transportation system. Residents may qualify through the facility to receive bus fare if they meet the following criteria:

- resident is indigent; and
- resident has not received release funds, has not yet received their first paycheck or has no means of support.

Residents must submit a request to the Social Service Coordinator indicating the need for assistance. The Social Service Coordinator will then review this need and issue bus fare in the event the resident is qualified to receive such. The resident must have an approved schedule in the facility resident management system to receive a bus pass.

EMERGENCY/FIRE EVACUATION PLAN

Emergency evacuation routes / diagrams are posted conspicuously throughout the facility in frames at the entrance / exit in each building / living area and in all major meeting rooms, dining rooms and hallways. These diagrams include the following information:

- Primary Evacuation Route;
- Secondary Evacuation Route;
- Fire Extinguisher locations;
- Pull station locations;
- First aid kit locations; and

EMERGENCY EVACUATIONS PLANS

In the event of a fire alarm or announcement of emergency evacuation, all residents are expected to immediately exit the dorm or building in which they occupy and proceed to the Primary or Secondary Accumulation Area. If vision is impaired by smoke, residents are to STOP, DROP, AND CRAWL from the building, utilizing the illuminated EXIT signs to navigate their way to the exit door. Staff members will search each building to ensure that a thorough evacuation of all spaces has been accomplished.

All staff are expected to report to the Monitors Station immediately after supervising the evacuation of the building in which they occupy at the time of the alarm. Upon arrival to the Monitors Station, staff members will be assigned duties that will include a complete search of the facility, assisting residents to the accumulation areas, and accounting for each and every resident. The senior staff member present at the time of the alarm will assume responsibility for the supervision of the evacuation and resident accountability. All staff members will be expected to follow instructions provided by the senior staff member throughout the evacuation and until all accountability efforts have been successfully completed.

EMERGENCY DRILLS

The Monitor Supervisor or designee shall conduct at least three (3) monthly, fire drills requiring evacuation of the facility with identified problems being corrected promptly.

The Monitor Supervisor shall notify the Facility Director of the expected date, time and nature of the emergency drill. Prior notification to other staff members shall not be done or shall be held to a minimum. The Monitor Supervisor or designee and at least one or more designated staff members shall monitor all drills.

TAKING ACTION DURING AN ALARM

Because of the extreme importance of ensuring the safety and well-being of all residents, all alarms and/or announcements of emergency evacuation must be responded to by all residents immediately. Additionally, residents must immediately respond to any directive given to him/her during an emergency evacuation. Any resident choosing to ignore an alarm or failing to respond to an alarm will be subject to disciplinary action.

FIRE EXTINGUISHER USAGE

All staff and residents are authorized to use portable fire extinguishers in cases of small fires. These portable fire extinguishers are located throughout the facility as identified on the Emergency Evacuation Routes. All persons shall attempt to use portable fire extinguishers only if the fire is small and controllable and there is no toxic gases or excessive smoke being produced. Large fires or uncontrollable fires are to be left alone for the local emergency response teams to address. To properly use a portable fire extinguisher, one must complete the following steps:

Pull the Safety Pin- each fire extinguisher has a safety pin that keeps the release handle from inadvertently discharging the extinguisher contents. This safety pin is held in place by a plastic tie. Place your finger in the loop of the safety pin and pull firmly. The plastic tie will snap and the pin will come out. Once the safety pin has been removed, the portable fire extinguisher is now active.

Aim the Nozzle of the Extinguisher at the BASE of the Fire- portable fire extinguishers are designed to combat the cause of the blaze, not the flame itself. Therefore, aim the discharge nozzle at the base of the flame. This will ensure the contents of the extinguisher are discharged appropriately onto the cause or fuel of the flame.

Squeeze the Discharge Trigger- portable fire extinguishers will not discharge until the top discharge handle has been activated. To activate this device, squeeze the discharge trigger firmly with one hand while aiming the discharge nozzle with the other hand.

Sweep Side to Side- to properly combat a blaze, the extinguisher contents should be directed at the base of the fire and swept side to side to thoroughly affect all fuels of the fire. The individual controlling the blaze does this through a rhythmic motion side to side to side to side.

Any individual attempting to control a fire through the use of portable fire extinguishers must use sound judgment. If the respondent feels the fire is becoming uncontrollable, that toxic gases are present, that excessive or

overwhelming smoke exists, or that the fire extinguisher is not adequate enough to combat the fire, they should cease the process immediately and evacuate the facility.

HAZARD REPORTING PRACTICES

All persons who have knowledge of a possible hazardous situation are to immediately report such to on duty staff. The Residential Re-entry Center is home to many people and as daily activities occur; the possibility exists that hazards can originate quickly. Many times, such conditions can occur between inspections conducted by staff. Therefore, to ensure everyone's safety, any resident that identifies a possible safety issue or hazardous situation is to immediately report the potential problem to the on-duty staff. Residents are not expected to try and correct the situation by themselves, they are only to report the issue and then cooperate with staff as the issue is properly addressed.

USE OF CHEMICALS

Each chemical used on the facility will have a Data Safety Sheet at the Monitor's Station. This SDS identifies each chemical and the corresponding risks and precautions that should be taken when used. Any resident may request and review an SDS at any time. In addition, residents are required to use appropriate protective equipment when using cleaning chemicals as identified in the SDS. Protective eyewear, rubber gloves and such are available and will be worn by residents when required to do so by staff in accordance with the SDS instructions. Failure to wear protective equipment will result in disciplinary action for all parties. In addition, residents are to use the cleaning chemicals in accordance with their designated use and shall not use the wrong chemicals for the job at hand. Residents shall always use cleaning agents appropriately and report to staff any unauthorized use by any individual. Upon the completion of the task, residents are to return all cleaning chemicals to the Monitor's Station for secure storage.

How to Interpret Safety Data Sheets

Safety Data Sheets (SDS's) are informational sheets that provide basic and essential information related to chemicals of all kinds. In general, MSDS's are usually divided up into 16 different sections as outlined below:

Section One Identifies the chemical and the company issuing the SDS. In addition, section one also often identifies the emergency contact information.

Section Two Identifies the material and provides the CAS and other registry numbers.

Section Three Summarizes the major hazards associated with the use of the chemical

Section Four Outlines first aid measures to be taken in case of ingestion or inhalation or contact with skin.

Section Five Identifies suitable extinguishing agents which can be used on the substance in cases of fires and also the protective equipment needed to protect oneself in cases of the substance catching fire.

Section Six Outlines the procedures to be followed in case of an accidental release of the chemical, including methods to be used to clean up spills.

Section Seven Outlines the handling and storage requirements for the chemical in question. This section identifies any special handling procedures such as ensuring proper ventilation when using, keep away from open flames, etc. This section also identifies any special storage requirements for the chemical such as store in flammable storage cabinets, store in cool locations, store away from oxidizing agents, etc.

Section Eight Outlines the exposure controls and personal protection that must be taken with each chemical. Identifies maximum permitted concentration levels of the chemical for safe usage and also identifies all protective personal equipment that must be used when working with such chemicals.

Section Nine Identifies the physical and chemical properties of the chemical. Usually identifies the chemical's form, color, odor, melting points, boiling points, etc.

Section Ten Identifies the chemical's stability and reactivity to external conditions.

Section Eleven Outlines the risks associated with exposure to the chemical. Usually this section includes, in some detail, an indication of the health effects which may be attributable to the chemical.

Section Twelve Identifies the ecological information of the chemical.

Section Thirteen Identifies disposal procedures. If this section is not thoroughly sufficient, the local, state or national regulatory agencies should be consulted.

Section Fourteen Identifies all requirements and precautions to be taken when transporting such chemicals.

Section Fifteen Identifies all hazard codes associated with the chemicals and the precautions that should be taken when using.

Section Sixteen Other relevant information such as the person that prepared the data sheet, list of references from which the data had been drawn, disclaimers, etc.

UNIVERSAL PRECAUTIONS

Universal Precautions is a safety approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV/AIDS, Hepatitis, and other bloodborne pathogens. In layman's terms, all persons should treat all bodily fluids as if they are infectious and take proper precautions. Wichita Transition Center has spill kits located throughout the facility to properly treat and correct bodily fluid spills. If you identify a spill, please alert staff immediately so that proper steps can be taken to address the situation. Do not attempt to correct human fluid spills yourself.

COMMUNICABLE DISEASES

Communicable diseases are those diseases that are contagious, either through airborne or bloodborne channels. It is important that all residents assigned to the Center maintain proper hygiene and sanitation practices to ensure that basic contagious conditions are not passed around throughout the facility. Thorough cleaning with appropriately provided cleaning agents greatly reduces the possibility of the spread of flu, colds, viruses, and other such minor conditions. Thorough sanitation **AND** a responsible lifestyle are keys to preventing and controlling

more serious communicable diseases. Each resident should respect himself and his peers through the proper practice of sanitation and appropriate hygiene and protect themselves of more harmful diseases through well-educated choices related to their lifestyle.

All residents arriving at the facility will either have been medically screened at the institution from which they came or receive a complete physical examination upon arrival to identify possible carriers of serious communicable diseases. In addition, all residents that are suspected of having been infected with a communicable disease after their arrival will be scheduled for a medical evaluation to screen for such issues. This screening process is not designed to preclude residents from transitional opportunities, but to protect the well-being of all residents assigned to the facility. Any resident found to be infected with a serious communicable disease will be reviewed with the supervising agency and a determination made as to the residency of the individual.

Tuberculosis

Pulmonary Tuberculosis is a bacterial infection that affects the lungs of an individual, but can spread to infect other areas of the body (extrapulmonary tuberculosis). Tuberculosis is caused by the *Mycobacterium tuberculosis* which is a slow growing bacteria that thrives in areas of the body rich in blood and oxygen. Tuberculosis is classified into two different categories:

- ❖ Latent Tuberculosis- an individual that has been exposed to tuberculosis, but their body has encapsulated the bacteria into tiny capsules called tubercles. Although this person has been exposed to TB and the TB bacteria is found inside their body, this individual cannot spread the infection to others. However, a latent TB person can develop into an ACTIVE TB person if their immune system becomes weakened.
- ❖ Active Tuberculosis- a person that has been exposed to the tuberculosis bacteria and whose body has not encapsulated the bacteria. This individual is contagious and can spread the disease to others.

Persons infected with Latent TB experience no symptoms. The symptoms of Active Tuberculosis include the following:

- ✓ Persistent cough that brings up thick, cloudy and sometimes bloody mucus from the lungs.
- ✓ Fatigue and weight loss.
- ✓ Night sweats and fever.
- ✓ Shortness in breath and chest pains that may be worse when breathing in.
- ✓ Rapid heartbeat.

As stated earlier, individuals with Latent TB cannot spread the disease to others. Active Tuberculosis is contagious and is spread when an infected person exhales air during the breathing process that contains the bacteria and is breathed in by another individual.

Latent TB is diagnosed through a positive reaction with a tuberculin skin test. Active TB is identified by finding the TB bacteria in a sputum sample and through the use of chest x-rays.

Physicians usually treat Active TB patients with a combination of four antibiotics for a minimum of six months. Almost all persons who complete this medication cycle are prescribed as cured. Latent TB is usually treated with one antibiotic for nine months. This medication prevents the infection from developing into an active disease and reduces the risks of complications. If doses of any medication are missed or the treatments are not completed, treatment will be extended or must be started again. Not completing the treatment can cause the infection to worsen or may lead to the development of an antibiotic resistant infection that is much harder to treat. If left untreated, Active TB can damage the lungs and other organs and can possibly cause death. (The information in this section was derived from information found upon the WebMD website).

Hepatitis

Generally speaking, hepatitis is any inflammation of the liver. Although this condition is often caused by a virus, other causes may include alcohol, medications, toxins or autoimmune disorders.

Hepatitis A (HAV)- is extremely prevalent in the United States. Studies show that 1 of every 3 Americans have been infected at some point with HAV. HAV is primarily transmitted by the fecal-to-oral route through the consuming of contaminated food or water or because of poor hygiene practices. Persons infected with HAV usually develop flu-like symptoms such as low-grade fever, aches, and mild abdominal pain within 10-40 days of exposure. These symptoms can sometimes be followed by jaundice (a yellowing of the eyes and skin). HAV is an acute condition and most people clear the virus on their own without treatment. HAV does not lead to the development of chronic hepatitis, cirrhosis, or liver cancer. Hepatitis A can be avoided by washing hands with warm water and soap, particularly after using the toilet or changing diapers and before preparing or eating food.

Hepatitis B (HBV)- is transmitted through blood or blood products, through sexual contact, or from mother to child during pregnancy or childbirth. It is estimated that 1.25 million Americans are infected with hepatitis B. According to the U.S. Centers for Disease Control and Prevention, about 30% of people infected with HBV do not have any symptoms. Others may experience flu-like symptoms to include low-grade fever, aches, and mild abdominal pain. Most individuals with healthy immune systems usually recover from HBV after about six months. However 5-10% of those infected develop the chronic form of the disease. Often those with the long-term infection have no symptoms, or they may suffer from fatigue, malaise, and periods of jaundice. If left untreated, these individuals may be at risk for serious complications of liver damage diseases. HBV can be prevented through early vaccination programs. In addition, universal precautions should be followed in the cleaning of blood and other bodily fluids to prevent the spread of this disease. Individuals should practice safe sex techniques through the use of latex condoms, should not illegally use or share needles, and should not share razors or other personal hygiene items (such as toothbrushes and nail clippers) that might also come into contact with blood.

Hepatitis C (HBC)- is an inflammation of the liver caused by the hepatitis C virus (HBC). HBC is the most common chronic bloodborne infection in the United States. According to the U.S. Center for Disease Control and Prevention, approximately 3.9 millions Americans have been infected with the virus. About 35,000 new cases of Hepatitis C are recorded each year in the United States. Most people infected with HBC are not aware of any noticeable symptoms for as long as one or two decades after they are infected. In fact, by the time symptoms appear, the virus has likely begun to damage the liver.

Hepatitis C is spread through blood or blood products. Common routes of infection include needle-stick accidents among health care workers, blood transfusions before mid-1992 and use of recreational injection drugs through the sharing of needles. However, there are other avenues of transmission and factors that may also put individuals at risk for contracting HVC. Currently, no vaccine is available to prevent the contraction of HBC. However, there are some treatments available to persons infected that may help clear the virus from the blood and prevent further possible liver damage.

Once HBC infects a person's blood supply, it enters the cells in the liver and begins to reproduce itself rapidly. The initial stage of HBC is called Acute Hepatitis C. During this stage, which can last up to six months, 60-70% of the patients have no symptoms. However, some may experience extreme tiredness, weakness, loss of appetite and jaundice. Abdominal discomfort may also be a sign that the liver is inflamed and tender. Whether experiencing symptoms or not, initial damage to the liver cells can take place soon after infection, within an average of 2-8 weeks. Most people are unable to rid their bodies of the HBC virus on their own. In more than 80% of acute HBC, the disease progresses to the chronic stage. HBC is considered chronic when the virus remains in the blood longer than six months. Chronic HBC usually progresses at a very slow rate, often over a period of 10-30 years. The longer the virus remains in the blood, the more liver damage is done.

As stated earlier, the normal routes of HBC infection are:

- ✓ Needle sticks among health care professionals
- ✓ Blood transfusions prior to mid 1992
- ✓ Recreational injection drug use/sharing of needles

However, additional routes of infection may include:

- Acupuncture, body piercing, or electrolysis with unsterilized or improperly cleaned needles
- Tattooing with needles that have not been sterilized or that have been dipped into contaminated ink
- Sharing personal hygiene items such as razors, toothbrushes, or nail clippers
- Intranasal cocaine use through the sharing of straws or other such instruments
- Sexual activity that results in blood to blood contact such as through open sores

To protect yourself and others from HBC transmission, follow the following guidelines:

- ✓ Do not share personal hygiene items with others
- ✓ Cover sores and cuts

- ✓ Disclose to others that may come into contact with your blood that you are positive for HBC so that they may take additional precautions
- ✓ Report any spills of blood to the facility staff so that proper procedures can be followed to sanitize the area appropriately
- ✓ If infected, do not donate blood, organs, bone marrow, eggs, or semen.

This section of information is based upon facts obtained on the Pagasys website.

HIV/AIDS- AIDS is a disease that slowly destroys the body's immune system that is caused HIV. HIV attacks and destroys T-cell blood cells which are extremely important in the maintenance of the human immune system. HIV is a progressive degeneration that usually takes many years to weaken the body's immune system to the point of AIDS. The HIV virus has no cure, but anti-HIV drugs can help keep the virus in check. However, the costs associated with these anti-HIV drugs are extremely high and 95% of infected individuals cannot afford the treatments.

HIV is contracted by the following activities:

- ✓ Having unprotected sex (not using a latex condom).
- ✓ Sharing needles or syringes to inject drugs or steroids
- ✓ Mother to infant during pregnancy, childbirth or breastfeeding
- ✓ Getting a tattoo or body piercing with an unsterilized instrument
- ✓ Blood transfusions, blood products or organ transplants with infected supplies

HIV is transmitted through contact with HIV infected blood or blood products. Individuals cannot get HIV from restroom fixtures, non-intimate physical contact with an infected person, being sneezed or coughed on, casual kissing or bites from mosquitoes, fleas or ticks.

HIV infection has three stages: acute infection, chronic infection and AIDS. Acute infection is the earliest and shortest stage. While not everyone in this stage experiences symptoms, those that do experience a flu-like illness three to six weeks after becoming infected. Some of the symptoms that may be experienced in this stage of infection are:

- ✓ Blotchy, red rash, usually on the upper torso that does not itch
- ✓ Headache
- ✓ Aching muscles
- ✓ Sore throat
- ✓ Swollen lymph glands
- ✓ Diarrhea
- ✓ Nausea
- ✓ Vomiting

It is very important that if an individual has been or is involved in HIV risk behaviors, that any such symptoms be reported immediately to a physician.

The chronic stage of HIV infection is a “stand-off” between the body’s immune system and the virus. The chronic stage begins three to six months after contracting the virus and usually lasts about ten years. While there are no symptoms to this stage, the immune system begins to slowly deteriorate. Upon the immune system becoming devastated by the virus during the chronic stage, the AIDS stage begins.

The AIDS stage actually has no symptoms as well. However, as the body’s immune system is severely lacking and unable to combat many types of infections, the type of tangent infections contracted after the AIDS has set in will have specific symptoms. Some of these symptoms may include:

- ✓ Continually tired
- ✓ Swollen lymph nodes in the neck or groin
- ✓ Fever lasting longer than 10 days
- ✓ Night sweats
- ✓ Unexplained weight loss
- ✓ Purplish spots on the skin that will not go away
- ✓ Shortness of breath
- ✓ Severe, long-lasting diarrhea
- ✓ Yeast infections in the mouth, throat or vagina
- ✓ Easy bruising or unexplained bleeding

Residents assigned to the Center will be provided opportunities for testing and counseling. It is recommended that residents be cautious in their endeavors and always practice responsible decision-making practices. If you believe you have any of the above communicable diseases, you are encouraged to immediately make this belief known to your assigned case manager so that they may assist you in appropriate referrals to community agencies for testing and treatment. All disclosures to staff are protected under the laws of confidentiality and your rights of privacy will be protected.

CELL PHONES

Prior approval to possess a cell phone must be obtained from the Facility Director (or deisgnee) before a resident may have a phone in his possession. The offender must complete an Authorization Request Form.

User Restirctions

- 1.Approved cell phones belong only to the Offender who has obtained the approval. Ownership or possession may not be transferred from one resident to another. This includes offenders who have been discharged or otherwise successfully terminated.
- 2.Residents with approved cell phones are not authorized to sell, loan, or trade use or partial use of the phone and may not sell minutes or other time.
- 3.Phones may be used only between the hours of 6:00 AM and 10:00 PM. Phones may not be used after lights out.
- 4.Cell phone usage is prohibited during classes, orientation, group meetings, or sessions.
- 5.Cell phones may be used in dormitories, individual rooms and in outside recreation areas.
- 6.Cell phone usage is prohibited in TV viewing areas, the dining hall, library, religious services and at all times when in the administration area or in the case manager’s office.
- 7.Ring tones or other audible sounds and alerts are prohibited. Cell phones must be set on vibrate at all times.
- 8.Residents using cell phones in a manner considered disruptive by staff may have those phones confiscated and/or receive a disciplinary violation.

Accountability

Wichita Transitional Center is not responsible for damage, theft, or loss of cell phones.

1. All costs and billing associated with the possession or maintenance of the phone is the responsibility of the Offender.
2. Cell phones may be subject to review and inspection by facility staff on a regular basis or upon request without advance notice. Refusal to relinquish the cell phone for inspection will subject the offender to disciplinary action and/or termination of approval to possess a phone.
3. All phones and accessories left unattended shall be confiscated until authorized return or in event unauthorized departure (absconding facility/arrest); disposal by Facility Director. Phones belonging to offenders who have absconded, been arrested, or hospitalized will be stored and disposed of in accordance with facility procedures.
4. Family members are not authorized to pick up cell phones belonging to facility offenders (or ex-offenders) unless they have been designated to do so by the offender in writing.
5. Phones left at the facility by a discharged offender will be handled in accordance with property disposition policies.
6. Offenders who are approved to possess cell phones will be removed from the indigent list. Offenders that receive donated and/or pre-paid phones from charitable organizations or family members may remain on the list after review.
7. Cost of cell phone and/or service is not an excuse for failure to pay 25% assessment. Monitoring shall occur of this requirement.
8. Failure to comply with any and all of the above may result in suspension or revocation of cell phone privileges. Notification will be provided to Parole of offender violations, use or misuse of phone policy.
9. Cell phones and billings shall be subject to audit/review by facility staff on a regular basis or when requested by agency staff with no advance notice.
10. The offender shall sign an acknowledgement of the above rules and restrictions prior to possession or use of the phone.

COUNT PROCEDURES

Types of Counts

Security Staff will be responsible for performing the below specified counts at the appropriate times / intervals as directed by the Facility Director:

- **Formal Counts:** At a minimum, the security staff will perform at least three (3) formal counts on each shift daily. Records of these formal counts will be maintained in the facility's operation files.
- **Informal Counts:** Irregular Counts shall be performed on an informal basis by all staff responsible for the supervision of residents in their assigned areas during the periods of time the residents are present in the area. These counts are not documented counts but are a method to ensure the strict accountability of residents.
- **Emergency:** Upon any occasion when it is suspected that a resident is absent from the facility or at any other time deemed necessary by the monitoring staff. Special counts are specifically to determine the location of all residents assigned to the facility in order to determine if a resident has escaped or left the facility without proper authorization.
- **Continuous Counts:** Staff who are assigned residents to their direct supervision shall maintain a continuous count on those assigned to their custody. Continuous counts are designed to keep constant control on residents assigned to the direct supervision of staff so that each resident will always be supervised appropriately.

Count Process

1. Staff will immediately, upon the notification of a count, stop all activities / movements and gather all residents under their supervision a designated area. Staff will then count all residents in each area and will call the total number of residents into the Monitor Station.

2. After the receipt of all counts from staff, the Central Control Room staff will compile the numbers and determine that all residents have been accounted for by: 1) in-house counts; 2) out counts and 3) total facility population count.
3. Upon the determination that all residents have been accounted for, monitoring staff will review the Resident Verification Count Sheet to ensure that the compilation of numbers is accurate. If it is accurate the person responsible for supervising the count process (Central Control Room) will authorize the clearing of count and the facility will return to normal operations.

Once the count clears, the twenty-four hour building schedule will be reactivated and residents are allowed to attend groups, work assignments, etc. If the count does not clear utilizing this method, the missing resident will be identified and the process for resident escapees/absconders will be initiated.

RELIGIOUS SERVICES

Local churches provide non-denominational services on Sunday mornings. Attendance is optional. Requests to attend religious services outside the facility must be arranged through your Case Manager. Requests for other religious needs (e.g. prayer room space, schedule changes, diet needs) must be made through an I/60 a week prior to the event. Every effort will be made to accommodate such requests, when the request will not disrupt facility operations. Contact is often made with local religious leaders to verify the need, and religiously compliant alternatives.

REFRESH. REHYDRATE. REPLENISH.

SAFE PREA PROGRAM

Correctional Solutions Group, LLC has [zero-tolerance](#) for all forms of sexual abuse and sexual harassment of offenders, including retaliation for reporting and/or cooperating with an investigation. This means all allegations of this nature, whether it is perpetrated by staff, or another offender will be thoroughly investigated!

REPORTING THREATS TO YOUR SAFETY:

- Tell any staff member immediately!
- You may also report allegations to the unit major, the Office of Inspector General (OIG), or confidentially to the PREA Ombudsman, and remain anonymous upon request.

PREVENTION STRATEGIES:

- Do not accept commissary items, gifts, or other—unsolicited favors, including illegal drugs, alcohol, or other contraband.
- Do not accept offers of protection, join gangs, or other unapproved groups.
- Be alert and aware of your surroundings.
- Trust your instincts! If it feels wrong, get help or call out for a staff member.

IF YOU ARE SEXUALLY ABUSED:

- Report it immediately!
- Do not shower, brush your teeth, use the restroom, change your clothes, or do anything else which may destroy evidence.
- Abuse will be thoroughly investigated, and perpetrators will be disciplined and possibly prosecuted.
- You will be provided with medical and mental health care, including emergency contraceptives and prophylactic treatment for sexually transmitted infections free of any co-pay charges.
- You will be provided with emotional support and crisis services from a qualified staff or an outside advocate, where available.

SUICIDE PREVENTION

While there are no behavioral indicators that can say with absolute certainty whether or not someone will go as far as to attempt suicide, there are certain warning signs that should be taken seriously.

Suicide High Risk Factors:

- Recent family loss
- Recent set off or serve all
- Recent denial of protective housing
- Recent court disappointment
- Recent changes in relationships
- Changes in physical condition
- Deteriorating medical condition
- Increasing fear of being harmed
- Feeling pressured or threatened by gangs
- Encouragement from others to commit suicide
- Recent placement in single cell housing
- Less than three years served on sentence

Warning Statements:

- “No one cares”
- “I won’t be around long.”
- “My family will be better off without me...”
- “It doesn’t matter anymore.”
- “No one would miss me if I were gone.”
- “Take care of my daughter, car, etc. for me.”

Behavior Changes:

- Eating habits
- Hygiene habits
- Sleeping habits
- Giving away possessions
- Refuses visits or mail
- Talks about death/dying
- Any self-injury
- Crying

Mood Changes:

- Hopelessness
- Withdrawn
- Depressed

CONSEQUENCES FOR PERPETRATORS:

- If you are found to have engaged in sexual abuse or sexual harassment of another offender, you will be administratively disciplined and may be subject to criminal penalties, including additional prison time.
- You will be required to register as a sex offender upon release.
- You are at a significantly higher risk of contracting a sexually transmitted infection, including HIV.

- Sadness
- Worthlessness
- Helplessness
- Anger
- Fearful

Suicide prevention is everyone's business! Look out for one another! If you or someone you know is experiencing mental health issues, mental health distress, or thoughts of suicide, inform a staff member immediately!