

NDOC Temporary Administrative Regulations Summaries

All regulations are required to be reviewed every three (3) years.

AR 128 - Outside Financial Audits/Reviews	Made Temporary Date: 2/13/17	Previous AR Date: 8/13/10
Summary of changes: The outside financial audits/review reflects only technical and clarification changes.		
AR 139 - National Crime Information Center (NCIC)	Made Temporary Date: 2/13/17	Previous AR Date: 5/20/10
Summary of changes: The NCIC regulation reflects updates to federal and state regulation references, as well as technical and clarification changes.		
AR 144 - Mobile Devices	Made Temporary Date: 2/13/17	Previous AR Date: 10/15/12
Summary of changes: Mobile Devices, formerly known as Telecommunication Devices, was updated to reflect technical and regulatory references; to distinguish between department and non-department owned devices; physical security and data security state requirements, including federal regulations on personal health information (PHI).		
AR 210 - Purchasing, Receiving, and Payment	Made Temporary Date: 2/13/17	Previous AR Date: 2/12/10
Summary of changes: The Purchasing, Receiving, and Payment Regulation included updates to ensure compliance with federal and state purchasing laws; clarification on responsibilities; and State references to policy and procedures.		
AR 212 - Contracts	Made Temporary Date: 2/13/17	Previous AR Date: 9/16/14
Summary of changes: The Contracts Regulation was updated to include references to the appropriate Federal and State regulations; responsibilities; and clarification on internal processes for the request for a new or amended contract.		
AR 269 - Food Services	Made Temporary Date: 2/13/17	Previous AR Date: 9/16/14
Summary of changes: Food Services was updated to reflect technical changes, and to include responsibilities for implementation and management of the regulation; clarified policy that meals were not allowed to be used as a disciplinary measure as well as inspection and monitoring time frames.		
AR 346 - Nepotism/Fraternization	Made Temporary Date: 2/13/17	Previous AR Date: 5/20/10
Summary of changes: Formerly known as the Nepotism Regulation, AR 346 was updated to provide clarification on direct line of authority; definition of family members; supervisory relationships; define dating relationships; clarification on when and how an employee would disclose relationships; and provide mechanisms for the rural and frontier counties with limited recruitment, to meet the provisions of the regulation through a waiver.		

AR 365 - Respirable Cristalline Silica (New AR)	Made Temporary Date: 2/13/17	Previous AR Date: New Regulation
<p>Summary: The Occupational Safety and Health Administration (OSHA) has issued a final rule to curb lung cancer, silicosis, chronic obstructive pulmonary disease and kidney disease in America's workers by limiting their exposure to respirable crystalline silica. NDOC has implemented this new regulation to ensure compliance with the rules, and includes a requirement for an operational procedure to minimize any potential impact. The regulation requires compliance by June 23, 2017.</p>		
AR 420 - Inmate Death or Serious Injury Procedure	Made Temporary Date: 1/3/17	Previous AR Date: 3/18/14
<p>Summary of changes: The Inmate Death or Serious Injury Procedure was updated to identify responsible parties for securing a crime scene; ensuring the humane treatment and appropriate procedures for any inmate found hanging; appropriate reporting and notifications, including notification of next of kin. The regulation also reflects technical changes to state law references and ACA Standards.</p>		
AR 423 - Institution/Facility Entrance Scanning Procedure	Made Temporary Date: 1/3/17	Previous AR Date: 6/17/12
<p>Summary of changes: Formerly, the Institution/Facility Entrance Procedure, the regulation has been updated with technical and administrative language, which includes defining when a hand-held scanner will be used to maintain safety and security of the facility.</p>		
AR 543 - Transition Center	Made Temporary Date: 1/3/17	Previous AR Date: 9/16/14
<p>Summary of changes: The Transition Regulation was amended to allow the Director of NDOC more flexibility on a case-by-case basis to approve inmates who have been granted parole, and meet the minimum requirements, to be eligible for Transitional Housing. The regulation was also updated to include internal processes for the Nevada Community Re-Entry Program to allow NDOC inmates who have been granted parole, and are past their parole eligibility dates, to be eligible for Transitional Housing. Other changes include technical and administrative updates.</p>		
AR 707 - Inmate Disciplinary Process	Made Temporary Date: 2/13/17	Previous AR Date: 2/12/10
<p>Summary of changes: The Regulation for the Inmate Disciplinary Process reflects significant changes in the rules of conduct and sanctions for addressing inmate violations. The regulation eliminates the stacking of charges (which had previously resulted in an inmate being assigned to ten years of segregation); the severity of sanctions; the ability of the Hearing Officer to reduce or amend a charge; updates to the definition of sexual assault/sexual abuse; clarified several offenses; added two additional charges (failure or refusal to cell as assigned and false reporting); as well as updating technical, administrative and legal references. This works to bring Nevada in compliance with ACA standards.</p>		
AR 740 - Inmate Grievance Procedure	Made Temporary Date: 1/3/17	Previous AR Date: 9/16/14
<p>Summary of changes: The Inmate Grievance Regulation was updated to set forth the requirements and procedures for the administrative processes that inmates must utilize to resolve addressable grievances and claims. This regulation minimizes the duplication of internal processes by incorporating a "partially granted" option, in lieu of only having the option of granted or denied. The regulation also clarifies the</p>		

requirement for the inmate to demonstrate loss or harm; and the action or remedy that would satisfy the grievance. There are also restrictions on duplicate grievances for decisions already adjudicated, and updates to the procedures for inmates who abuse the inmate grievance procedure. The procedures have been updated to implement the changes, as well as references to State Law and ACA Standards.

AR 801 - Correctional Programs/Classes/Activities

Made Temporary Date:
2/13/17

Previous AR Date:
10/15/13

Summary of changes: As part of the Second Chance Act Grant, NDOC is required to review policies regarding correctional programs to ensure they reflected the use of evidence-based and best correctional practices policies and procedures in the delivery of programs. The regulation includes language that defined evidence-based practices; responsibilities; positive correctional management practices; and clarified the processes and delivery of programs, classes and activities. The regulation also includes technical updates to federal and state regulations; ACA Standards; and defines responsibilities within the Department.

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
128**

OUTSIDE FINANCIAL AUDITS/REVIEWS

Supersedes: AR 128 (Temporary, 07/07/10); 08/13/10
Effective date: 02/13/2017 (Temporary)

AUTHORITY:

NRS 218G; NRS 353A; State Administrative Manual (SAM) 2400

PURPOSE

An audit is an evaluation of a person, organization, process or product. Audits are performed to determine the validity and reliability of information and can also provide an assessment of an organization's internal controls. The regulation provides continuity in responding to outside financial audits and/or reviews.

RESPONSIBILITY

The Deputy Director of Support Services is responsible for the administration and implementation of policies and procedures for outside financial audits and/or reviews.

All Department employees are responsible to comply with procedures set forth in this regulation.

128.01 AUDIT NOTIFICATION

1. The Deputy Director of Support Services should be notified within 24 hours when an employee receives verbal or written communication of an outside financial audit.
2. The Deputy Director of Support Services may designate an employee as a liaison for the audit.
3. If a response is anticipated to result in a material compromise to the Department's effectiveness, the Deputy Director Support Services shall notify the Director of any audit or review and seek guidance whether the formal response will be from the Director or a designee.
4. Department employees should assist the entity conducting the audit with obtaining any requested information in a cooperative and timely manner (NRS 218G).

128.02 AUDIT RESPONSE

1. The Director/designee should develop a written response to the report of preliminary audit findings and recommendations, which should include a written statement of acceptance, explanation or rebuttal concerning the audit findings, within the timeframes set forth under NRS 218G and SAM 2404.0.
2. If the audit recommendations include any corrective actions, the Director/designee should develop a plan of corrective action and respond to the entity conducting the audit in accordance with NRS 218G and SAM 2402.0.
3. Audit compliance reports for any remaining recommendations should be prepared in accordance with NRS 218G, SAM 2402.0, and SAM 2404.0.
4. The completion date for the Department's audit responses should be on or before five (5) working days of the final due date, in order to allow the Director/designee time for review and approval.
5. Interim reports, if any, will continue on a schedule determined by the auditors, or until all accepted recommendations have been fully implemented, or the Department determines no further action will be taken.

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.
2. This regulation is subject to audit and requires an audit as part of the annual review of internal controls pursuant to SAM 2418.0.


James Dzurenda, Director

2/13/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
128**

OUTSIDE FINANCIAL AUDITS/REVIEWS

Supersedes: AR 128 (Temporary, 07/07/10); [08/13/10](#)
Effective date: [08/13/10](#) [02/13/2017](#) (Temporary)

AUTHORITY:

NRS 218~~G.770—218.893~~; NRS 353A.025; [State Administrative Manual \(SAM\) 2400](#)

PURPOSE

An audit is an evaluation of a person, organization, process or product. Audits are performed to determine the validity and reliability of information and can also provide an assessment of an organization's internal controls. The regulation provides continuity in responding to outside financial audits and/or reviews.

RESPONSIBILITY

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128.01 AUDIT NOTIFICATION

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2. The Deputy Director of Support Services may designate an employee as a liaison for the audit.
3. If a response is anticipated to result in a material compromise to the Department's effectiveness, ~~t~~The Deputy Director Support Services shall notify the Director of any audit or review and seek guidance whether the formal response will be from the Director or a designee.

4. Department employees should assist the entity conducting the audit with obtaining any requested information in a cooperative and timely manner (NRS 218~~G.775(2); NRS 218.780~~).

128.02 AUDIT RESPONSE

1. The Director/designee should develop a written response to the report of preliminary audit findings and recommendations, which should include a written statement of acceptance, explanation or rebuttal concerning the audit findings, within the timeframes set forth under NRS 218~~G.821~~ and SAM 2404.0.

2. If the audit recommendations include any corrective actions, the Director/designee should develop a plan of corrective action and respond to the entity conducting the audit in accordance with NRS 218~~.8235G~~ and SAM 2402.0.

3. Audit compliance reports for any remaining recommendations should be prepared in accordance with NRS 218~~.8245G~~, SAM 2402.0, and SAM 2404.0.

4. The completion date for the Department's audit responses should be on or before five (5) working days of the final due date, in order to allow the Director/designee time for review and approval.

5. Interim reports, if any, will continue on a schedule determined by the auditors, or until all accepted recommendations have been fully implemented, or the Department determines no further action will be taken.

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.

2. This regulation is subject to audit and requires an audit as part of the annual review of internal controls pursuant to SAM 2418.0.

~~Howard Skolnik~~James Dzurenda, Director

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
139**

NATIONAL CRIME INFORMATION CENTER (NCIC)

Supersedes: AR 139 (Temporary, 02/08/10); 05/20/2010
Effective Date: 02/13/2017 (Temporary)

AUTHORITY: NRS 179A; NRS 209.131; NRS 193.50; Title 28, C.F.R., Part 20;
Title 28, C.F.R., Section 534

PURPOSE

The National Crime Information Center (NCIC) is a branch of the Federal Bureau of Investigation (FBI), providing an online access for authorized individuals about crimes, and in some cases information on criminals. All information that is provided from many criminal justice agencies is designed to be accessible only to authorized users. This regulation ensures NDOC is compliant with federal and state regulations to ensure the integrity and privacy of data.

RESPONSIBILITY

The Offender Management Division (OMD) is responsible to regulate the procurement, use, dissemination of information contained in the National Crime Information Center (NCIC).

The Inspector General (IG) Office is responsible for the computerized data base of documented criminal justice information, and for ensuring federal and state compliance with NCIC.

139.01 NCIC PROCEDURES

1. The Nevada Department of Corrections (NDOC) will not disseminate any criminal history information obtained through direct access to the NCIC to any other agency or person.
2. The NCIC program will only be used to obtain criminal history and wants/warrants information on:
 - A. Applicants to visit inmates;
 - B. Prospective NDOC employees;
 - C. Promotions for current employees;
 - D. Records check of current employees every three (3) years;
 - E. Person under contract with NDOC;
 - F. Applicants applying for volunteer status;

- G. Persons suspected of committing criminal activity;
- H. Persons suspected of conspiring with or aiding and abetting an inmate to commit a crime;
- I. Inmates incarcerated in NDOC;
- J. Escape process;
- K. Inmates discharging.

3. Request for NCIC background checks must be submitted on DOC Form 2017 NCIC Criminal History Check to the designated staff for processing. Persons applying for employment, contract work, volunteer, or visitor must provide the written consent form on DOC Form 1021, Written Consent for NCIC Criminal History Check, prior to an NCIC records check being conducted.

A. Printouts are for review purposes only and must be destroyed and not maintained in any file.

B. Printouts with verified information, such as wants/warrants may be maintained as long as they are being utilized.

C. Consent is not required for records check on incarcerated persons or persons suspected of committing a criminal offense.

4. Neglect or misuse of the NCIC system may result in administrative, civil, or criminal action being initiated.

5. An authorized staff member will be responsible for the entry of all escape warrants.

139.02 PRISON NUMBER CP-NUMBER

1. A master roster designating who may request NCIC background checks will be maintained and up-dated on a quarterly basis by the designated OMD staff.

A. Request for P-Numbers may be submitted to OMD

B. Such requests must detail purpose of such access and have the Warden's approval.

2. The contents of the P-Number master roster will contain the following information

A. Name;

B. Title;

C. Specific NCIC services authorized for the employee and;

D. Specific Nevada Highway Patrol Communications Center Services.

3. Staff are only permitted to request or provide information with the services for which they have been authorized.
4. The roster will be provided to the Nevada Highway Patrol, Wardens, Division Heads and the Office of the Inspector General.

APPLICABILITY

1. This Administrative Regulation requires an operational procedure for OMD; institutions/facilities and the IG office.
2. This Administrative Regulation requires an audit.

REFERENCES

ACA, 4th edition, Standards Supplement 4-4061
NCJIS Administrative Policy 07/2016

ATTACHMENTS

NCIC Criminal History Check DOC Form 2017
Written Consent for NCIC Criminal History Check, DOC Form 1021, updated 12/2015


James Dzurenda, Director

2/13/17
Date

**STATE OF NEVADA
DEPARTMENT OF CORRECTIONS**

TO: NCIC OPERATOR

FROM: _____ P# _____ DATE SUBMITTED: _____

The following applications are being submitted for criminal history background checks.
The applications have been reviewed for accuracy and completeness.

	NAME OF APPLICANT:	INMATE NAME & NDOC #	NCIC COMMENT/DISPOSITION
1			
2			
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7			
8			
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23			
24			
25			

TOTAL NUMBER OF APPLICANTS: _____ NCIC COMPLETION DATE: _____

DOC - 2017 (2/08)

Central Administration
P.O. Box 7011
Carson City, NV 89701

Nevada Department of Corrections
Consent for Release of Criminal History Records
Job Applicants & Contractors
Please PRENT clearly all information

Southern
Administration
3955 W. Russell Rd.
Las Vegas, NV 89118

1. NAMES AND ADDRESSES

Applicant's Legal Name _____
Last First MI

Please complete this questionnaire in its ENTIRETY. ****ANY omission or false statement is SUFFICIENT REASON FOR DENIAL.****

List any other names (alias) you are known by. Include your maiden name and any nicknames, if applicable
(Failure to include all names will result in denial)

Current Physical Address _____
Full Street City State Zip

Current Mailing Address _____
Full Street City State Zip

Previous Address _____
Full Street City State Zip

Home Phone Number () Cell Phone Number ()

Email address: _____

List any other states you have lived in; if none enter N/A _____

Occupation or Business _____ Employer _____

Business Phone () Contact Name: _____

Have you ever worked for the Nevada Department of Corrections? Yes No

If Yes, When? _____ Position? _____

Have you *EVER* worked or volunteered in any prison, jail, lockup, community confinement facility, juvenile facility, or other institution? Yes No

If Yes, When? _____ Where? _____

2. IDENTIFIERS

Drivers License and or ID number _____ State _____

Date of Birth _____ Place of Birth _____ Age _____

SSN _____ Gender: Male Female

Race _____ Marital Status: Married Single

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars Marks or Tattoos; if none enter N/A: _____

3. **Criminal History: ALL arrests must be listed, whether there was a conviction or not.** You must also list arrests in other states and countries. Do not exclude anything; any omission of an arrest is sufficient reason for denial.

Have you **EVER** been arrested? Yes or No

Have you **EVER** been convicted of a Felony, Gross Misdemeanor or Misdemeanor? Yes or No

If yes to either of the above, complete the following and attach additional sheets if necessary.

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

4. Have you **EVER** been incarcerated in a Correctional Facility/Prison? Yes or No

If yes, what Facility/Prison(s) and state: _____

Are you currently on Probation? Yes or No If yes, in what state? _____

5. Do you or have you ever visited or corresponded with an inmate incarcerated in any Correctional Facility or Prison? Yes or No

6. Do you know or correspond with anyone on parole/probation? Yes or No

If yes to the above questions, complete the following section and attach additional sheets if necessary.

Name and Inmate Number	Relationship	Indicate whether you visit or write
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7. **Authorization**

Chapter 179A100 of the Nevada Revised Statutes permits an Agency of Criminal Justice to obtain records of criminal history regarding a prospective employee. Consent is not required in order to obtain information reflecting only convictions. Consent is required in order to obtain a complete record of criminal history.

The applicant, contractor or volunteer's signature on this consent form will permit the Department of Corrections to obtain complete information regarding arrests, detention, indictments, information or other formal criminal charges and disposition of charges, including dismissals, acquittals, convictions, sentences, correctional supervision and release.

This information will be used only for purposes of determining employability. Chapter 179A of NRS prohibits an employer from dissemination of this information.

Applicant's Name (please print) _____

Applicant's Signature _____ Date _____

Agency Authorization for Record: Check _____ Date _____

Application Review

For Official Use Only

Approved Denied

Signature of Authorized Personnel _____ Date _____

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
139**

NATIONAL CRIME INFORMATION CENTER (NCIC)

Supersedes: AR 139 (Temporary, 02/08/10); 05/20/2010
Effective Date: 02/13/2017 (Temporary) 05/20/10

AUTHORITY: NRS 179A;
NRS 209.131;
NRS 193.50;
Title 28, C.F.R., Part 20;
Title 28, ~~US Code~~C.F.R., Section 534

PURPOSE

The National Crime Information Center (NCIC) is a branch of the Federal Bureau of Investigation (FBI), providing an online access for authorized individuals about crimes, and in some cases information on criminals. All information that is provided from many criminal justice agencies is designed to be accessible only to authorized users. This regulation ensures NDOC is compliant with federal and state regulations to ensure the integrity and privacy of data.

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2. The NCIC program will only be used to obtain criminal history and wants/warrants information on: (4-4061)

A. Applicants to visit inmates;

B. Prospective NDOC employees;

B-C. Promotions for current employees;

B-D. Records check of current employees every three (3) years;

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~~E.~~ Person under contract with NDOC;

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~~F.~~ Applicants applying for volunteer status;

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~~G.~~ Persons suspected of committing criminal activity;

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~~H.~~ Persons suspected of conspiring with or aiding and abetting an inmate to commit a crime;

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~~I.~~ Inmates incarcerated in NDOC;

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~~J.~~ Escape process;

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~~K.~~ Inmates discharging.

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3. Request for NCIC background checks must be submitted on DOC Form 2017 NCIC Criminal History Check to the designated staff ~~for in the Offender Management Division (OMD) for~~ processing. Persons applying for employment, contract work, volunteer, or visitor must provide the written consent form on DOC Form 1021, Written Consent for NCIC Criminal History Check, prior to an NCIC records check being conducted.

A. Printouts are for review purposes only and must be destroyed and not maintained in any file.

B. Printouts with verified information, such as wants/warrants may be maintained as long as they are being utilized.

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A. Request for P-Numbers may be submitted to OMD

B. Such requests must detail purpose of such access and have the Warden's approval.

2. The contents of the P-Number master roster will contain the following information

A. Name;

B. Title;

~~C. Office Number;~~

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~~D. Pager/Cell Number;~~

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~~E. C.~~ _____ Specific NCIC services authorized for the employee and;

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~~F. D.~~ _____ Specific Nevada Highway Patrol Communications Center Services.

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3. Staff are only permitted to request or provide information with the services for which they have been authorized.

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APPLICABILITY

1. This Administrative Regulation requires an operational procedure for OMD; ~~and~~ institutions/facilities and the IG office.
2. This Administrative Regulation requires an audit.

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REFERENCES

ACA, 4th edition, Standards Supplement 4-4061
[NCJIS Administrative Policy 07/2016](#)

ATTACHMENTS

NCIC Criminal History Check DOC Form 2017
Written Consent for NCIC Criminal History Check, DOC Form 1021, [updated 12/2015](#)

James Dzurenda, Director ~~Howard Skolnik, Director~~
Date

**STATE OF NEVADA
DEPARTMENT OF CORRECTIONS**

TO: **NCIC OPERATOR**

FROM: _____ P# _____ DATE SUBMITTED: _____

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TOTAL NUMBER OF APPLICANTS: _____ NCIC COMPLETION DATE: _____

DOC - 2017 (2/08)



STATE OF NEVADA
DEPARTMENT OF CORRECTIONS

CENTRAL OFFICE
P.O. Box 7011
Carson City, Nevada 89702
(775) 887-3204
fax (775) 887-3391

**CONSENT FOR RELEASE OF CRIMINAL HISTORY RECORDS
JOB APPLICANTS/ VOLUNTEERS
PLEASE PRINT ALL INFORMATION**

1. Names and Addresses			
Applicant's Name _____			
_____	_____	_____	_____
Last First Middle			
List any other names (alias) you are known by (include your maiden name, if applicable)			

Current Address _____			
Full street address			

_____	_____	_____	_____
City State Zip Code			
Current Phone Number _____			
Last Previous Address _____			
Full street address			

_____	_____	_____	_____
City State Zip Code			
List other states you have lived in (if not applicable, indicate none):			

2. Identifiers			
Driver's License Number: _____ State: _____			
Date of Birth: _____ Place of Birth _____ Age: _____			
SSN#: _____ Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>			
Race: _____ Height _____ Weight _____			
Hair Color: _____ Eye Color: _____			
Scars, Marks, Tattoos: _____			
3. Application Review			
Approved <input type="checkbox"/> Disapproved <input type="checkbox"/>			
_____		_____	
Authorizing Signature		Date	

DOC 1021 (9/07)

Central Administration
P.O. Box 7011
Carson City, NV 89701

Nevada Department of Corrections
Consent for Release of Criminal History Records
Job Applicants & Contractors
Please PRINT clearly all information

Southern
Administration
3955 W. Russell Rd.
Las Vegas, NV 89118

1. NAMES AND ADDRESSES

Applicant's Legal Name _____
Last First MI

Please complete this questionnaire in its **ENTIRETY**. ****ANY omission or false statement is SUFFICIENT REASON FOR DENIAL.****

List any other names (alias) you are known by. Include your maiden name and any nicknames, if applicable
(Failure to include all names will result in denial)

Current Physical Address _____
Full Street City State Zip

Current Mailing Address _____
Full Street City State Zip

Previous Address _____
Full Street City State Zip

Home Phone Number () Cell Phone Number ()

Email address: _____

List any other states you have lived in; if none enter N/A _____

Occupation or Business _____ Employer _____

Business Phone () Contact Name: _____

Have you ever worked for the Nevada Department of Corrections? Yes No

If Yes, When? _____ Position? _____

Have you **EVER** worked or volunteered in any prison, jail, lockup, community confinement facility, juvenile facility, or other institution? Yes No

If Yes, When? _____ Where? _____

2. IDENTIFIERS

Drivers License and or ID number _____ State _____

Date of Birth _____ Place of Birth _____ Age _____

SSN _____ Gender: Male Female

Race _____ Marital Status: Married Single

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars Marks or Tattoos; if none enter N/A: _____

3. **Criminal History:** ALL arrests must be listed, whether there was a conviction or not. You must also list arrests in other states and countries. Do not exclude anything; any omission of an arrest is sufficient reason for denial.

Have you **EVER** been arrested? Yes or No

Have you **EVER** been convicted of a Felony, Gross Misdemeanor or Misdemeanor? Yes or No

If yes to either of the above, complete the following and attach additional sheets if necessary.

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Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

4. Have you **EVER** been incarcerated in a Correctional Facility/Prison? Yes or No

If yes, what Facility/Prison(s) and state: _____

Are you currently on Probation? Yes or No If yes, in what state? _____

5. Do you or have you ever visited or corresponded with an inmate incarcerated in any Correctional Facility or Prison?
Yes or No

6. Do you know or correspond with anyone on parole/probation? Yes or No

If yes to the above questions, complete the following section and attach additional sheets if necessary.

Name and Inmate Number	Relationship	Indicate whether you visit or write
_____	_____	_____

7. Authorization

Chapter 179A100 of the Nevada Revised Statutes permits an Agency of Criminal Justice to obtain records of criminal history regarding a prospective employee. Consent is not required in order to obtain information reflecting only convictions. Consent is required in order to obtain a complete record of criminal history.

The applicant, contractor or volunteer's signature on this consent form will permit the Department of Corrections to obtain complete information regarding arrests, detention, indictments, information or other formal criminal charges and disposition of charges, including dismissals, acquittals, convictions, sentences, correctional supervision and release.

This information will be used only for purposes of determining employability. Chapter 179A of NRS prohibits an employer from dissemination of this information.

Applicant's Name (please print) _____

Applicant's Signature _____ Date _____

Agency Authorization for Records Check _____ Date _____

For Official Use Only

Application Review Approved Denied

Signature of Authorized Personnel _____ Date _____

4. Criminal History

Have you ever been arrested or convicted? Yes No If yes, complete the following section; attach additional sheet if necessary.

Charge	Approximate Date	Disposition	City/State
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Position (To be completed by JOB APPLICANT only) Position applying for: _____

6. HAVE YOU EVER BEEN EMPLOYED BY THE NEVADA DEPARTMENT OF CORRECTIONS?
(IF SO NOTE CAPACITY AND DATES OF EMPLOYMENT) _____

7. Authorization

Chapter 179A of the Nevada Revised Statutes permits an Agency of the Criminal Justice to obtain records of criminal history regarding a prospective employee. Consent is not required in order to obtain information reflecting only convictions. Consent is required in order to obtain a complete record of criminal history.

The applicant's signature on this consent form will permit the Department of Corrections to obtain complete information regarding arrests, detention, indictments, information or other formal criminal charges and disposition of charges, including dismissals, acquittals, convictions, sentences, correctional supervision and release.

This information will be used only for purposes of determining employability. Chapter 179A of NRS prohibits an employer from dissemination of this information.

Applicant's Signature

Date

Agency Authorization for Records Check

Date

DOC 1021 (9/07)

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
144**

MOBILE DEVICES

Supersedes: AR 144 (Temporary, 06/21/12); October 15, 2012
Effective Date: 02/13/2017 (Temporary)

AUTHORITY: NRS 209.417; NRS 209.419; NRS 242.057 NRS 212.162

PURPOSE

The purpose of this regulation is to provide guidelines regarding the appropriate use of mobile devices that can be used for data and/or voice communication to protect and secure the safety of inmates, staff and the public.

RESPONSIBILITY

The Deputy Director of Support Services is responsible for the administration of this policy.

The Chief Information Technology (IT) Manager is responsible for the implementation and interpretation of policies for mobile devices.

The Warden or manager of an institution or facility is responsible to ensure that no inmate or staff has access to a mobile device that contradicts existing law and to ensure compliance with this regulation.

All staff members are responsible to have knowledge of and comply with this regulation.

144.01 MOBILE DEVICES

1. Any device or apparatus associated with a device that enables an inmate to communicate with a person outside the facility or institution is considered to be a mobile device.

A. Such items include, but are not limited to, a telephone, a cellular/smart phone, a tablet, e-reader, a transmitting radio or computer that is connected to a computer network through the use of wireless technology or is otherwise capable of communicating with a person or device outside an institution or facility.

B. Inmates may have access to telephones in Silver State Industries that are limited to work related issues. Such phone access must be supervised by NDOC employees.

2. All NDOC employees, representatives of other state agencies, contractors, vendors, or other persons who access NDOC institutions or facilities must have received prior written approval from the Warden or Facility Manager prior to entering any NDOC facility with a mobile device.

- A. The authority cannot be delegated.
 - B. The Warden or Facility Manager's decision can be appealed to a Deputy Director. The Deputy Director's decision is final.
 - C. A Deputy Director or Warden may grant one-time, personal approval for the use of a mobile device under exceptional circumstances, i.e., health, safety, or security.
 - (1) The individual granted such approval must complete and sign DOC Form 006 prior to review or action taken by the Warden, Facility Manager or Deputy Director.
3. All employees are required to sign a Mobile Device Acknowledgment form (DOC Form 1046).
4. Request for approval of possession of mobile devices must be submitted via the Chain of Command using DOC Form 006, Request to Possess Mobile Device. A signed DOC 1046, NDOC Electronic Device Acknowledgment Form, must also be attached to the request.
- A. The Mobile Device forms must be re-submitted if:
 - (1) The mobile device is replaced or upgraded;
 - (2) The employee departs the agency or changes their position; or
 - (3) There is significant change of authorized applications or data.
5. The use of any mobile device is a privilege. Approval may be revoked at any time without cause.
6. All persons authorized to carry a mobile device must file their approval forms with the NDOC Human Resource Office.
7. Upon request of the Inspector General's (IG) Office, all persons authorized to carry a mobile device must consent to review of their telephone records or Internet provider records of the approved mobile device.
- A. Failure to comply will result in an immediate suspension of the privilege, and may result in disciplinary action.
8. Violation of this procedure may be prosecuted under criminal statutes, as well as employee discipline pursuant to AR 339 or inmate discipline pursuant to AR 707.
9. The Department Information Service Officer (ISO) or ISO designee must audit agency Mobile Device agreements on file against Department email accounts with mobile device access enabled, no less than annually. All email accounts found with mobile device access enabled should have mobile device agreements on file which match the mobile device(s) in use by authorized individuals.

144.02 DEPARTMENT ISSUED COMMUNICATION DEVICES

1. NDOC owned mobile devices may include cell phones, lap top computers, tablets, radios, or other electronic device. Any NDOC mobile devices which are issued to employees for use in the operation of their assigned employment duties, remain the property of the NDOC, and must be returned at employment termination or upon request.
2. Users of NDOC owned mobile devices must adhere to the same procedures indicated in section 144.01 above.
3. The possession of an NDOC owned communication device does not allow the employee to claim overtime, compensatory time, stand-by pay or call back pay. A supervisor must pre-approve these types of overtime or pay status in all cases as required in AR 320.

144.3 NON-DEPARTMENT OWNED MOBILE DEVICES

1. NON-NDOC owned mobile devices may include cell phones, lap top computers, e-tablets, radios, or electronically communication devices.
2. Users of NON-NDOC owned mobile devices must adhere to the same procedures indicated in section 144.01 above.
3. The possession of an NON-NDOC owned mobile device does not allow the employee to claim overtime, compensatory time, standby pay or call back pay. A supervisor must pre-approve these types of overtime or pay status in all cases as required in AR 320.
4. NON-NDOC owned mobile devices will not be connected to any Department device or network, directly or indirectly, unless determined by Department management to be a business necessity, and explicitly authorized thorough approval of DOC 006 (request to possess) and DOC 1046 (device acknowledgement) forms.

144.4 PHYSICAL SECURITY

1. Appropriate care will be taken by employees and Department management to ensure that any physical loss or damage of a mobile device is minimized.
2. Any mobile devices that are, or are suspected to be, lost or stolen must be reported to the Department ISO / MIS Help Desk, within 24-hours, or sooner.

144.5 DATA SECURITY

1. Mobile devices used to store Department data shall be password protected, in accordance with appropriate State, and Department security policies, standards, and procedures. If the mobile device cannot meet the requirements, the device not be allowed to access the Department internal network, nor connect to any device that is attached to the Department internal network.
2. Confidential, restricted or internal use data will only be maintained on mobile devices if said data is encrypted in accordance with the identified data classification level. Examples of these

types of data include, but are not limited to: Internal-use only memorandums, documents listed as confidential, HIPAA/PHI privacy act protected information.

3. Mobile devices that contain restricted or confidential data must meet authentication requirements for the identified data classification level. Data will not be stored, transported or otherwise maintained on a device that is not in compliance with the identified data classification level.

APPLICABILITY

1. This AR requires an Operational Procedure (OP) for the division, institution and facility.
2. This AR requires an audit.

REFERENCES

ACA 4TH Edition 4-4100,

ATTACHMENTS

DOC 1046 – Mobile Device Acknowledgement Form
DOC Form 006 – Request to Possess Mobile Devices


James Dzurenda, Director

2/13/17
Date

**MOBILE DEVICES
NDOC INSTITUTIONS/FACILITIES
ACKNOWLEDGEMENT FORM**

I, _____ have read and
(print)

understand the Mobile Devices Policy as outlined in AR 144.

Signature

Date

cc: Personnel File

DOC 1046 (03/08)
(AR 144)



NDOC Request to Possess Mobile Devices

Name: _____ NDOC Employee ID Number: _____

If **not** a NDOC employee: Name of employer/business: _____

Type of business: _____ Specific Contract **or** Expiration Date: _____

Business address: _____ phone #: _____

Location(s) where Mobile device will be used: Institution/Division: _____

Description of Mobile Device:

Name: _____

Make: _____

Model: _____

Serial Number: _____

Telephone Number, if applicable: () _____

Basis for Request: _____

The Employee is responsible to:

- Completely fill out this form and submit for signatures
- Protect the mobile device and data from loss, destruction, unauthorized modification or disclosure
- Immediately report loss or theft of the mobile device, or suspected IT security breach to the Department ISO / ITS Help Desk

I understand and agree to abide by the Nevada Department of Corrections (NDOC) Administrative Regulation 144. I further agree such usage may be revoked at any time without cause; upon request of the Inspector General's Office to provide the telephone records or internet provider records; and violation of this procedure may result in disciplinary action and/or criminal prosecution. I understand that the possession of an (non)-NDOC owned communication device does not allow me to automatically claim overtime, comp time, standby pay or call back pay. I understand that a supervisor must pre-approve these types of overtime or pay status in all cases as required in AR 320.

Requestor Signature _____

Date _____

RECOMMENDATIONS:

Requestor's supervisor (including non-NDOC agencies):

Approve Deny

Signature _____

Date _____

Warden/Division Head Recommendation:

Approve Denied

Signature _____

Date _____

APPEALS ONLY - Deputy Director:

Approved Denied

Signature _____

Date _____

NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
144

TELECOMMUNICATION DEVICES**MOBILE DEVICES**

Supersedes: AR 144 (Temporary, 06/21/12); [October 15, 2012](#)
Effective Date: ~~—October 15, 2012~~ [2012/13/2017](#) (Temporary)

AUTHORITY: NRS 209.417.; [NRS 209.419.](#); ~~NRS 242.057.~~ ~~AB 106~~ [NRS 212.162](#)

PURPOSE

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[The purpose of this regulation is to provide guidelines regarding the appropriate use of mobile devices that can be used for data and/or voice communication to protect and secure the safety of inmates, staff and the public.](#)

RESPONSIBILITY

[The Deputy Director of Support Services is responsible for the administration of this policy.](#)

[The Chief Information Technology \(IT\) Manager is responsible for the implementation and interpretation of policies for mobile devices.](#)

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[^]
The Warden or manager of an institution or facility is responsible to ensure that no inmate or staff has access to a ~~telecommunication~~mobile device that contradicts existing law [and to ensure compliance with this regulation.](#)

All staff members are responsible to have knowledge of and comply with this regulation.

144.01 TELECOMMUNICATION DEVICES**MOBILE DEVICES**

1. Any device or apparatus associated with a device that enables an inmate to communicate with a person outside the facility or institution is considered to be a ~~telecommunication~~mobile device.

A. Such items include, but are not limited to, a telephone, a cellular/smart phone, a ~~personal digital assistant~~tablet, e-reader, a transmitting radio or computer that is connected to a computer network —through the use of wireless technology or is otherwise capable of communicating with a person or device outside an institution or facility.

B. Inmates may have access to telephones in Silver State Industries that are limited to work related issues. Such phone access must be supervised by NDOC employees.

2. All NDOC employees, representatives of other state agencies, contractors, vendors, or other persons who access NDOC institutions or facilities must have received prior written approval from the Warden or Facility Manager ~~Director~~ prior to entering [any NDOC facility](#) with a ~~telecommunication~~mobile device.

AR 144

A. The authority cannot be delegated.

B. The Warden or Facility Manager's ~~Director's~~ decision can be appealed to a Deputy Director. ~~is final. The Deputy Director's decision is final.~~

C. A Deputy Director or Warden may grant one-time, personal approval for the use of a ~~cell phone~~ mobile device under exceptional circumstances, i.e., health, safety, or security.

(1) The individual granted such approval must complete and sign DOC Form 006 prior to ~~provisional review or action taken approval by the Warden, Facility Manager or Deputy Director.~~

~~(2) The completed DOC Form 006 must be forwarded to the Director for review.~~

3. All employees are required to sign a ~~Telecommunication~~ Mobile Device Acknowledgment form- (DOC Form 1046).

4. Request for approval of possession of ~~telecommunication~~ mobile devices must be submitted via the Chain of Command using DOC Form 006, Request to Possess ~~Telecommunication~~ Mobile Device. A signed DOC 1046, NDOC ~~Telecommunication~~ Electronic Device Acknowledgment Form, must also be attached to the request.

A. The Mobile Device forms must be re-submitted if:

(1) The mobile device is replaced or upgraded;

(2) The employee departs the agency or changes their position; or

(3) There is significant change of authorized applications or data.

5. The use of any ~~telecommunication~~ mobile device is a privilege. Approval may be revoked at any time without cause.

6. All persons authorized to carry a ~~telecommunication~~ mobile device must file ~~have~~ their approval forms with the NDOC Human Resource Office. ~~on their person at all times.~~

7. Upon request of the Inspector General's (IG) Office, all persons authorized to carry a ~~telecommunication~~ mobile device must consent to review of their telephone records or Internet provider records of the approved ~~telecommunication~~ mobile device.

—A. Failure to comply will result in an immediate suspension of the privilege, and may result in disciplinary action.

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~~8. At no time will NDOC employees (other than authorized MIS Division staff), representatives of other state agencies, contractors, vendors or other persons who access NDOC institutions or facilities remove or relocate any part of an information technology or telecommunications device, including computers, network equipment, telephones or telephone sets, etc.~~

98. Violation of this procedure may be prosecuted under criminal statutes, as well as employee discipline pursuant to AR 339 or inmate discipline pursuant to AR 707.

109. The Department Information Service Officer (ISO) or ISO designee must audit agency Mobile Device agreements on file against Department email accounts with mobile device access enabled, no less than annually. All email accounts found with mobile device access enabled should have mobile device agreements on file which match the mobile device(s) in use by authorized individuals.

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144.2 144.02 DEPARTMENT ISSUED COMMUNICATION DEVICES

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1. NDOC owned ~~communication-mobile~~ devices may include cell phones, lap top computers, e-tablets, radios, or other electronic devices. Any NDOC ~~communication-mobile~~ devices which are issued to employees for use in their operation of their assigned employment duties, remain the property of the NDOC, and must be returned at employment termination or upon request.

2. Users of NDOC owned ~~communication-mobile~~ devices must adhere to the same procedures indicated in section 144.01 above.

3. The possession of an NDOC owned communication device does not allow the employee to claim overtime, compensatory time, stand-by pay or call back pay. A supervisor must pre-approve these types of overtime or pay status- in all cases as required in AR 320.

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144.3 NON-DEPARTMENT OWNED COMMUNICATIONMOBILE-DEVICES

1. NON-NDOC-NDOC owned ~~communication-mobile~~ devices may include cell phones, lap top computers, e-tablets, radios, or electronically communication devices.

2. Users of NON-NDOC owned ~~communication-mobile~~ devices must adhere to the same procedures indicated in section 144.01 above.

3. The possession of an NON-NDOC owned ~~communicationmobile~~ device does not allow the employee to claim overtime, compensatory time, standby pay or call back pay. A supervisor must pre-approve these types of overtime or pay status- in all cases as required in AR 320.

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4. NON-NDOC owned ~~communicationmobile~~ devices will not be connected to any Department device or network, directly or indirectly, unless determined by Department management to be a business necessity, and explicitly authorized thorough approval of DOC 006 (request to possess) and DOC 1046 (device acknowledgement) forms.

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144.4 PHYSICAL SECURITY

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1. Appropriate care will be taken ~~by~~ employees and Department management to ensure that any physical loss or damage of a mobile device is minimized.

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~~A. Employees will not leave any mobile device unattended, and will physically secure mobile devices when not actively in use.~~

~~B. Any mobile devices that are not in use on a daily basis, or that are left in the office overnight will be physically secured in a locked cabinet, container or secured area.~~

2. ~~C. Any mobile devices that are, or are suspected to be, lost or stolen must be reported immediately~~ to the Department ISO / MIS Help Desk, ~~within 24-hours, or sooner.~~

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Biometric access controls are recommended for all mobile devices that:

~~A. Have such capability, and~~

~~B. Will be used to process or maintain confidential or sensitive data.~~

144.5 — DATA SECURITY

1. Mobile devices used to store Department data ~~will~~shall be password protected, in accordance with appropriate State, and Department security policies, standards, and procedures. If the mobile device cannot meet the requirements, ~~the device then it will~~ not be allowed to access the Department internal network, nor connect to any device that is attached to the Department internal network.

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~~2. Mobile devices will have an inactivity timeout of not more than 10 minutes that will set the mobile device into a power off or locked state if applicable. After the inactivity timeout occurs, it will be necessary to re-authenticate to gain access to the functions of the mobile device.~~

32. Confidential, restricted or internal use data will only be maintained on mobile devices if said data is encrypted in accordance with the identified data classification level. Examples of these types of data include, but are not limited to: Internal-use only memorandums, documents listed as confidential, HIPAA/PHI privacy act protected information.

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43. Mobile devices that contain restricted or confidential data must meet authentication requirements for the identified data classification level. Data will not be stored, transported or otherwise maintained on a device that is not in compliance with the identified data classification level.

~~5. Mobile devices must be reviewed for the Operating System (OS) version and patch level no less than once every six months, if applicable, and the OS will be upgraded with any appropriate patches at that time. All mobile devices will utilize updated anti virus protection appropriate to the OS, if such anti virus software is applicable. Mobile devices should also contain appropriate firewall software or hardware, if such firewall software is applicable.~~

~~6. All Department data that passes through a wireless mobile device connection will be encrypted to ensure secure transport, as wireless communications from mobile devices generally pass through networks in a readable state, and are able to be intercepted by others.~~

APPLICABILITY

1. This AR requires an Operational Procedure (OP) for the division, institution and facility.
2. This AR requires an audit.

REFERENCES

ACA 4TH Edition 4-4100,

ATTACHMENTS

DOC 1046 – Mobile Device Acknowledgement Form
DOC Form 006 – Request to Possess Mobile Devices

James Dzurenda, Director

Date

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AR 144

Page 6 of 10

ATTACHMENTS

DOC 1046—TelecommunicationElectronic Device Acknowledgement Form
DOC Form 006—Request to Possess TelecommunicationMobile Devices

James G. Cox, Director

Date

**ELECTRONIC-MOBILE DEVICES
NDOC INSTITUTIONS/FACILITIES
ACKNOWLEDGEMENT FORM**

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I, _____ have read and
(print)

understand the Electronic-Mobile Devices Policy as outlined in AR 144.

Signature

Date

cc: Personnel File

DOC -1046 (03/08)
(AR 144)

AR 144

Page 8 of 10

NDOC Request to Possess ~~Telecommunication~~ Mobile Devices

Name: _____ NDOC Employee ID Number: _____

If **not** a NDOC employee: Name of employer: _____

Specific Contract *or* Expiration Date: _____

Type of business: _____ Business phone #: _____

Business address: _____

Location where ~~telecommunication~~ Mobile device will be used: Institution/Division: _____

Description of ~~Telecommunication~~ Mobile Device:

Name: _____

Make: _____

Model: _____

Serial Number: _____

Telephone Number, if applicable: () _____

Basis for Request: _____

The Department is responsible to:

- ~~Authorize the employee's mobile device in support of the approved application(s) and data~~
- ~~Understand and enforce all provisions of AR 144~~
- ~~Work with the employee to establish appropriate physical and data security controls for mobile devices that are approved to contain Department data~~
- ~~Ensure established security controls are consistently utilized by the employee~~

The Employee is responsible to:

- ~~Understand and adhere to all provisions of AR 144~~
- Completely fill out this form and submit for signatures
- Protect the mobile device and data from loss, destruction, unauthorized modification or disclosure
- Immediately report loss or theft of the mobile device, or suspected IT security breach to the Department ISO / MHITS Help Desk

I UNDERSTAND AND AGREE TO ABIDE BY THE NEVADA DEPARTMENT OF CORRECTIONS (NDOC) ADMINISTRATIVE REGULATION 144. I FURTHER AGREE SUCH USAGE MAY BE REVOKED AT ANY TIME WITHOUT CAUSE; UPON REQUEST OF THE INSPECTOR GENERAL'S OFFICE TO PROVIDE THE TELEPHONE RECORDS OR INTERNET PROVIDER RECORDS; AND VIOLATION OF THIS PROCEDURE MAY RESULT IN DISCIPLINARY ACTION AND/OR CRIMINAL PROSECUTION. I UNDERSTAND THAT THE POSSESSION OF AN (NON)-NDOC OWNED COMMUNICATION DEVICE DOES NOT ALLOW ME TO AUTOMATICALLY CLAIM OVERTIME, COMP TIME, STANDBY PAY OR CALL BACK PAY. I UNDERSTAND THAT A SUPERVISOR MUST PRE-APPROVE THESE TYPES OF OVERTIME OR PAY ~~STATUS~~ INSTATUS IN ALL CASES AS REQUIRED IN AR 320.

Requestor Signature

Date

RECOMMENDATIONS:

Requestor's supervisor (including non-NDOC agencies): _____

Signature

Date

Approve Disapprove

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Warden/~~Deputy Director~~ Division Head: _____

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 Signature _____ Date _____ Approve Disapprove
 Deputy Director North/South APPEALS ONLY: _____

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 Signature _____ Date _____ Approve Disapprove
FINAL APPROVAL Director: _____

 Signature _____ Date _____ Approve Disapprove

cc: Requestor, Warden, Deputy Director, P-File, Division Head, File, IT Department NDOC Form 006 (XXX)

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**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
210**

PURCHASING, RECEIVING AND PAYMENT

Supersedes: AR 210 (Temporary, 01/15/10); 02/12/10
Effective Date: 02/13/17 (Temporary)

AUTHORITY: NRS 209.131, Chapter 333, 414.0345, 616A.310; NAC Chapter 333; State Administrative Manual (SAM) Chapter 1500

PURPOSE: The purpose of the Purchasing, Receiving, and Payment AR is to establish a framework to be applied in compliance with the relevant legislation and policies under which the Department is bound, and to maximize the benefits to the Department that can be delivered through an effective and efficient procurement process.

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies.

Business Managers are responsible to review all Stores Requisitions based on the needs of the institution/facility/division/program and the legislatively-approved budget, ensure completeness of the purchase request, and the request is made in compliance with state regulations and Department policies and procedures.

The Fiscal Services Budget Section is responsible to review and approve, or deny, the purchase requests based on the availability of appropriate funds.

The Purchasing Division is responsible to review approved Stores Requisitions and issue Purchase Orders (PO) for requests that are in compliance with state regulations and Department policies and procedures as they pertain to Purchasing. Purchasing will close POs once the goods/services have been received by the institution/facility/division, and forward the appropriate paperwork to the Fiscal Services Accounting Section for payment.

Fiscal Services Accounting Section is responsible to ensure timely, accurate payment for goods/services received upon receipt of all the appropriate documents to support the completion and payment of a transaction.

210.01 STORES REQUISITIONS

1. A Stores Requisition (SR) form (DOC-520E) must be initiated by each institution/facility/division for all purchases of goods/services.
2. All SRs should be properly completed. Failure to properly complete the SR form will result in the document being returned to the Business Manager/designee. Confirming vendor quotation should be attached to the SR, where applicable.
3. All SRs should have two (2) signatures authorizing the request: one (1) from the Business Manager/designee and one (1) from the Fiscal Services Budget Division.
4. Pursuant to NRS 333.810, failure to comply with state regulations for the approval of good or services may result in the individual being held personally liable for the payment of the good/services, and the contract shall be void.
 - A. The Business Manager has the responsibility to know if funds for the purchase of any goods/services are available and which goods/services were legislatively approved for purchase in each fiscal year.
5. It is the Business Manager's responsibility to track the warranty for every piece of equipment assigned to the institution/facility/division, including warranties for building systems such as boilers, HVAC units, etc. and to clearly indicate on the Store Requisition if there is warranty coverage for the expenditure the NDOC is to incur and provide all information as to the filing a claim for the reimbursement to recoup the costs.
6. SRs may not be submitted for more than three (3) months of goods/services unless approved by the Chief or Assistant Chief of Fiscal Services.

210.02 PURCHASE ORDERS

1. Purchase requests must be submitted to the Purchasing Division on the SR form.
2. Drawdown Purchase Orders (POs) are authorized for a period of time, not to exceed one (1) fiscal year, as determined by the Business Manager and Fiscal Services Budget Section.
3. The Chief/Assistant Chief of Fiscal Services, Chief of Purchasing & Inmate Services and Budget Analysts may cancel a PO if, in their judgment, the PO is no longer required upon confirmation from the Business Manager that the goods/services have not been received.
4. Once canceled, a PO may not be reissued.

210.03 SERVICES

1. The services of independent contractors may be requested for a PO in accordance with the scope of work and dollar limits as set forth in the SAM §1552.0.
2. The following terms and conditions must be attached to all services purchased with a PO:
 - A. Vendor must provide information about any applicable warranty(ies) for the service(s) provided.
 - B. Vendor will not receive payment until the Department has verified the work as satisfactory, or based on the contracted schedule.
 - C. Vendor must provide proof of Nevada Workers' Compensation Insurance before commencing work. Sole proprietors as defined under NRS 616A.310 may reject Workers' Compensation Insurance coverage by providing an Affidavit of Rejection of Coverage per SAM 516.0.
 - D. The scope of work must be attached to the Purchase Order.
3. If the dollar amount and scope of work exceed the limits allowed on a PO per SAM 1552.0, a service contract is required in accordance with AR 212.

210.04 RECEIVING AND PAYMENT

1. Receivers must be completed for all goods/services received by the Department and sent to the Purchasing Division timely to ensure payment is made to the vendors within five working days in accordance with NRS 333.460. A valid receiver includes a clear detail of all goods/services received, a legible staff name and received date. Faxed/scanned copies of the receivers are acceptable.
2. The Purchasing Division will forward the appropriate paperwork to the Fiscal Services Accounting Section to process the payment.

210.05 EMERGENCY PURCHASES

1. Emergency purchases are those necessary to protect the health or safety of inmates, staff or the institution itself as defined in NRS 414.0345 and NAC 333.114.
2. All emergency purchases must be requested on a SR and should be signed by the Deputy Director, Warden, Division Head or Business Manager.

3. Justification detailing the circumstances leading to the emergency purchase must be attached to the SR as documentation of the emergency. No emergency purchases will be processed by the Purchasing Division without detailed justification.

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.
2. This regulation requires an internal audit, as part of the annual review of internal controls pursuant to SAM 2418.0.

REFERENCES

ACA Standards 4-4028, 4-4029, 4-4031, 4-4032, 4-4038 and 4-4041


James Dzurenda, Director

2/13/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
210**

PURCHASING, RECEIVING AND PAYMENT

Supersedes: AR 210 (Temporary, 01/15/10); ~~AR 210 (02/12/10)~~
Effective Date: ~~02/12/10~~ 02/13/17 (Temporary)

AUTHORITY: NRS 209.131, ~~Chapter 333, 414.0345, 616A.310-010~~; NAC ~~Chapter 333.010~~; State Administrative Manual (SAM) Chapter 1500

PURPOSE: The purpose of the Purchasing, Receiving, and Payment AR is to establish a framework to be applied in compliance with the relevant legislation and policies under which the Department is bound, and to maximize the benefits to the Department that can be delivered through an effective and efficient procurement process.

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies.

~~It is the responsibility of the Business Managers are responsible~~ It is the responsibility of all supervisors to review all Stores Requisitions based on the needs of the institution/facility/division/program and the legislatively-approved budget, ensure completeness of the purchase request, requests to ensure and the request is made in compliance with state regulations and Department policies and procedures. NRS and NAC chapters 333, the State Administrative Manual, and Nevada Department of Corrections (NDOC) regulations, policies and procedures.

~~It is the responsibility of the Fiscal Services Division assigned NDOC Fiscal Services Budget Analyst~~ Section is responsible to review and approve, or deny, Stores Requisitionthe purchase requests by verifying based on the availability of appropriate funds. Legislative approval to purchase the goods/services, the appropriateness of the request, and the availability of funds for the purchase.

~~It is the responsibility of Central~~ The NDOC Purchasing Division is responsible to initiate review an approved Stores Requisitions and issue Purchase Orders (PO) for requests that are in compliance with state regulations and Department policies and procedures as they pertain to Purchasing. the Purchase Order process after receiving an approved Stores Requisition, Purchasing will and to close the Purchase Order POs once

the goods/services have been received by the institution/facility/division, and forward the appropriate paperwork to the Fiscal Services Accounting Section for payment.

~~It is the responsibility of the NDOC~~Fiscal Services Accounting Section is responsible to ensure timely, accurate payment for goods/services received ~~consistent with receiving upon receipt of~~ all the appropriate documents to support the completion and payment of a transaction.

210.01 STORES REQUISITIONS

1. An ~~Electronic~~ Stores Requisition (SR) form (DOC-520E), must be initiated by each institution/facility/division for all purchases of goods/services.
2. All SRs should be properly completed. Failure to properly complete the SR form will result in the document being returned to the ~~sender~~Business Manager/designee. Confirming vendor quotation should be attached to the SR, where applicable.
3. All SRs should have ~~two (2) three~~ signatures authorizing the request: ~~one from the individual requesting the goods/services; one (1) from the institution's Business Manager/designee; and one (1) the final signature~~other from the ~~assigned~~Fiscal Services Budget Analyst~~Division. Fiscal Services section in Central Office.~~
4. Pursuant to NRS 333.810, failure to comply with state regulations for the approval of good or services may result in the individual being held personally liable for the payment of the good/services, and the contract shall be void. Failure to submit an SR and obtain proper signatures approvals prior to the purchase of goods/services is considered an illegal purchase. The individual responsible for an illegal purchase may be held personally liable for payment of the goods/services (NRS 333.810).
 - A. The Business Manager has the responsibility to know if funds for the purchase of any goods/services are available and which goods/services were legislatively approved for purchase in each fiscal year.
5. It is the Business Manager's responsibility to track the warrantyies for every piece of equipment assigned to the ~~it~~ institution/facility/division, including warranties for building systems such as boilers, HVAC units, etc. and to clearly indicate on the Store Requisition if there is warranty coverage for the expenditure the NDOC is to incur and provide all information as to the filing a claim for the reimbursement to recoup the costs.
6. SRs may not be submitted for more than three (3) months ~~worth~~ of goods/services, unless approved by the Chief or Assistant Chief of Fiscal Services.

210.02 PURCHASE ORDERS

1. Purchase Order (PO) requests must be submitted to ~~Central~~the Purchasing Division on the SR form. ~~There will be no "walk-through" Pos issued by Central Purchasing except for emergencies as defined in Section 210.05.~~
2. Drawdown Purchase Orders (POs) are authorized ~~for a maximum of three (3) months~~ for a period of time, not to exceed one (1) fiscal year, as determined by the Business Manager and Fiscal Services Budget Section~~not to exceed one fiscal year.~~ ~~If drawdowns must be open longer than three months, the Chief or Assistant Chief of Fiscal Services must approve.~~

3. ~~The Chief/Assistant Chief of Fiscal Services, and Chief of Purchasing & Inmate Services, the Assistant Chief of Fiscal Services, and Budget Analysts may cancel any a PO if, in their judgment, the PO is no longer required upon confirmation from the Business Manager that the goods/services have not been received, or if no funds are encumbered within 60 days from the date the PO was issued and discussions with the institution's Business Manager do not provide a valid reason to leave the PO open.~~

4. Once canceled, a PO may not be reissued.

210.03 SERVICES

1. The services of independent contractors may be requested ~~on for a Purchase Order~~ PO in accordance with the scope of work and dollar limits as set forth in the [State Administrative Manual AM §1552.0](#).

2. The following terms and conditions must be attached to all services purchased with a ~~Purchase Order~~ PO:

A. Vendor must provide information about any applicable ~~_~~ warranty(ies) for the service(s) provided.

B. Vendor will not receive payment until the Department has verified the work as satisfactory, [or based on the contracted schedule](#).

C. Vendor must provide proof of Nevada Workers' Compensation Insurance before commencing work. Sole proprietors as defined under NRS 616A.310 may reject Workers' Compensation Insurance coverage by providing an Affidavit of Rejection of Coverage [per \(SAM 516.0\)](#).

D. The scope of work must be attached to the Purchase Order.

3. If the dollar amount and scope of work exceed the limits allowed on a ~~Purchase Order~~ PO per SAM 1552.0, a ~~Contract Request Form DOC 555 must be used~~ [service contract is required in accordance with AR 212](#).

210.04 RECEIVING AND PAYMENT

~~1. 1. A Receiver~~ [Receivers](#) must be completed for all goods/services ~~delivered to or received by the Department and forwarded sent to Central the Purchasing Division with 24 hours of receipt~~ [timely to ensure payment is made to the vendors within five working days in accordance with NRS 333.460](#). A valid receiver includes a clear detail of all ~~goods/services~~ [items received, and a legible authorized receiving staff name signature and received date](#). [Faxed/scanned](#) copies of the ~~Receiver~~ [receivers](#) are acceptable.

2. The Purchasing Division will forward the appropriate paperwork to the Fiscal Services Accounting Section to process the payment.

210.05 EMERGENCY PURCHASES

1. Emergency purchases are those necessary to protect the health or safety of inmates, staff or the institution itself as defined in (NRS 414.0345 and, NAC 333.114).

2. All emergency purchases must be requested on a ~~Stores Requisition form~~ SR and should be signed by the Deputy Director, Warden, Division Head or Business Manager ~~institution's Business Manager, Warden or an Associate Warden.~~

3. Justification detailing the circumstances leading to the emergency purchase must be attached to the SR as documentation of the emergency. No emergency purchases will be processed by the Purchasing Division without detailed justification.

~~3. A supplemental justification memorandum detailing the circumstances leading to the emergency purchase must be attached to the SR as documentation of the emergency. No emergency purchases will be approved processed by the Purchasing Division without supplemental justification.~~

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.

2. This regulation requires an internal audit, as part of the annual review of internal controls pursuant to SAM 2418.0.

REFERENCES: ~~State Administrative Manual § 1552.0 and 516.0~~
~~NRS 333.810, 414.0345, and 616A.310~~
~~NAC 333.114~~

ACA Standards [4-4028](#), 4-4029, 4-4031, 4-4032, 4-4038 and 4-4041

~~Howard Skolnik~~ James Dzurenda, Director, ~~Director~~
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
212**

CONTRACTS

Supersedes: AR 212 (12/17/12); AR 212 (Temporary, 06/17/14); 09/16/14
Effective Date: 02/13/17 (Temporary)

AUTHORITY

NRS 80.010, 277.080 through 277.180, NRS Chapter 281A, Chapter 333, Chapter 333A, 339.025, 341.148, Chapter 616A through 616D, 624.031, 624.700, 625.530; NAC Chapter 333, State Administrative Manual (SAM) Chapter 300, SAM 1908, 42 U.S.C. § 15601, *et seq.* and 28 C.F.R. Part 115

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies.

The Business Manager/designee is responsible to initiate a Request for Contract form (DOC-555) when a new contract is required or a contract amendment authorizing payment of contracted goods/services received.

The Fiscal Services Budget Section is responsible to verify funds are available or will be available for the contract and designate the correct budget coding to be used for the expenditure or revenue.

The Contracts Manager is responsible to assist Department staff to secure contracts for services and goods which are in the best interest of the Department and in compliance with federal and state regulations, and will collect vendor review information from designated staff for entry into the State Purchasing Division's Contract Database Management System (Contract Database).

The Purchasing Division is responsible to maintain background check files on contractors/vendors.

The appropriate institution/facility/division staff is responsible to monitor vendor performance in accordance with the approved contract and provide a vendor review to the Contracts Manager for entry into the Contract Database.

212.01 REQUEST FOR CONTRACT FORM (DOC-555)

1. The appropriate institution/division staff, with support from the Contracts Manager, should determine the type of contract that is required, and adhere to state rules and regulations in the procurement of the proposed contracted services/goods.

2. A Request for Contract form (DOC-555) must be completed by the Business Manager/designee when a new contract or amendment is required.
3. All Request for Contract forms (DOC-555) must be fully completed and submitted to the Contracts Manager.

A. For new contracts, a detailed Scope of Work should be provided by the Business Manager/Designee. For contract amendments, justification for the amendment (e.g., revised Scope of Work, term extension, etc.) should be provided by the institution/division.

B. The Fiscal Services Budget Section shall ensure availability of funds, budget coding, and fiscal year(s). If funds are not available at the time the Request for Contract form (DOC-555) is submitted, a copy of any relevant Work Program requesting the budget authority should be submitted to the Contracts Manager.

C. Failure to properly complete the Request for Contract form (DOC-555) will result in the document being returned to the Business Manager/designee.

212.02 CONTRACT AND CONTRACT SUMMARY

1. The Contracts Manager is responsible to prepare a solicitation and solicit bids (if required) based on the scope of work/specifications provided by the institution/facility/division, or verify that bids requested by the institution/facility/division to prospective vendors, comply with federal and state regulations. The Contracts Manager may work in coordination with State Purchasing.
2. The Contracts Manager will prepare the contract and the contract summary based on the awarded vendor selected by the institution/division, grant or evaluation committee, whichever is applicable.

212.03 CONTRACT APPROVAL REQUIREMENTS AND SIGNATURES

1. The contractor must sign all copies of the contract in agreement with the terms and conditions of both the contract and the scope of work. The contractor does not receive or sign the contract summary form.
2. The Chief/Assistant Chief of Fiscal Services and the Fiscal Services Budget Section will review and approve budget and contract authority regarding contracts. Signatures verifying approval are required on all contract summary forms and electronically signed/approved in the Contract Entry Tracking System (CETS).
3. The Attorney General's Office must approve and sign all contracts and attachments which are to be presented to the Board of Examiners (BOE) and corresponding copies with the contractor's signature for content and form.
4. As designated by the Director, the Deputy Director of Support Services is responsible for signing all copies of the contract and the corresponding attachments.

5. The Contracts Manager will submit all contracts required by NRS to the Governor's Finance Office for timely review and approval by either the Clerk of the BOE or for submission to the BOE in accordance with the schedule as presented by the Clerk of the BOE.

6. Mandatory background checks on contractors/vendors will be completed each year in compliance with PREA federal mandates. The Purchasing Division is required to maintain background check files on contractors/vendors for audit purposes.

A. The level and type of training provided to contractors shall be based on the services they provide and the level of contact they have with inmates. All contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

212.04 CONTRACT TRACKING

1. Appropriate institution/facility/division staff will be assigned to ensure vendor performance, compliance of the contract, and provide a vendor review (if appropriate) to the Contracts Manager for entry into the Contract Database.

2. Business Manager(s) will authorize payment of contracted services/goods received.

3. Fiscal Services will ensure timely payment of services, within thirty-days of authorization of services by the Business Manager(s).

4. The Contracts Manager will maintain the administrative file of the contract. This file will contain, but is not limited to:

A. Original contract and all amendments with attachments, exhibits and relevant documents (e.g., calculations demonstrating how the amount of the contract was determined);

B. Copies of bid from the selected vendor (bids from vendors not selected will be maintained in a separate working file for one year from the contract start date);

C. Correspondence;

D. Contract Summary;

E. Contract Request Form;

F. Insurance documents as required by Risk Management;

G. Proof of Nevada Business License;

H. PREA verification/audit information;

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.
2. This regulation does not require an audit as a part of the annual review of internal controls pursuant to SAM 2418.0.

REFERENCES

ACA Standards 4-4029, 4-4032, 4-4038, and 4-4041


James Dzurenda, Director

2/13/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
212**

CONTRACTS

Supersedes: AR 212 (12/17/12); and AR 212 (Temporary, 06/17/14); ~~AR 212 (09/16/14)~~
Effective Date: ~~09/16/14~~ 02/13/17 (Temporary)

AUTHORITY

~~±~~NRS 80.010, ~~NRS~~ 277.080 through 277.180, NRS Chapter 281A, ~~NRS 284.1729~~, ~~NRS~~ Chapter 333, ~~NRS~~ Chapter 333A, ~~NRS~~ 339.025, ~~NRS~~ 341.148, ~~NRS~~ Chapter 616A through 616D, ~~NRS~~ 624.031, ~~NRS~~ 624.700, ~~NRS~~ 625.530, ~~NAC~~ Chapter 333, State Administrative Manual (SAM) Chapter 300, SAM 1908, 42 U.S.C. § 15601, *et seq.* and 28 C.F.R. Part 115

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies.

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~~The appropriate staff are responsible for processing Department contracts that are in compliance with Nevada Revised Statutes, Nevada Administrative Codes, the State Administrative Manual, and PREA federal mandates.~~

~~The Institution/Facility Business Manager/designee Administrator is responsible for processing initiating to initiate a Request for Contract form (DOC-555) when a new contract is required or an contract existing contract requires an amendment/renewal, and ensuring timely authorizing payment of contracted goods/services rendered and/or goods received.~~

~~The assigned Budget Analyst/Fiscal Services Budget Section is responsible for reviewing a Request for Contract form (DOC-555) and, if appropriate, to verifying funds are available or will be available for the contract and designating the correct budget coding to be used for the expenditure or revenue.~~

~~The Contracts Manager, under the supervision of the Chief of Purchasing & Inmate Services, is responsible for to assisting designated Department staff to at each institution/facility/division secure contracts for services and goods which are in the best interest of the Department and in compliance with federal and state regulations, and will collect vendor review information from designated staff for entry to enter into the State Purchasing Division's Contract Database Management System (Contract Database).~~

The Purchasing Division is required responsible to maintain background check files on contractors/vendors.

The appropriate institution/facility/division staff areis responsible for to monitoring vendor performance in accordance with the approved contract and provide a vendor review to the Contracts Manager for entry into the Contract Database.

212.01 REQUEST FOR CONTRACT FORM (DOC-555)

1. The appropriate institution/division staff, with support from the Contracts Manager, should determine the type of contract that is required, and adhere to state rules and regulations in the procurement of the proposed contracted services/goods.

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2. A Request for Contract form (DOC-555) must be completed by the Institution/Facility Business Manager/designee Administrator when a new contract or amendment is required.

3. All Requests for Contract forms (DOC-555) must be properly fully completed and submitted to the Contracts Manager.

A. For new contracts, a detailed Scope of Work should be provided by the Business Manager/Designee. For contract amendments, justification for the amendment (e.g., revised Scope of Work, term extension, etc.) should be provided by the institution/division.

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Failure to properly complete the Request for Contract form (DOC-555) will result in the document being returned to the sender.

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B. 3. The assigned Fiscal Services Budget Analyst Section shall must ensure approve availability of budgeted funds and appropriateness of funding, account, category budget coding, and fiscal year(s). If funds are not available at the time the Request for Contract form (DOC-555) is submitted, a copy of any relevant the Work Program requesting the budget authority should be submitted to the Contracts Manager.

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C. Failure to properly complete the Request for Contract form (DOC-555) will result in the document being returned to the Business Manager/designee.

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4. The appropriate staff will determine the type of contract that is required, and adhere to State rules and regulations in the procurement of the proposed contracted services/goods.

212.02 CONTRACT AND CONTRACT SUMMARY

1. The Contracts Manager, under the supervision of the Chief of Purchasing/Inmate Services, is responsible to prepare a solicitation and solicit bids (if required) from based on the an accurate scope of work/specifications provided by the institution/facility/division, or verify that bids requested by the institution/facility/division to prospective vendors, comply with federal and state regulations.

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~~which will provide the basis specifications for the contractor bids. The Contracts Manager may work in coordination with State Purchasing.~~

~~2. The Contracts Manager, under the supervision of the Chief of Purchasing/Inmate Services, is responsible for will soliciting responses to the bids (if required) based on the scope of work provided by the institution/division, or ensuring verify that bids completed requested by the Institutions institution/division to prospective vendors comply with State state requirements.~~

~~3. Designated and appropriate staff are responsible to ensure that the contract meets budgetary needs, is in the best interest of the facility/division, and meets all authority requirements of the State.~~

~~432. The Contracts Manager, under the supervision of the Chief of Purchasing/Inmate Services, is responsible for preparing will prepare the contract and the contract summary based on the awarded vendor selected by the Institution/Facility/Administrator institution/division, grant or evaluation committee, whichever is applicable.~~

212.03 CONTRACT APPROVAL REQUIREMENTS AND SIGNATURES

1. The contractor must sign all copies of the contract in agreement with the terms and conditions of both the contract and the scope of work. The contractor does not receive or sign the contract summary form.

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~~2. The Chief/Assistant Chief of Fiscal Services, the Assistant Chief of Fiscal Services, and the assigned Fiscal Services Budget Analyst Section will review and approve budget and contract authority funding availability regarding contracts. Signatures verifying approval are required on all contract summary forms and electronically signed/approved in the Contract Entry Tracking System (CETS).~~

3. The Attorney General's Office must approve and sign all contracts and attachments which are to be presented to the Board of Examiners (BOE) and corresponding copies with the contractor's signature for content and form.

4. As designated by the Director, the Deputy Director of Support Services, is responsible for signing all copies of the contract and the corresponding attachments.

~~5. The Contracts Manager, under the supervision of the Chief of Purchasing/Inmate Services, is required to will submit all contracts required by NRS to the Budget Governor's Finance Office for timely review and approval by either the Clerk of the Board of Examiners BOE or for submission to the Board of Examiners BOE in accordance with the schedule as presented by the Clerk of the Board of Examiners BOE.~~

6. Mandatory background checks on contractors/vendors will be completed no less than every three years each year in compliance with PREA federal mandates; the Contracts unit The Purchasing Division is required to maintain background check files on contractors/vendors tracking documentation for audit purposes.

A. The level and type of training provided to contractors shall be based on the services they provide and the level of contact they have with inmates. All contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

212.04 CONTRACT TRACKING

1. Appropriate ~~institution/facility/division staff of the Institution/Facility/Administrator~~ will be assigned to ensure ~~vendor performance, and~~ compliance of the contract, and provide a vendor review ~~(if appropriate)~~ to the Contracts Manager for entry into the Contract Database.

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2. ~~Business Manager(s) will ensure timely~~ authorize payment of contracted services/~~rendered and/or~~ goods received.

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3. Fiscal Services will ensure timely payment of services, within thirty-days of authorization of services by the Business Manager(s).

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~~234.~~ The Contracts Manager, ~~under the supervision of the Chief of Purchasing/Inmate Services~~ will maintain the administrative file of the contract. This file will contain, but is not limited to:

A. Original contract and all amendments with attachments, exhibits and relevant documents (e.g., calculations demonstrating how the amount of the contract was determined);

B. Copies of bid ~~from the selected vendors~~ (bids from vendors not selected will be maintained in a separate working file for one year from the contract start date);

C. Correspondence;

D. Contract Summary;

E. Contract Request Form;

F. Insurance documents as required by Risk Management;

G. Proof of Nevada Business License;

H. PREA verification/audit information;

APPLICABILITY

1. This regulation requires an Operational Procedure for the Support Services Division.

2. This regulation does not require an audit as a part of the annual review of internal controls pursuant to SAM 2418.0.

REFERENCES

~~State Administrative Manual (SAM) Chapter 0300, Chapter 1500, and 1908~~
ACA Standards 4-4029, 4-4032, ~~4-4035~~, 4-4038, and 4-4041

James Dzurenda, Director

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
269**

FOOD SERVICES

Supersedes: AR 269 (08/13/10); AR 269 (Temporary, 07/17/14); 09/16/14
Effective: 02/13/17 (Temporary)

AUTHORITY

NRS 209.131; NRS 209.382

PURPOSE

It is the responsibility of the Department to provide inmates with nutritious, well-balanced meals within the constraints and guidelines of the Nevada Revised Statutes, Administrative Regulations (AR), Operational Procedures (OP) and all applicable federal and state health and safety requirements.

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies, including food services.

The Chief of Purchasing & Inmate Services is responsible to ensure implementation of the establishment and maintenance all master menus for the Department.

It is the responsibility of the institution's Food Service Manager (FSM) and facility's culinary officer to plan, control, direct and evaluate all aspects of institutional food service, and provide three meals a day within menu guidelines under sanitary conditions.

269.01 PURCHASING

1. Master menus shall meet or exceed minimum requirements for recommended Dietary Reference Intakes (DRIs) as established by the National Academy of Sciences or other nationally recognized food and nutrition organizations.

- A. Medical diets will be prescribed by the Medical staff in accordance with AR 626.
- B. Medical diets will be developed and reviewed by a licensed dietitian.
- C. Religious diets will be approved in accordance with ARs 810.3 and 814.
- D. Special holiday meals will be provided upon approval of the Director/designee.

269.02 FOOD SERVICE MANAGEMENT

1. Food products and related materials purchased must meet Department specifications.
 - A. The FSM may make short term adjustments to the master menu at the individual institution, to allow for opportunity buys, seasonal product use, reduction of overstock inventory and shortage of product due to spoilage or shipment.
 - B. During lock-down, alterations may be made to the menu to meet operational requirements.
 - C. Standard meals may not be used as a disciplinary measure.
2. Federal and State occupational safety and health codes will serve as standards for all Department food service programs.
3. All food sanitation programs must be in accordance with AR 490.

269.03 BUDGET CONTROLS

1. Food consumption and loss control is to be documented by the FSM.
 - A. The culinary inventory and Food Inventory and Consumption (FIC) report as prescribed by the Chief of Purchasing & Inmate Services/designee is a standardized report for calculating inmate food costs.
 - B. This FIC must be completed and submitted monthly to the Chief of Purchasing & Inmate Services/designee.
2. When costs exceed the approved per diem allowance, an analysis by the FSM and the Business Manager must be included with the FIC report along with corrective measures.

269.04 SANITATION INSPECTIONS

1. Each FSM or culinary officer will perform safety and sanitation inspections.
 - A. Inmates and other persons working in food service are monitored each day for health and cleanliness by the FSM/Designee.
 - B. FSM/designee will provide for not less than a weekly inspection of all food services areas.
2. Institutions shall have written OPs that provide adequate health protections for all inmates and staff in the food service area.

3. Food products that are grown/produced by the Department must follow federal, state, local requirements and OPs prior to institutional food service use.

269.05 SALE OF MEALS

1. Staff members may purchase regular meals at an institution/facility that provides meal service. Meals will be purchased using employee ducats.

APPLICABILITY

1. This regulation requires an OP for each institution and facility.
2. The regulation requires an audit.

REFERENCES:

ACA Standards: 4-4314 through 4-4328


James Dzurenda, Director

2/13/17
Date

NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
269

FOOD SERVICES

Supersedes: AR 269 (08/13/10); ~~and AR 269 (Temporary, 07/17/14);~~ and AR 269
(09/16/14)
Effective: ~~09/16/14-02/xx13/17~~ (Temporary)

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AUTHORITY

NRS 209.131; NRS; ~~and NRS-209.391-382~~

PURPOSE

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It is the responsibility of the Department to provide inmates with nutritious, well-balanced meals within the constraints and guidelines of the Nevada Revised Statutes, Administrative Regulations (AR), Operational Procedures (OP) and all applicable federal and state health and safety requirements.

RESPONSIBILITY

The Deputy Director of Support Services is responsible to ensure the management and administration of fiscal and contract policies, including food services.

~~It is the responsibility of the Department of Corrections and its employees to provide inmates with nutritious, well balanced meals within the constraints and guidelines of the Nevada Revised Statutes, Administrative Regulations (AR), Operational Procedures (OP) and all applicable federal and state and federal health and safety requirements.~~

~~It is the responsibility of the~~ The Chief of Purchasing & Inmate Services is responsible to ensure implementation of the designee is responsible to establish ment and maintenance ~~maintain~~ all master menus for the Department.

It is the responsibility of the institution's ~~sa~~ Food Service Manager/~~Culinary~~ (FSM) and facility's culinary officer to plan, control, direct and evaluate all aspects of institutional food service, and provide three meals a day within menu guidelines under sanitary conditions.

269.01 PURCHASING

1. Master menus ~~shall~~should meet or exceed minimum requirements for recommended Dietary Reference Intakes (DRIs) as established by the National Academy of Sciences or other nationally recognized food and nutrition organizations.

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A. Medical diets will be prescribed by the Medical staff, in accordance with AR 626.

B. Medical diets will be developed and reviewed by a licensed dietitian. ~~etian.~~

C. Religious diets will be approved in accordance with ARs 810.3 and 814.

D. Special holiday meals will ~~not~~ be provided upon approval of the Director/designee.

269.02 FOOD SERVICE MANAGEMENT

1. Food products and related materials purchased must meet Department specifications.

A. The FSM may make short term adjustments to the master menu at the individual institution, to allow for opportunity buys, seasonal product use, reduction of overstock inventory and shortage of product due to spoilage or shipment.

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B. During lock-down, alterations may be made to the menu to meet operational requirements.

C. Standard meals may not be used as a disciplinary measure.

2. Federal and State occupational safety and health codes will serve as standards for all Department food service programs.

3. All food sanitation programs must be in accordance with ~~NAC 443~~ and AR 490.

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269.03 BUDGET CONTROLS

1. Food consumption and loss control is to be documented by the FSM.

A. The eculinary inventory and food cost spreadsheet (Food Inventory and Consumption (FIC) report) as prescribed by the Chief of Purchasing & Inmate Services ~~or~~ designee is a standardized report for calculating inmate food costs.

B. This FIC report must be completed and submitted monthly to the Chief of Purchasing & Inmate Services ~~or~~ designee.

2. When costs exceed the approved per diem allowance, an analysis by the FSM and the Business Manager ~~(BM)~~ must be included with the FIC Food Inventory and Consumption report along with corrective measures.

269.04 SANITATION INSPECTIONS

1. ~~1.~~ Each FSM or culinary officer will perform ~~daily~~ safety and sanitation inspections.

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A. Inmates and other persons working in food service are monitored each day for health and cleanliness by the FSM/Designee.

B. FSM/designee will provide for not less than a weekly inspection of all food services areas.

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2. Institutions shall have written ~~operational procedures~~ (OPs) that provide adequate health protections for all inmates and staff in the food service area.

3. Food products that are grown/produced by the Department must follow ~~Federal~~ federal, ~~State~~ state, local requirements and ~~operational procedures~~ OPs prior to institutional food service use.

269.05 SALE OF MEALS

1. Staff members may purchase regular meals at ~~an ny Department institution/ or~~ facility that provides meal service. Meals will be purchased ~~through the use of~~using employee ducats.

APPLICABILITY

1. ~~1.~~ This regulation requires an ~~Operational Procedure~~OP for each institution and facility.

2. The regulation requires an audit.

~~2. This regulation requires an audit as a part of the annual review of internal controls pursuant to SAM 2418.0.~~

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REFERENCES:

ACA Standards: 4-4314 ~~through 4-4328,~~ 4 4315, 4 4328, 4 4316, 4 4317; NAC 443;

James Dzurenda, Director

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
346**

NEPOTISM/FRATERNIZATION

Supersedes: AR 346 (Temporary, 04/18/10); 05/20/10

Effective Date: 02/13/2017 (Temporary)

AUTHORITY

NRS 281.210; NAC 284.375; NAC 284.377; NAC 284.374; NAC 284.0533; State of Nevada, Department of Administration Division of Human Resource Management Employee Handbook

PURPOSE

The purpose of this policy is to provide a productive and healthy work environment by prohibiting improper favoritism or undue influence that is based upon family or close personal relationships. It is also to ensure a uniform and equitable basis for employer/employee relations by ensuring that employees that have close personal relationships do not work in a program, section, or unit within close proximity of each other.

Its purpose is to prevent relationships from negatively influencing policy, operational procedures and the safety, security or morale of employees within the NDOC and to provide the fair and impartial supervision and evaluation of employees.

For purposes of this AR, relationships include, but are not limited to, an association with another individual by blood, adoption, foster arrangement, cohabitation, current or previous marriages (including in-laws, step-parent, step-children, etc.), or any other relationships which creates a conflict between the interests of the NDOC and individuals in a close personal relationship.

RESPONSIBILITY

The Deputy Director of Support Services shall be responsible for the administration of this regulation.

The Human Resource Administrator shall be responsible for ensuring compliance and implementation with the regulation.

All staff shall be responsible to have knowledge of this regulation and to inform the Department of any such relationships described below.

346.01 APPOINTING RELATED PERSONS

1. An appointing authority shall not authorize the appointment of a person to a position, if upon appointment, the person will be the immediate supervisor, or will be in the direct line of authority, of:

- A. A spouse, child, parent or sibling of the person, including step-parents, step-children, etc.
- B. The spouse of a child, parent or sibling of the person.
- C. An aunt, uncle, niece, nephew, grandparent, grandchild or first cousin of the person.
- D. A person with whom there is a dating relationship.

2. The Direct line of authority includes an employee's immediate supervisor, that supervisor's supervisor and each subsequent level of supervision through the employee's chain of command to the Director.

3. A supervisory relationship includes responsibility and accountability for assigning work, evaluating performance, hiring, disciplining, and training, as opposed to temporary or ad hoc employment situations caused by an emergency or a special project of limited duration.

4. A dating relationship is defined as an intimate association primarily characterized by the expectation of affectional or sexual involvement and is considered a close personal relationship.

5. An appointing authority shall refuse to consider an eligible person whose appointment to a position will violate the provision of this regulation.

6. Due to the unique nature of the responsibility for the safety of all inmates and employees, Wardens and Associate Wardens are considered in the direct line of authority for all employees assigned to their respective facilities.

7. Pursuant to NRS 281.210(2)(c) it is not unlawful to hire the spouse of the warden or facility manager of the Department of Corrections. The NDOC policy is that the spouse of the warden of an institution or manager of facility will not be assigned to the same facility as the warden or manager of a facility, unless:

- A) Employed under the Medical Division, which reports directly to the Director; and/or
- B) Pursuant to 346.02.3(B)

346.02 PERSONS WHO BECOME RELATED AFTER APPOINTMENT

1. Should employees of the Department become related or involved in a dating relationship after appointment, the appointing authority shall ensure that, within 24-hours, or not later than the end of their next scheduled shift (AR 332) the employees do not continue to hold positions in

which one of the employees is the immediate supervisor, or in the direct line of authority of the other employee.

2. Employees who become related after they have been appointed to their positions as described in this regulation shall, within ten (10) working days after they become related or involved in a dating relationship:

A. Notify the appointing authority in writing of the relationship, by submitting form DOC 1109 (Disclosure of Employee Relationship – current employee) or DOC 1110 (Relationship Acknowledge Form – new hire).

B. Submit to the appointing authority a recommendation for action to be taken by the appointing authority to ensure that the employees do not continue to hold positions in which one of the employees is the immediate supervisor, or in the direct line of authority, of the other employee.

C. In determining the manner in which to comply with the provisions of this regulation, the appointing authority is not required to accept a recommendation as submitted.

3. An employee will not be assigned to any position where there would be a direct supervisory, management, or administrative relationship to any relative or employee with which one has a relationship as described in this regulation.

A. This regulation does not prevent an employee, as described, to be appointed to a position under the jurisdiction of another Warden, Associate Warden or Division Head, unless the appointment violates 346.01, Section 2.

B. The appointing authority may submit a request to waive 346.01, Section 6, for an employee/applicant in a county defined as a frontier county by the United States Census, with a limited employment base, which causes an undue hardship for recruitment. The eleven counties defined as frontier include: Churchill, Elko, Esmerelda, Eureka, Humboldt, Lander, Lincoln, Mineral, Nye, Pershing, and White Pine Counties. The appointing authority must develop a form and procedure for the request to go to the Director. Each request and supporting documentation must be submitted individually.

APPLICABILITY

1. This Administrative Regulation does not require an operational procedure.

2. This Administrative Regulation requires an audit.


James Dzurenda, Director

AR 346

2/13/17
Date

Page 3 of 5



Disclosure of Employee Relationship Form

To: _____ Date: _____
(Warden or Appointing Authority)

From: _____ Position: _____ Facility: _____

Per NRS 284.377, employees who become related after they have been appointed to their positions shall, within ten working days, of becoming related:

- a. Notify the appointing authority of the relationship and
- b. Submit to the appointing authority a recommendation for action to be taken to ensure that the employees do not continue to hold positions in which one of the employees is in the line of supervision of the other employee.

_____ would like to disclose that I have had a change in relationship status with the following NDOC employee(s):

Name	Relationship	Job Title	Facility

I would like to recommend the following action in order to avoid a conflict of interest and/or my being in the chain of command of my relative:

Employee Signature

Dist: Personnel File



Relationship Acknowledgment Form

CLASSIFIED EMPLOYMENT RESTRICTIONS: NEPOTISM

NRS 281.210 prohibits the appointment of closely related individuals to positions in which one employee is in the line of supervision over another employee. This regulation also applies to current employees who are appointed to different positions through promotion, transfer, voluntary demotion or any other type of appointment. In addition this applies to employees who become related to each other, such as through marriage.

This prohibition applies to the following relationships:

- | | |
|--------------------------|------------------------|
| Spouse | Grandparent/Grandchild |
| Child or spouse of child | Cousin |
| Parent | Aunt/Uncle |
| Sibling | Niece/Nephew |

Employees who become related after they have been appointed to their positions shall within ten working days of becoming related:

- a. Notify the appointing authority of the relationship and
- b. Submit to the appointing authority a recommendation for action to be taken to ensure that the employees do not continue to hold positions in which one of the employees is in the line of supervision of the other employee.

Please check one of the following as it applies to this position:

- I am not related to anyone working for the Nevada Department of Corrections.
- I am related to the following employee(s) at the Nevada Department of Corrections:

Name	Relationship	Job Title	Facility

I have read and understand the above restriction as they apply to nepotism in the State of Nevada Classified Service. I certify that the above information is true and complete. I understand that if I provide false information I may be subject to the penalty provisions of NRS 284.430.

Signature	Print Name	Date
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DOC 1110(1-17)

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
346**

NEPOTISM/FRATERNIZATION

Supersedes: AR 346 -(Temporary, 04/18/10); 05/20/10
Effective Date: — 05/20/10 02/13/2017 (Temporary)

AUTHORITY

NRS 281.210;
NAC 284.375;
NAC 284.377;
NAC 284.374; NAC 284.0533; State of Nevada, Department of Administration Division of Human Resource Management Employee Handbook

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PURPOSE

The purpose of this policy is to provide for a productive and healthy work environment by prohibiting improper favoritism or undue influence that is based upon family or close personal relationships. It is also to ensure a uniform and equitable basis for employer/employee relations by ensuring that employees that have close personal relationships do not work in a program, section, or unit within close proximity of each other.

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Its purpose is to prevent relationships from negatively influencing policy, operational procedures and the safety, security or morale of employees within the NDOC and to provide the fair and impartial supervision and evaluation of employees.

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For purposes of this AR, relationships include, but are not limited to, an association with another individual by blood, adoption, foster arrangement, cohabitation, current or previous marriages (including in-laws, step-parent, step-children, etc.), or any other relationships which creates a conflict between the interests of the NDOC and individuals in a close personal relationship.

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RESPONSIBILITY

The Deputy Director of Support Services shall be responsible for the administration of this regulation.

The Human Resource Administrator shall be responsible for ensuring compliance and implementation with the regulation.

All staff shall be responsible to have knowledge of this regulation and to inform the Department of any such relationships described below.

346.01 APPOINTING RELATED PERSONS

1. An appointing authority shall not authorize the appointment of a person to a position, if upon appointment, the person will be the immediate supervisor, or will be in the direct line of authority, of:

- A. A spouse, child, parent or sibling of the person, including step-parents, step-children, etc.
- B. The spouse of a child, parent or sibling of the person.
- C. An aunt, uncle, niece, nephew, grandparent, grandchild or first cousin of the person.
- D. A person with whom there is a dating relationship.

2. The Direct line of authority includes an employee's immediate supervisor, that supervisor's supervisor and each subsequent level of supervision through the employee's chain of command to the Director.

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3. A supervisory relationship includes responsibility and accountability for assigning work, evaluating performance, hiring, disciplining, and training, as opposed to temporary or ad hoc employment situations caused by an emergency or a special project of limited duration.

4. A dating relationship is defined as an intimate association primarily characterized by the expectation of affectional or sexual involvement and is considered a close personal relationship.

5. An appointing authority shall refuse to consider an eligible person whose appointment to a position will violate the provision of this regulation.

6. Due to the unique nature of the responsibility for the safety of all inmates and employees, Wardens and Associate Wardens are considered in the direct line of authority for all employees assigned to their respective facilities.

7. Pursuant to NRS 281.210(2)(c) it is not unlawful to hire the spouse of the warden or facility manager of the Department of Corrections. The NDOC policy is that the spouse of the warden of an institution or manager of facility will not be assigned to the same facility as the warden or manager of a facility, unless:

- A) Employed under the Medical Division, which reports directly to the Director; and/or
- B) Pursuant to 346.02.3(B)

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346.02 PERSONS WHO BECOME RELATED AFTER APPOINTMENT

1. Should employees of the Department become related or involved in a dating relationship after appointment, the appointing authority shall ensure that, within 24-hours, as soon as or not later than the end of their next scheduled shift (AR 332) practicable, the employees do not continue to hold positions in which one of the employees is the immediate supervisor, or in the direct line of authority of the other employee.

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2. Employees who become related after they have been appointed to their positions as described in this regulation, shall, within ten (10) working days after they become related or involved in a dating relationship:

A. Notify the appointing authority in writing of the relationship, by submitting form DOC 1109 (Disclosure of Employee Relationship – current employee) or DOC 1110 (Relationship Acknowledge Form – new hire).

B. Submit to the appointing authority a recommendation for action to be taken by the appointing authority to ensure that the employees do not continue to hold positions in which one of the employees is the immediate supervisor, or in the direct line of authority, of the other employee.

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C. In determining the manner in which to comply with the provisions of this regulation, the appointing authority is not required to accept a recommendation as submitted.

3. An employee will not be assigned to any position where there would be a direct supervisory, management, or administrative relationship to any relative or employee with which one has a relationship as described in this regulation.

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A. A. —This regulation does not prevent an employee, as described, to be appointed to a position under the jurisdiction of another Warden, Associate Warden or Division Head, unless the appointment violates 346.01, Section 2.

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B. The appointing authority may submit a request to waive 346.01, Section 6, for an employee/applicant in a county defined as a frontier county by the United States Census, with a limited employment base, which causes an undue hardship for recruitment. The eleven counties defined as frontier include: Churchill, Elko, Esmerelda, Eureka, Humboldt, Lander, Lincoln, Mineral, Nye, Pershing, and White Pine Counties. The appointing authority must develop a form and procedure for the request to go to the Director. Each request and supporting documentation must be submitted individually.

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APPLICABILITY

1. This Administrative Regulation does not require an operational procedure.

| 2. This Administrative Regulation ~~does not~~ requires an audit.

|

|

| _____
~~Howard Skolnik~~ James Dzurenda, Director

Date



Disclosure of Employee Relationship Form

To: _____ Date: _____
(Warden or Appointing Authority)

From: _____ Position: _____ Facility: _____

Per NRS 284.377, employees who become related after they have been appointed to their positions shall, within ten working days, of becoming related:

- a: Notify the appointing authority of the relationship and
- b: Submit to the appointing authority a recommendation for action to be taken to ensure that the employees do not continue to hold positions in which one of the employees is in the line of supervision of the other employee.

I, _____, would like to disclose that I have had a change in relationship status with the following NDOC employee(s):

<i>Name</i>	<i>Relationship</i>	<i>Job Title</i>	<i>Facility</i>

I would like to recommend the following action in order to avoid a conflict of interest and/or my being in the chain of command of my relative:

Employee Signature

Dist: Personnel File



Relationship Acknowledgment Form

CLASSIFIED EMPLOYMENT RESTRICTIONS: NEPOTISM

NRS 281.210 prohibits the appointment of closely related individuals to positions in which one employee is in the line of supervision over another employee. This regulation also applies to current employees who are appointed to different positions through promotion, transfer, voluntary demotion or any other type of appointment. In addition this applies to employees who become related to each other, such as through marriage.

This prohibition applies to the following relationships:

Spouse	Grandparent/Grandchild
Child or spouse of child	Cousin
Parent	Aunt/Uncle
Sibling	Niece/Nephew

Employees who become related after they have been appointed to their positions shall within ten working days of becoming related:

- a: Notify the appointing authority of the relationship and
- b: Submit to the appointing authority a recommendation for action to be taken to ensure that the employees do not continue to hold positions in which one of the employees is in the line of supervision of the other employee.

Please check one of the following as it applies to this position:

- I am not related to anyone working for the Nevada Department of Corrections.
- I am related to the following employee(s) at the Nevada Department of Corrections:

<i>Name</i>	<i>Relationship</i>	<i>Job Title</i>	<i>Facility</i>

I have read and understand the above restriction as they apply to nepotism in the State of Nevada Classified Service. I certify that the above information is true and complete. I understand that if I provide false information I may be subject to the penalty provisions of NRS 284.430.

_____	_____	_____
Signature	Print Name	Date

DOC 1110 (1-17)

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION**

365

RESPIRABLE CRISTALLINE SILICA

Supersedes: New Regulation
Effective Date: 02/13/2017 (Temporary)

AUTHORITY

Occupational Safety and Health Administration (OSHA) 29, CFR 1910.1053, 1926.1153, NRS 209.131

PURPOSE

To ensure the Nevada Department of Corrections work and safety regulations are compliant with federal regulations for the implementation of policies to reduce exposure to airborne crystalline silica to below the OSHA Permissible Exposure Limit (PEL) by means of substitution, engineering controls, work methods and administrative controls.

RESPONSIBILITY:

1. The Director, through the Deputy Director of Operations, shall be responsible for compliance with this Administrative Regulation. The Deputy Director of Operations will provide the resources necessary to effectively implement and maintain this Administrative Regulation.
2. The Warden/Associate Warden shall be responsible for implementing this Administrative Regulation at their respective facility and associated facilities. They shall implement and enforce compliance through a written Respiratory Crystalline Silica, Exposure Control Plan at their facility and associated facilities.
3. The Facility Supervisor shall implement and enforce compliance through a written Respiratory Crystalline Silica, Exposure Control Plan at their facility and associated facilities.
4. Each employee shall be made aware of and be responsible for following the facility written Respiratory Crystalline Silica, Exposure Control Plan.
5. The Compliance Enforcement Unit will conduct periodic inspections of each facility to verify the provisions of this Administrative Regulation and the facilities written Respiratory Crystalline Silica, Exposure Control Plan are being implemented and enforced.

365.01 CRYSTALLINE SILICA, HEALTH HAZARDS

The health hazards of silica come from breathing in the dust. If crystalline silica becomes airborne through industrial activities, exposures to fine crystalline silica dust can lead to a disabling, sometimes fatal disease called silicosis. The fine particles are deposited in the lungs, causing thickening and scarring of the lung tissue. The scar tissue restricts the lungs' ability to extract oxygen from the air. This damage is permanent, but the symptoms of the diseases may not appear for many years. Some common activities (not all inclusive) that may generate exposure to Crystalline Silica are:

- Abrasive blasting (e.g., of concrete structures)
- Concrete jackhammering, chipping, sawing, grinding, mixing, or drilling
- Cutting brick or tiles
- Tuck point grinding
- Loading, hauling, and dumping gravel
- Demolition of structures containing concrete
- Sweeping concrete dust

365.02 EXPOSURE CONTROL PLAN

Each facility shall retain and adhere to a written Respirable Crystalline Silica Exposure Control Plan developed by the Compliance Enforcement Unit. The Exposure Control Plan shall be made available for staff review.

365.03 TRAINING

Training shall be provided to those employees who may be exposed to respirable Crystalline Silica. Employees shall be able to demonstrate subject knowledge and understanding received from the training pertaining to health hazards, tasks that present exposure, protective measures, and purpose of medical surveillance.

365.04 MEDICAL SURVEILLANCE

1. Nevada Department of Corrections (NDOC) shall make medical surveillance available at no cost to employees for each employee who will be occupationally exposed to respirable crystalline silica at or above the action level for 30 or more days per year.
1. NDOC shall make available an initial (baseline) medical examination for maintenance staff that may be exposed to respirable Crystalline Silica within 30 days after initial assignment, unless the employee has received a medical examination that meets the requirements of this section within the last three years.
2. NDOC shall arrange medical examinations to be performed by a licensed physician or licensed health care provider contracted through the State of Nevada should medical examinations be necessary.

365.05 DOCUMENTATION AND RECORDKEEPING

1. All medical documentation shall remain with the physician or licensed health care provider contracted through the State of Nevada performing the medical examination should medical examinations be necessary.
2. Air monitoring data and medical surveillance records if required shall be maintained for at least 30 years in accordance with 29 CFR 1910.1020 (d) (1) (i) & (ii).

APPLICABILITY

1. This administrative regulation requires compliance with the attached operational procedure.
2. This administrative regulation requires an audit.


James Dzurenda, Director

2/13/17
Date

**OPERATIONAL PROCEDURE
AR 365 - RESPIRABLE CRYSTALLINE SILICA
EXPOSURE CONTROL PLAN**

Supersedes: 00/00/0000
Effective Date: 02/08/2017
Review Date: 00/00/0000

PURPOSE AND OBJECTIVE

This procedure establishes guidelines for Nevada Department of Corrections (NDOC) to reduce or eliminate exposures to respirable crystalline silica. The health hazards of silica come from breathing in the dust. If crystalline silica becomes airborne through industrial activities, exposures to fine crystalline silica dust can lead to a disabling, sometimes fatal disease called silicosis. The fine particles are deposited in the lungs, causing thickening and scarring of the lung tissue. The scar tissue restricts the lungs' ability to extract oxygen from the air. This damage is permanent, but the symptoms of the diseases may not appear for many years.

AUTHORITY:

OSHA 29, CFR 1910.1053, 1926.1153, NRS 209.131

This Operational Procedure can only be revised by the Compliance Enforcement Unit.

RESPONSIBILITY:

6. The Director/Deputy Director of Operation will provide the resources necessary to effectively implement and maintain an effective written Respiratory Crystalline Silica Exposure Control Plan.
7. The Warden/Associate Warden(s) shall be responsible for implementing an effective written Respiratory Crystalline Silica Exposure Control Plan at their respective facility and associated facilities.
8. The Facility Supervisor is responsible for enforcement and compliance to the facilities written Respiratory Crystalline Silica Exposure Control Plan.
9. Each employee shall be made aware of and be responsible for following the facility written Respiratory Crystalline Silica Exposure Control Plan.
10. The Compliance Enforcement Unit will conduct periodic inspections at each facility to verify the provisions of the facilities written Respiratory Crystalline Silica Exposure Control Plan is being implemented and enforced.

DEFINITIONS

Action level means a concentration of airborne respirable crystalline silica of 25 µg/m³, calculated as an 8-hour TWA.

Employee exposure means the exposure to airborne respirable crystalline silica that would occur if the employee were not using a respirator.

High-efficiency particulate air [HEPA] filter means a filter that is at least 99.97 percent efficient in removing mono-dispersed particles of 0.3 micrometers in diameter.

Objective data means information, such as air monitoring data from industry-wide surveys or calculations based on the composition of a substance, demonstrating employee exposure to respirable crystalline silica associated with a particular product or material or a specific process, task, or activity. The data must reflect workplace conditions closely resembling or with a higher exposure potential than the processes, types of material, control methods, work practices, and environmental conditions in NDOC's current operations.

Physician or other licensed health care professional [PLHCP] means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide or be delegated the responsibility to provide some or all of the particular health care services required by paragraph (i) of this section.

Regulated area means an area, demarcated by NDOC, where an employee's exposure to airborne concentrations of respirable crystalline silica exceeds, or can reasonably be expected to exceed, the PEL.

Respirable crystalline silica means quartz, cristobalite, and/or tridymite contained in airborne particles that are determined to be respirable by a sampling device designed to meet the characteristics for respirable-particle-size-selective samplers specified in the International Organization for Standardization (ISO) 7708:1995: Air Quality – Particle Size Fraction Definitions for Health-Related Sampling.

Specialist means an American Board Certified Specialist in Pulmonary Disease or an American Board Certified Specialist in Occupational Medicine.

Time-weighted average (TWA) means a time-weighted average concentration for up to a 10-hour workday during a 40-hour workweek as defined by The National Institute for Occupation Safety and Health.

POTENTIAL CRYSTALLINE SILICA EXPOSURES:

Crystalline silica is usually contained in rocks and released via dust. The following activities (not all inclusive) may cause Crystalline Silica dust in the air:

1. Sawing, hammering, cutting, drilling, grinding, and chipping of concrete or masonry
2. Chipping, hammering, and drilling rock
3. Dry sweeping or pressurized air blowing of concrete, rock, or sand dust
4. Crushing, loading, hauling, and dumping rock
5. Sandblasting
6. Demolition of concrete and masonry structures
7. Concrete mixing

PERMISSIBLE EXPOSURE LIMIT (PEL)

No employee shall be exposed to an airborne concentration of respirable crystalline silica in excess of 50 µg/m³, calculated as an eight (8) hour TWA.

EXPOSURE ASSESSMENT

1. NDOC shall assess the exposure of each employee who is or may reasonably be expected to be exposed to respirable crystalline silica at or above the action level in accordance with either the performance option or the scheduled monitoring option listed below.
2. **Performance option** – NDOC shall assess the 8-hour TWA exposure for each employee on the basis of any combination of air monitoring data or objective data sufficient to accurately characterize employee exposures.
3. **Scheduled monitoring option** – NDOC shall perform initial monitoring to assess the 8-hour TWA exposure for each employee on the basis of one or more personal breathing zone air samples that reflect the exposures of employees on each shift, for each job classification, in each work area. Where several employees perform the same tasks on the same shift and in the same work area, NDOC may sample a representative fraction of these employees in order to meet this requirement. In representative sampling, NDOC shall sample the employee(s) who are expected to have the highest exposure.
 - A. If initial monitoring indicates that employee exposures are below the action level, NDOC may discontinue monitoring for those employees whose exposures are represented by such monitoring.
 - B. Where the most recent exposure monitoring indicates that employee exposures are at or above the action level but at or below the PEL, NDOC shall repeat such monitoring within six months of the most recent monitoring.
 - C. Where the most recent exposure monitoring indicates that employee exposures are above the PEL, NDOC shall repeat such monitoring within three months of the most recent monitoring.
 - D. Where the most recent (non-initial) exposure monitoring indicates that employee exposures are below the action level, NDOC shall repeat such monitoring within six months of the most recent monitoring until two consecutive measurements, taken 7 or more days apart, are below the action level, at which time NDOC may discontinue monitoring for those employees whose exposures are represented by such monitoring.
4. NDOC shall reassess exposures whenever a change in the production, process, control equipment, personnel, or work practices may reasonably be expected to result in new or additional exposures at or above the action level, or when NDOC has any reason to believe that new or additional exposures at or above the action level have occurred.
5. NDOC shall ensure that all samples taken to satisfy the monitoring requirements are evaluated by a laboratory that analyzes air samples for respirable crystalline silica.
6. Employee notification of assessment results.
 - A. Within 15 working days after completing an exposure assessment NDOC shall individually notify each affected employee in writing of the results of that assessment or post the results in an appropriate location accessible to all affected employees.
 - B. Whenever an exposure assessment indicates that employee exposure is above the PEL, NDOC shall describe in the written notification the corrective action being taken to reduce employee exposure to or below the PEL.

REGULATED AREAS

1. The Chief Engineer/Facility Supervisor shall establish a regulated area wherever an employee's exposure to airborne concentrations is, or can reasonably be expected to be, in excess of the PEL.
2. The Chief Engineer/Facility Supervisor shall demarcate regulated areas from the rest of the workplace in a manner that minimizes the number of employees exposed to respirable crystalline silica within the regulated area. The Facility Supervisor shall post signs at all entrances to regulated areas that bear the following legend:

**DANGER
RESPIRABLE CRYSTALLINE SILICA
MAY CAUSE CANCER
CAUSES DAMAGE TO LUNGS
WEAR RESPIRATORY PROTECTION IN THIS AREA
AUTHORIZED PERSONNEL ONLY**

3. The Facility Supervisor shall limit access to all regulated areas and provide the appropriate personal protective equipment to persons authorized to enter the area.

METHODS OF COMPLIANCE

The Chief Engineer/Facility Supervisor shall use engineering and work practice controls to reduce and maintain employee exposure below the PEL, unless the Chief Engineer/Facility Supervisor can demonstrate that such controls are not feasible. Wherever such feasible engineering and work practice controls are not sufficient to reduce employee exposure to or below the PEL, the Chief Engineer/Facility Supervisor shall nonetheless use them to reduce employee exposure to the lowest feasible level and shall supplement them with the use of respiratory protection.

1. Engineering Controls:
 - A. Substitute a less harmful material
 - B. Change, enclose, isolate, the hazardous process
 - C. Use ventilation to reduce exposure
2. Work Practice Controls:
 - A. Use wet method to suppress dust
 - B. Use good personal hygiene
 - C. Use good housekeeping, maintenance
 - D. Use job rotation of workers

RESPIRATORY PROTECTION

1. Where respiratory protection is required, the Facility Supervisor must provide each employee with an appropriate respirator where:

- A. Exposures exceed the PEL during periods necessary to install or implement feasible engineering and work practice controls;
 - B. Exposures exceed the PEL during tasks, such as certain maintenance and repair tasks, for which engineering and work practice controls are not feasible;
 - C. Tasks for which an employer has implemented all feasible engineering and work practice controls and such controls are not sufficient to reduce exposures to or below the PEL; and
 - D. The employee is in a regulated area.
2. Where respirator use is required AR 364 shall be consulted for further guidance.

HOUSEKEEPING

1. The Facility Supervisor shall not allow dry sweeping or dry brushing where such activity could contribute to employee exposure unless wet sweeping, HEPA filtered vacuuming or other methods that minimize the likelihood of exposure are not feasible.
2. The Facility Supervisor shall not allow compressed air to be used to clean clothing or surfaces where such activity could contribute to employee exposure unless:
 - A. The compressed air is used in conjunction with a ventilation system that effectively captures the dust cloud created by the compressed air; or
 - B. No alternative method is feasible.

MEDICAL SURVEILLANCE

2. NDOC shall make medical surveillance available at no cost to the employee, and at a reasonable time and place, for each employee who will be occupationally exposed at or above the action level for 30 or more days per year. NDOC shall ensure that all medical examinations and procedures required by this section are performed by a PLHCP.
3. NDOC shall make available an initial (baseline) medical examination for maintenance staff that may be exposed to respirable Crystalline Silica within 30 days after initial assignment, unless the employee has received a medical examination that meets the requirements of this section within the last three years. The examination shall consist of:
 - A. A medical and work history, with emphasis on: past, present, and anticipated exposure to respirable crystalline silica, dust, and other agents affecting the respiratory system; any history of respiratory system dysfunction, including signs and symptoms of respiratory disease (e.g., shortness of breath, cough, wheezing); history of tuberculosis; and smoking status and history;
 - B. A physical examination with special emphasis on the respiratory system;
 - C. A chest X-ray (a single posteroanterior radiographic projection or radiograph of the chest at full inspiration recorded on either film (no less than 14 x 17 inches and no more than 16 x 17 inches) or digital radiography systems), interpreted and classified according to the International Labour Office (ILO) International Classification of Radiographs of Pneumoconioses by a NIOSH-certified B Reader;
 - D. A pulmonary function test to include forced vital capacity (FVC) and forced expiratory volume in one second (FEV1) and FEV1/FVC ratio, administered by a spirometry technician with a current certificate from a NIOSH-approved spirometry course;
 - E. Testing for latent tuberculosis infection; and
 - F. Any other tests deemed appropriate by the PLHCP.

4. The Facility Supervisor shall make available periodic medical examinations at least every three years, or more frequently if recommended by the PLHCP.
5. The Facility Supervisor shall ensure that the examining PLHCP has a copy of the OSHA standard 1910.1053 and 1926.1153 Respirable Crystalline Silica, and shall provide the PLHCP with the following information:
 - A. A description of the employee's former, current, and anticipated duties as they relate to the employee's occupational exposure to respirable crystalline silica;
 - B. The employee's former, current, and anticipated levels of occupational exposure to respirable crystalline silica;
 - C. A description of any personal protective equipment used or to be used by the employee, including when and for how long the employee has used or will use that equipment; and
 - D. Information from records of employment-related to medical examinations previously provided to the employee.
6. NDOC shall ensure that the PLHCP explains to the employee the results of the medical examination and provides each employee with a written medical report within 30 days of each medical examination performed. The written report shall contain:
 - A. A statement indicating the results of the medical examination, including any medical condition(s) that would place the employee at increased risk of material impairment to health from exposure to respirable crystalline silica and any medical conditions that require further evaluation or treatment;
 - B. Any recommended limitations on the employee's use of respirators;
 - C. Any recommended limitations on the employee's exposure to respirable crystalline silica; and
 - D. A statement that the employee should be examined by a specialist if the chest X-ray provided in accordance with this section is classified as 1/0 or higher by the B Reader, or if referral to a specialist is otherwise deemed appropriate by the PLHCP.
7. PLHCP's written medical opinion for NDOC.
 - A. NDOC shall obtain a written medical opinion from the PLHCP within 30 days of the medical examination. The written opinion shall contain only the following:
 - (A) The date of the examination;
 - (B) A statement that the examination has met the requirements of this section; and
 - (C) Any recommended limitations on the employee's use of respirators.
 - B. If the employee provides written authorization, the written opinion shall also contain either or both of the following:
 - (A) Any recommended limitations on the employee's exposure to respirable crystalline silica;
 - (B) A statement that the employee should be examined by a specialist if the chest X-ray is classified as 1/0 or higher by the B Reader, or if referral to a specialist is otherwise deemed appropriate by the PLHCP.
 - C. NDOC shall ensure that each employee receives a copy of the written medical opinion described within 30 days of each medical examination performed.
8. Additional examinations.
 - A. If the PLHCP's written medical opinion indicates that an employee should be examined by a specialist, NDOC shall make available a medical examination by a specialist within 30 days after receiving the PLHCP's written opinion.
 - B. NDOC shall ensure that the examining specialist is provided with all of the information that NDOC is obligated to provide to the PLHCP.

- C. NDOC shall ensure that the specialist explains to the employee the results of the medical examination and provides each employee with a written medical report within 30 days of the examination.
- D. NDOC shall obtain a written opinion from the specialist within 30 days of the medical examination.

COMMUNICATION OF RESPIRABLE CRYSTALLINE SILICA HAZARDS TO EMPLOYEES

- 1. NDOC shall include respirable crystalline silica in NDOC's hazard communication training program and shall cover at least the following hazards: Cancer, lung effects, immune system effects, and kidney effects.
- 2. The Chief Engineer/Facility Supervisor shall post signs at all entrances to regulated areas that bear the following legend:

**DANGER
RESPIRABLE CRYSTALLINE SILICA
MAY CAUSE CANCER
CAUSES DAMAGE TO LUNGS
WEAR RESPIRATORY PROTECTION IN THIS AREA
AUTHORIZED PERSONNEL ONLY**

- 3. Employee information and training.
 - A. Employee Development shall provide training to all affected employees and those employees shall be able to demonstrate knowledge and understanding of at least the following:
 - I. The health hazards associated with exposure to respirable crystalline silica;
 - II. Specific tasks in the workplace that could result in exposure to respirable crystalline silica;
 - III. Specific measures NDOC has implemented to protect employees from exposure to respirable crystalline silica, including engineering controls, work practices, and respirators to be used; and
 - IV. The purpose and a description of the medical surveillance.

RECORDKEEPING

- 1. Air monitoring data.
 - A. The Facility Supervisor shall make and maintain an accurate record of all exposure measurements taken to assess employee exposure that shall consist of the following information:
 - I. The date of measurement for each sample taken;
 - II. The task monitored;
 - III. Sampling and analytical methods used;
 - IV. Number, duration, and results of samples taken;
 - V. Identity of the laboratory that performed the analysis;
 - VI. Type of personal protective equipment, such as high-efficiency particulate air respirator, worn by the employees monitored; and

- VII. Name, employee number, and job classification of all employees represented by the monitoring, indicating which employees were actually monitored.
 - B. The Facility Supervisor shall ensure that exposure records are maintained for no less than 30 years.
2. Objective data.
- A. The Facility Supervisor shall make and maintain an accurate record of all objective data relied upon to comply with the requirements of this section.
 - B. This record shall include at least the following information:
 - I. The crystalline silica-containing material in question;
 - II. The source of the objective data;
 - III. The testing protocol and results of testing;
 - IV. A description of the process, task, or activity on which the objective data were based; and
 - V. Other data relevant to the process, task, activity, material, or exposures on which the objective data were based.
 - C. The Facility Supervisor shall ensure that objective data are maintained for no less than 30 years.
3. Medical surveillance.
- A. The Loss Control Coordinator shall make and maintain an accurate record for each employee covered by medical surveillance.
 - B. The record shall include the following information about the employee:
 - I. Name and employee number;
 - II. A copy of the PLHCPs' and specialists' written medical opinions; and
 - III. A copy of the information provided to the PLHCPs and specialists.
 - C. The Loss Control Coordinator shall ensure that medical records are maintained for no less than 30 years.

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
420**

INMATE DEATH OR SERIOUS INJURY PROCEDURE

Supersedes: AR 420 (06/17/12); AR 420 (Temporary, 12/02/13); and AR 420 (Temporary, 02/18/14); AR420 3/18/14

Effective Date: 01/03/2017 (Temporary)

AUTHORITY: NRS 120A.590, NRS 134.120, NRS 146.080; NRS 209.131; NRS 209.3815; NRS 440.165; NRS 440.175, NRS 440.415; NRS 450B; NRS 451.400

PURPOSE: To strive to avoid preventable deaths and injuries, to ensure appropriate care and notification; and to review the appropriateness of clinical and correctional policies and procedures, to identify changes or the ability to improve operations.

RESPONSIBILITY:

The Deputy Director of Operations is responsible for the implementation of this procedure at all institution facilities.

The Warden is responsible for ensuring compliance with the Inmate Death Procedure at their respective facility and ensuring operational policies and procedures are developed; and staff is trained on the procedures.

All Department staff involved are responsible to have knowledge of and comply with this procedure.

420.01 INMATE DEATHS OR SERIOUS INJURY PROCEDURE – DISCOVERY

1. The first staff member(s) present at the scene of a serious injury or inmate death will call for assistance; and initiate first aid and/or cardiopulmonary resuscitation (CPR) as needed. If the offender is found hanging, the responder(s) will immediately cut him/her down and begin appropriate medical care. All NDOC housing locations and areas where inmates may be present will have approved cutting devices available to be used for the purpose of cutting down the inmate or removing ligatures (*note: custody staff do not have the authority to determine death or time of death.*)
 - A. Every precaution should be taken to ensure the safety and security of all persons present;

- B. The response to the serious injury or possible inmate death will be based upon the unit's operating policies and procedures for the inmate population housed within. Every precaution should be taken to ensure that all evidence is protected.

2. Upon discovery of what appears to be a deceased inmate, the Shift Supervisor shall be notified immediately. The immediate area shall be secured and no one other than a medical staff member will be allowed to enter the cell until designated investigators, the coroner, or outside law enforcement officials arrive. The Shift Supervisor shall make the proper notifications in accordance with Section 420.02 of this administrative regulation.

3. Humane treatment of the inmate shall prevail.

- A. A hanging inmate shall immediately be cut down, leaving the ligature in place if the inmate is deceased.
- B. If the inmate does not appear to be deceased, life saving measures should be immediately initiated and the ligature removed and placed in secure location where the least amount of disturbance should occur.
- C. The body shall not be left unattended.
- D. The area or cell shall be secured.
- C. No item shall be moved from or about the secured area.

4. The scene shall be photographed and videotaped following the guidelines established in Administrative Regulation 458.

5. In any case where the inmate appears deceased, the staff person(s) who discovers the body shall write a comprehensive incident report prior to leaving the institution/facility. This report shall be approved by a supervisor and entered into NOTIS. The report will include at a minimum the following:

- A. Name of the staff person discovering the body, the name of the inmate and the names of any witnesses and name and number of cell partner if the body was discovered in the cell.
- B. Time of the discovery of the body the body's appearance such as discoloration, puncture wounds or other evidence of trauma.
- C. A description of the scene such as cell number or area and the appearance of the area such as the cell was in disarray, or neat, bodily fluids such as blood in order to assist in the collection of evidence and investigative reports.
- D. Describe action taken upon discovery of the body such notification of other staff, supervisors or medical and the time of the notifications.

- E. Describe any attempts to provide first-aid or other actions such as using the cut-down tool and the time that first-aid ceased and medical arrived.
 - F. Enter the time that the body was released to medical or the body was removed from the scene.
 - G. If investigators arrive at the scene and the staff person is still at the scene, enter the time that the investigators arrived.
6. Upon notification, Medical personnel shall proceed to the scene and confirm the death, but will in no way disturb the scene or any of the evidence.
- A. Only a Doctor of Medicine, a Doctor of Osteopathic Medicine, the Coroner, and a Coroner's Deputy; or when authorized, a Registered Nurse, or a Physician Assistant, can pronounce a person legally dead.
 - B. In all instances, the appropriate Coroner will be contacted to examine the body and determine the cause of death.
 - C. The Supervisory Staff member will notify the Inspector General for investigative response to the scene.
7. The Shift Supervisor shall have the primary responsibility for assuring that no evidence is moved or tampered with, including the complete preservation of the scene, prior to the arrival of the representative from the Inspector General's Office and the Coroner. Upon the arrival of the Coroner, staff shall assist and cooperate with the investigation as is appropriate and necessary.
8. Next of kin notification procedures will be initiated by the institutional Chaplain and/or Associate Warden of Programs.
9. After obtaining permission from the Coroner, and after the initial investigation is completed; the body of the deceased shall be covered and removed to the morgue, mortuary, or private room in the infirmary.
- A. The Director, in consultation with the designated medical director and the Inspector General of the Department, shall request the Coroner, or any other persons so authorized, to conduct an autopsy of any offender who dies while in the custody of the Department, if the next of kin.
 - (1) Consents to the autopsy; or
 - (2) Does not notify the Director of any objection to the autopsy within 72 hours after the death. Unless an objection is received by the Director from the next of kin within 72 hours of death, an autopsy will be requested in all cases.

(3) In those cases where the next of kin declines the autopsy, the next of kin must submit their intent to refuse the autopsy, in writing, within the 72 hour time frame.

B. If the death is suspected to be a suicide (which will be considered an unresolved death) or if the death is under suspicious circumstances, the Coroner shall be requested to inform the morgue/mortuary that the body is not to be embalmed until a full and complete criminal investigation is conducted.

C. Bodies shall be removed as expeditiously as circumstances will permit.

10. Investigation of crimes involving great bodily injury or homicides shall be coordinated between the Department's Inspector General's Office and relevant law enforcement officials.

A. The local sheriff's office may be requested to assist in appropriate aspects of the investigation, as circumstances require.

B. Requests for assistance from the Department of Public Safety, Investigations Division and the Attorney General's Office shall comply with related agency assist agreements and will be coordinated by the Department and local sheriff's office.

11. Employees of the Department should assist the coroner or local law enforcement in the investigation, as is appropriate and to cooperate in every way necessary.

12. States housing contract and interstate compact inmates in the Department will be notified concerning the incident by the Offender Management Division Administrator.

420.02 DEATHS OR SERIOUS INJURY REPORTING REQUIREMENTS

1. If an inmate death or serious injury occurs in one of the institutions or facilities, the Shift Supervisor, Associate Warden or Warden shall immediately notify the following in sequential order and will include who the involved inmate(s) is/was, when the incident occurred, where the incident occurred and how the incident occurred:

A. On-duty medical staff;

B. The Warden, Associate Wardens or Facility Manager;

C. Inspector General;

D. Local Police Department or Sheriff's Office;

E. The Warden shall immediately notify the Director and the Deputy Director of Operations;

F. The Administrator of the Offender Management Division;

G. The Chaplain;

H. The Next of Kin;

1) The Chaplain shall inform the next of kin; and provide information that an autopsy will be requested unless the next of kin provides notification to the Director in writing, within 72 hours of the death. If the Chaplain is not available, the Associate Warden or designee shall notify the next of kin, and provide the autopsy information.

I) The Public Information Officer (PIO), who is responsible to notify the media;

1) The Warden/Designee is responsible for completing the PIO Information (NDOC Form 4520) and sending it to the PIO, within 24-hours, or as soon as possible.

420.03 DUTIES OF OTHERS

1. Physician/Doctor: The physician may consult with the Coroner to determine if the death was caused by natural or unnatural causes, or if suspicious circumstances exist.

2. Coroner

A. In the case of a death, the body shall be released only upon instructions from the coroner.

B. Prior to the removal of the deceased from institutional grounds, a body receipt for the remains will be obtained from the Coroner, mortuary, medical examiner, or otherwise authorized/designated personnel.

C. The body shall not be moved, except at the direction of the Coroner, and upon the completion of the initial investigation.

D. Autopsies and toxicology reports will be performed at the request of the Director as authorized by NRS 209.3815.

3. Institutional Warden or Facility Manager shall:

A. Initiate an investigation or take other custody measures as necessary, to include securing the crime scene.

B. Make appropriate notifications as set forth in Sections 420.02 and 420.03 of this Regulation.

4. Upon receiving information that an inmate has died, the Associate Warden shall:

- A. Assure that all available records, including the "I" file, medical records, mail, and visiting records are secured.
- B. Ensure that the Chaplain has access to information on the next-of-kin and/or to the list of names, relationships, and addresses of relative and friends to be notified in case of death as indicated previously by the inmate.
- C. Ensure all reports are received and an incident report is submitted.
- D. Prior to the release of the body, ensure that the inmate is positively identified.
- E. Coordinate the Department's and other agency activities related to the incident.
- F. Other duties as assigned.

5. Chaplain:

- A. The Chaplain shall make reasonable efforts to promptly notify the next of kin.
- B. When the Chaplain is not available, the Associate Warden or a designee shall notify the next-of-kin.
- C. The next-of-kin information shall be maintained and updated every six-months by the institution/facility staff during the inmate's periodic classification review as directed in AR 636.

6. Offender Management Division Administrator will notify the Department's Statistician to obtain the death certificate.

420.04 DEATHS OCCURRING AT A PLACE REMOTE FROM AN INSTITUTION

1. If a death occurs in a camp, while fighting fire, or while in transit between institutions, the Department's officer in charge shall take the following actions:

- A. Summon proper custodial support, as appropriate to the situation.
- B. If necessary, summon nearest medical response for life support.
- C. Notify the Inspector General.
- D. Notify the Administrator of the OMD and the Warden of the gatekeeper institution by telephone and seek further instructions.
- E. The Warden of the gatekeeper institution will notify the Director and the Deputy Director of Operations.

- F. Notify all local officials, as required.
- G. Complete and submit a final report containing the circumstances, investigations, all arrangements, etc., to the Warden of the gatekeeper institution, if applicable.

420.05 DISPOSITION OF THE DECEASED INMATE'S PROPERTY

1. The property of the deceased inmate shall be immediately secured, inventoried, and placed in safe storage at the institution or facility, pursuant to AR 711.
2. If all or part of the inmate's property is required for an investigation into the circumstances of the death, that property shall be accounted for by receipt to the investigative agency.
3. The Associate Warden or Facility Manager shall conduct such inquiry necessary to determine if that inmate died with or without a will. The Chaplain may be asked to help with this inquiry.
4. If a will exists, the inmate's property and any money on their account, after deductions, with the Department, shall be released to the executor of the estate by the Associate Warden or the Facility Manager, but only after any investigations are complete.
 - A. Funds received after the inmate's death will be returned to sender.
 - B. Distribution of dividends and other income received after the inmate's death will be determined on a case-by-case basis.
 - C. Without a known will, the inmate's property and any money on their account with the Department shall be released to the next-of-kin.
5. When an Inmate Dies:
 - A. Offender Management Division is to notify Chief of Inmate Banking or Designee by email within two (2) working days. Information to include Inmate name, Inmate number, date of death and institution/facility.
 - B. Inmate Banking Services will freeze inmate accounts until receipt of Affidavit of Distribution without Administration or after consultation with the Deputy Attorney General (DAG) concerning the appropriate legal documentation.
 - (1) The Associate Warden/Facility Manager is responsible to coordinate the release of all funds/property.
 - (2) All investigations shall be completed prior to the release of funds/property.
 - (3) The Associate Warden, Facility Manager, the Administrator of the OMD and an Administrator from Support Services, in consultation with a DAG shall determine the appropriate distribution of all funds and property.

- (4) Without a known will and with no known next-of-kin, the accounts of the inmate shall remain frozen and the property held in safe storage.
6. If the inmate's property and funds are valued under \$20,000, the Affidavit of Distribution without Administration requires the signature of the next-of-kin prior to distribution of funds and/or property per NRS 146.080, regardless if an inmate dies with or without a will.
- A. The original document shall be placed in the C-File.
 - B. One copy shall be placed in the I-File.
 - C. One copy shall remain with the property records.
 - D. One copy shall be forwarded to Inmate Services.
7. The Associate Warden or the Facility Manager shall prepare documentation that serves to facilitate these actions and to record the results.
8. In any case where the inmate refuses to provide next of kin information and no last will and testament exists, and the Department cannot verify identification of an approved next of kin, all property of value will be maintained at the institution for a determined amount of time until the property can be reviewed distributed or destroyed according to the value of the property.
9. In any case where the inmate refuses to provide next of kin information and no last will and testament exists, and the Department cannot verify identification of an approved next of kin, all money will be referred to as abandoned property and relocated to its proper distribution authority.

420.06 INMATE DONATION OF REMAINS FOR ANATOMICAL PURPOSES

1. Inmates may, if they choose, sign a Consent Anatomical Disposition, DOC-2567, authorizing release of the inmate's body in the event of death to the School of Medical Science, University of Nevada, Reno. The acceptance shall be governed by the Uniform Anatomical Gift Act, NRS 451.440.
2. The next-of-kin of a deceased inmate may authorize release of the body for medical science according to the Uniform Anatomical Gift Act. Form DOC-2567 Consent Anatomical Disposition is available for this purpose.

420.07 FUNERAL EXPENSES

1. When the family elects to claim the body of a deceased inmate, they shall be responsible for all costs incurred. The Department may, upon approval of the Director or Deputy Director of Support Services, pay for shipping costs of the body, if the costs are less than cremation expenses.

2. In the event the family declines to claim the body, the Department will only pay for cremation costs for the deceased inmate.

420.08 AUTOPSIES OR POST-MORTEM EXAMINATIONS

Autopsies and toxicology reports should be performed on all deceased NDOC inmates per NRS 209.3815.

420.09 DOCUMENTATION

Records and reports required for deaths occurring on the Department's property, or during official absences from the institution, shall meet the following requirements:

- A. All personnel who possess information regarding the circumstances surrounding the death shall submit a report to the Warden/Facility Manager. These reports shall be completed in accordance with the provisions of AR 332.
- B. The following personnel shall submit reports:
 - (1) Any staff member who was on the scene at the time of an incident or who responded to the scene during initial response;
 - (2) Any staff member(s) discovering the body; and
 - (3) Any medical personnel who attempted life-saving emergency treatment, including Form DOC-2514, Medical Report of Incident, Injury or Unusual Occurrence.
- C. Reports shall be as specific as possible, listing the employee's role, names of other persons on the scene, observations, and timing of events.
- D. The OMD is responsible for obtaining a death certificate, which will be placed in a locked filing cabinet to allow for confidentiality of the certificate. .
 - (1) In accordance with NRS 440.165 and 440.175, NDOC is not authorized to reproduce and/or disseminate any vital record such as a certificate of death.

420.10 NEXT-OF-KIN DOCUMENTATION

- 3. The Warden shall send a letter to the next-of-kin within one week of the inmate's death. The letter shall express condolences and refer the next-of-kin to the Associate Warden or Facility Manager for the disbursement and distribution of personal property.
- 4. It is imperative that the "Next-of-Kin" form be maintained and updated in the Institutional file and in the case notes in the Nevada Offender Tracking Information System (NOTIS) to assure

accurate information is available to administration at the time of illness or death of an inmate. This information shall be entered at the initial intake process and shall be reviewed with the inmate and updated when applicable by Caseworkers at all regular reclassification hearings.

APPLICABILTY

- 1. This AR requires an Operational Procedure for all institutions/facilities and impacted divisions of the Department.
- 2. This AR requires an audit.

REFERENCES

ACA Standards 4-4425; 4-4395,


James Dzurenda, Director

1/4/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
420**

INMATE DEATH OR SERIOUS INJURY PROCEDURE

Supersedes: AR 420 (06/17/12); AR 420 (Temporary, 12/02/13); and AR 420 (Temporary, 02/18/14); [AR420 3/18/14](#)

Effective Date: [01/03/2017 \(Temporary\)](#)

AUTHORITY:

[NRS 120A.590](#), [NRS 134.120](#), [NRS 146.080](#); [NRS 209.131](#); [NRS 209.3815](#); [NRS 440.165](#); [NRS 440.175](#), [NRS 440.415](#); [NRS 450B](#); [NRS 451.400](#)

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PURPOSE: To strive to avoid preventable deaths and injuries, to ensure appropriate care and notification; and to review the appropriateness of clinical and correctional policies and procedures, to identify changes or the ability to improve operations.

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RESPONSIBILITY:

The Deputy Director of Operations is responsible for the implementation of this procedure at all institution facilities.

The Warden is responsible for ensuring compliance with the Inmate Death Procedure at their respective facility and ensuring operational policies and procedures are developed; and staff is trained on the procedures.

All Department staff involved are responsible to have knowledge of and comply with this procedure.

420.01 INMATE DEATHS OR SERIOUS INJURY PROCEDURE – DISCOVERY

1. The first staff member(s) ~~who is~~ present at the scene of a serious injury or inmate death will call for assistance; ~~will call for medical and custodial back up assistance~~ and initiate first aid and/or cardiopulmonary resuscitation (CPR) as needed. If the offender is found hanging, the responder(s) will immediately cut him/her down and begin appropriate medical care. All NDOC housing locations and areas where inmates may be present will have approved cutting devices available to be used for the purpose of cutting down the inmate or removing ligatures

(if the inmate is not deceased note: custody staff do not have the authority to determine death or time of death.)

A. Every precaution should be taken to ensure the safety and security of all persons present;

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B. The response to the serious injury or possible inmate death will be based upon the unit's operating policies and procedures for the inmate population housed within. Every precaution should be taken to ensure that all evidence is protected.

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2. Upon discovery of a what appears to be a deceased inmate, the Shift Supervisor shall be notified immediately. The immediate area shall be secured and no one other than a medical staff member will be allowed to enter the cell until designated investigators, the coroner, or outside law enforcement officials arrive. The Shift Supervisor shall make the proper notifications in accordance with Section 420.02 of this administrative regulation.

~~enter the cell until designated investigators, the coroner, or outside law enforcement officials arrive. The Shift Supervisor shall notify the Associate Warden, Warden, the Inspector General's Office, Medical Director, Deputy Director of Operations and the Public Information Officer to report the death. make the proper notifications in accordance with Section 420.02 of this administrative regulation procedure.~~

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3. Common sense and humane treatment of the inmate shall prevail.

A. A hanging inmate shall immediately be cut down, leaving the ligature in place if the inmate is deceased.

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B. If the inmate does not appear to be is not deemed deceased, life saving measures should be immediately initiated and the ligature removed and placed in secure location where the least amount of disturbance should occur.

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C. The body shall not be left unattended.

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D. The area or cell shall be secured.

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C. No item shall be moved from or about the secured area.

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4. The scene shall be photographed and videotaped following the guidelines established in Administrative Regulation 458.

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5. In any case where the inmate appears deceased has died, the staff person(s) who discovers the body shall write a comprehensive incident report prior to leaving the institution/facility. This report shall be approved by a supervisor and then entered into NOTIS. The report will include at a minimum the following:

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A. Name of the staff person discovering the body, the name of the inmate and the names of any witnesses and name and number of cell partner if the body was discovered in the cell.

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B. Time of the discovery of the body the body's appearance such as discoloration, puncture wounds or other evidence of trauma.

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C. A description of the scene such as cell number or area and the appearance of the area such as the cell was in disarray, or neat, bodily fluids such as blood in order to assist in the collection of evidence and investigative reports.

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D. Describe action taken upon discovery of the body such notification of other staff, supervisors or medical and the time of the notifications.

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E. Describe any attempts to provide first-aid or other actions such using the cut-down tool and the time that first-aid ceased and medical arrived.

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F. Enter the time that the body was released to medical or the body was removed from the scene.

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G. If investigators arrive at the scene and the staff person is still at the scene, enter the time that the investigators arrived.

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6. Upon notification, Medical personnel shall proceed to the scene and confirm the death, but will in no way disturb the scene or any of the evidence.

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A. Only a Doctor of Medicine, a Doctor of Osteopathic Medicine, the Coroner, and a Coroner's Deputy; or when authorized, a Registered Nurse, or a Physician Assistant, can pronounce a person legally dead.

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B. In all instances, the appropriate Coroner will be contacted to examine the body and determine the cause of death.

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C. The Supervisory Staff member will notify the Inspector General ~~on call supervisory staff member will be notified~~ for investigative response to the scene.

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7. The Shift Supervisor shall have the primary responsibility for assuring that no evidence is moved or tampered with, including the complete preservation of the scene, prior to the arrival of the representative from the Inspector General's Office and the Coroner. Upon the arrival of the Coroner, staff shall assist and cooperate with the investigation as is appropriate and necessary.

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8. Next of kin notification procedures will be initiated by the institutional Chaplain and/or Associate Warden of Programs.

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9. After obtaining permission from the Coroner, and after the initial investigation is completed; the body of the deceased shall be covered and removed to the morgue, mortuary, or private room in the infirmary.

A. The Director, in consultation with the designated medical director and the Inspector General of the Department, shall request the Coroner, or any other persons so authorized, to conduct an autopsy of any offender who dies while in the custody of the Department, if the next of kin.

(1) Consents to the autopsy; or

~~(2)~~ (2) Does not notify the Director of any objection to the autopsy within 72 hours after the death. Unless an objection is received by the Director from the next of kin within 72 hours of death, an autopsy will be requested in all cases.

(3) In those cases where the next of kin declines the autopsy, the next of kin must submit their intent to refuse the autopsy, in writing, within the 72 hour time frame.

B. If the death is suspected to be an apparent suicide (which will be considered an unresolved death) or if the death is under suspicious circumstances, the Coroner shall be requested to inform the morgue/mortuary that the body is not to be embalmed until a full and complete criminal investigation is conducted.

C. Bodies shall be removed as expeditiously as circumstances will permit.

10. Investigation of crimes involving great bodily injury or homicides shall be coordinated between the Department's Inspector General's Office and relevant law enforcement officials.

A. The local sheriff's office may be requested to assist in appropriate aspects of the investigation, as circumstances require.

B. Requests for assistance from the Department of Public Safety, Investigations Division and the Attorney General's Office shall comply with related agency assist agreements and will be coordinated by the Department and local sheriff's office.

11. Employees of the Department should assist the coroner or local law enforcement in the investigation, as is appropriate and to cooperate in every way necessary.

12. States housing contract and interstate compact inmates in the Department will be notified concerning the incident by the Offender Management Division Administrator.

420.02 DEATHS OR SERIOUS INJURY REPORTING REQUIREMENTS

1. If an inmate death or serious injury occurs in one of the institutions or facilities, the Shift Supervisor, Associate Warden or Warden shall immediately notify the following in sequential

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order and will include who the involved inmate(s) is/was, when the incident occurred, where the incident occurred and how the incident occurred:

- A. On-duty medical staff;
- B. The Warden, Associate Wardens or Facility Manager;
- C. Inspector General;
- D. Local Police Department or Sheriff's Office;
- E. The Warden shall immediately notify the Director and the Deputy Director of Operations ~~and Director~~;
- F. The Administrator of the Offender Management Division;

G. The Chaplain;

H. shall make reasonable efforts to promptly notify the Next of Kin; next of kin; and

G.1) The Chaplain, shall inform the next of kin; and provide information that an autopsy will be requested unless the next of kin provides notification to the Director in writing, notify the Director of any objections within 72 hours of the death. If the Chaplain is not available, the Associate Warden or designee shall notify the next of kin, and provide the autopsy information.

~~H.1) The Public Information Officer (PIO), who is responsible to, shall notify the media;~~

1) The Warden/Designee is responsible for completing the PIO Information (NDOC Form -4520) and sending it to the PIO, within 24-hours, or as soon as possible.

~~(1)~~

~~(2) Staff of the Inspector General's Office shall notify the Office of the Attorney General's Criminal Division within 24 hours in the case of suspicious inmate death or serious injury. The notification to the Attorney General's Office will be documented in the existing NOTIS incident report.~~

420.03 DUTIES OF OTHERS

1. Physician/Doctor: The physician may consult with the Coroner to determine if the death was caused by natural or unnatural causes, or if suspicious circumstances exist.

2. Coroner

A. In the case of a death, the body shall be released only upon instructions from the coroner.

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B. Prior to the removal of the deceased from institutional grounds, a body receipt for the remains will be obtained from the Coroner, mortuary, medical examiner, or otherwise authorized/designated personnel.

C. The body shall not be moved, except at the direction of the Coroner, and upon the completion of the initial investigation.

D. Autopsies and toxicology reports will be performed at the request of the Director as authorized by NRS 209.3815.

3. Institutional Warden or Facility Manager shall:

A. Initiate an investigation or take other custody measures as necessary, to include securing the crime scene.

B. Make appropriate notifications as set forth in Sections 420.02 and 420.03 of this Regulation.

4. Upon receiving information that an inmate has died, the Associate Warden shall:

A. Assure that all available records, including the "I" file, medical records, mail, and visiting records are secured.

B. Ensure that the Chaplain has access to information on the next-of-kin and/or to the list of names, relationships, and addresses of relative and friends to be notified in case of death as indicated previously by the inmate.

C. Ensure all reports are received and an incident report is submitted.

D. Prior to the release of the body, ensure that the inmate is positively identified.

E. Coordinate the Department's and other agency activities related to the incident.

F. Other duties as assigned.

5. Chaplain:

A. The Chaplain shall make reasonable efforts to promptly notify the next of kin.

B. When the Chaplain is not available, the Associate Warden or a designee shall notify the next-of-kin.

C. The next-of-kin information shall be maintained and updated every six--months by the institution/facility staff during the inmate's periodic classification review as directed in AR 636.

6. Offender Management Division Administrator will notify the Department's Statistician to obtain the death certificate.

420.04 DEATHS OCCURRING AT A PLACE REMOTE FROM AN INSTITUTION

1. If a death occurs in a camp, while fighting fire, or while in transit between institutions, the Department's officer in charge shall take the following actions:

- A. Summon proper custodial support, as appropriate to the situation.
- B. If necessary, summon nearest medical response for life support.
- C. Notify the Inspector General.
- D. Notify the Administrator of the OMD and the Warden of the gatekeeper institution by telephone and seek further instructions.
- E. The Warden of the gatekeeper institution will notify the [Director and the Deputy Director of Operations](#) ~~and the Director~~.
- F. Notify all local officials, as required.
- G. Complete and submit a final report containing the circumstances, investigations, all arrangements, etc., to the Warden of the gatekeeper institution, if applicable.

420.05 DISPOSITION OF THE DECEASED INMATE'S PROPERTY

1. The property of the deceased inmate shall be immediately secured, inventoried, and placed in safe storage at the institution or facility, pursuant to AR 711.

2. If all or part of the inmate's property is required for an investigation into the circumstances of the death, that property shall be accounted for by receipt to the investigative agency.

3. The Associate Warden or Facility Manager shall conduct such inquiry necessary to determine if that inmate died with or without a will. The Chaplain may be asked to help with this inquiry.

4. If a will exists, the inmate's property and any money on their account, after deductions, with the Department, shall be released to the executor of the estate by the Associate Warden or the Facility Manager, but only after any investigations are complete.

- A. Funds received after the inmate's death will be returned to sender.
- B. Distribution of dividends and other income received after the inmate's death will be determined on a case-by-case basis.

C. Without a known will, the inmate's property and any money on their account with the Department shall be released to the next-of-kin.

5. When an Inmate Dies:

A. Offender Management Division is to notify Chief of Inmate Banking or Designee by email within two (2) working days. Information to include Inmate name, Inmate number, date of death and institution/facility.

B. Inmate Banking Services will freeze inmate accounts until receipt of Affidavit of Distribution without Administration or after consultation with the ~~Deputy Attorney General~~ (DAG) concerning the appropriate legal documentation.

(1) The Associate Warden/Facility Manager is responsible to coordinate the release of all ~~these~~ funds/property.

(2) All investigations shall be completed prior to the release of ~~these~~ funds/property.

(3) The Associate Warden, Facility Manager, the Administrator of the OMD and an Administrator from Support Services, ~~in consultation with a Deputy Attorney General and~~ shall determine the appropriate distribution of all funds and property.

(4) Without a known will and with no known next-of-kin, the accounts of the inmate shall remain frozen and the property held in safe storage.

6. If the inmate's property and funds are valued under \$20,000, the Affidavit of Distribution without Administration requires the signature of the next-of-kin prior to distribution of funds and/or property per NRS 146.080, regardless if an inmate. ~~This is true whether an inmate~~ dies with or without a will.

A. The original document shall be placed in the C-File.

B. One copy shall be placed in the I-File.

C. One copy shall remain with the property records.

D. One copy shall be forwarded to Inmate Services.

7. The Associate Warden or the Facility Manager shall prepare documentation that serves to facilitate these actions and to record the results.

8. In any case there the inmate refuses to provide next of kin information and no last will and testament exists, and the Department cannot verify identification of an approved next of kin, all property of value will be maintained at the institution for a determined amount of time until the property can be reviewed distributed or destroyed according to the value of the property.

9. In any case where the inmate refuses to provide next of kin information and no last will and testament exists, and the Department cannot verify identification of an approved next of kin, all money will be referred to as abandoned property and relocated to its proper distribution authority.

420.06 INMATE DONATION OF REMAINS FOR ANATOMICAL PURPOSES

1. Inmates may, if they choose, sign [a](#) Consent Anatomical Disposition, DOC-2567, authorizing release of the inmate's body in the event of death to the School of Medical Science, University of Nevada, Reno. The acceptance shall be governed by the Uniform Anatomical Gift Act, NRS 451.440.

2. The next-of-kin of a deceased inmate may authorize release of the body for medical science according to the Uniform Anatomical Gift Act. Form DOC-2567 Consent Anatomical Disposition is available for this purpose.

420.07 FUNERAL EXPENSES

1. When the family elects to claim the body of a deceased inmate, they shall be responsible for all costs incurred. The Department may, upon approval of the Director or Deputy Director of Support Services, pay for shipping costs of the body, if the costs are less than cremation expenses.

2. In the event the family declines to claim the body, the Department will only pay for cremation costs for the deceased inmate.

420.08 AUTOPSIES OR POST-MORTEM EXAMINATIONS

Autopsies and toxicology reports should be performed on all deceased NDOC inmates per NRS 209.3815.

420.09 DOCUMENTATION

Records and reports required for deaths occurring on the Department's property, or during official absences from the institution, shall meet the following requirements:

A. All personnel who possess information regarding the circumstances surrounding the death shall submit a report to the Warden/Facility Manager. These reports shall be completed in accordance with the provisions of AR ~~424~~332.

B. The following personnel shall submit reports:

(1) Any staff member who was on the scene at the time of an incident or who responded to the scene during initial response;

(2) Any staff member(s) discovering the body; and

(3) Any medical personnel who attempted life-saving emergency treatment, including Form DOC-2514, Medical Report of Incident, Injury or Unusual Occurrence.

C. Reports shall be as specific as possible, listing the employee's role, names of other persons on the scene, observations, and timing of events.

D. The OMD is responsible for obtaining a death certificate, which will be placed in a locked filing cabinet to allow for confidentiality of the certificate. ~~C-File.~~

(1) ~~A copy will be forwarded to Inmate Services.~~ In accordance with NRS 440.165 and 440.175, NDOC is not authorized to reproduce and/or disseminate any vital record such as a certificate of death.

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~~(2) A copy will be forwarded to Department Accounting.~~

~~(3) A copy will be forwarded to the institution/facility where the inmate died.~~

~~(4) A copy will be forwarded to the NDOC section of the Office of the Attorney General.~~

~~(5) A copy will be forwarded to the Public Information Officer (PIO).~~

420.10 NOTIFICATION OF NEXT-OF-KIN DOCUMENTATION

~~1. Medical staff shall notify the Warden, Associate Warden or a designee whenever an inmate becomes seriously ill, requires hospitalization, or experiences a serious accident. The Warden, Associate Warden or designee shall notify the Institutional Chaplain. The Institutional Chaplain shall notify the family or next of kin. In the absence of a chaplain, the Associate Warden or other administrator trained in crisis intervention and counseling shall make such contact.~~

~~2. Upon the death or serious injury of an inmate, and after receiving the approval of the Warden, the Chaplain or other designee as noted above shall notify the next of kin of the death or serious injury.~~

~~A. Communication with the next of kin shall take place as rapidly as possible by the use of telephone or other methods.~~

~~B. The communication shall be tactfully worded and offer consolation.~~

~~C. Prior to making contact with the next of kin, the Chaplain or other designee shall contact the Warden to determine if there is information needed by the Department in regard to the deceased or their burial.~~

~~D. The Chaplain or designee will inform the next of kin that an autopsy may be performed on the deceased inmate unless they notify the Director of any objection to the autopsy within 72 hours of the inmate's death.~~

~~E. With approval from the Warden, the Chaplain/designee may notify the next of kin of the death, and the address of the coroner's office for the purpose of claiming the deceased remains. The next of kin of the deceased inmate may authorize the release of the body for medical science according to NRS 451.440 by completing the appropriate form.~~

~~F. The Chaplain/designee shall keep the Warden, Shift Supervisor or Caseworker informed of the results of their contacts.~~

~~G. The Associate Warden or Facility Manager shall coordinate with Support Services to affect the disbursement of the deceased's property and trust account funds as outlined in section 420.06.~~

3. The Warden shall send a letter to the next-of-kin within one week of the inmate's death. The letter shall express condolences and refer the next-of-kin to the Associate Warden or Facility Manager for the disbursement and distribution of personal property.

4. It is imperative that the "Next-of-Kin" form be maintained and updated in the Institutional file and in the case notes in the Nevada Offender Tracking Information System (NOTIS) to assure accurate information is available to administration at the time of illness or death of an inmate. This information shall be entered at the initial intake process and shall be reviewed with the inmate and updated when applicable by Caseworkers at all regular reclassification hearings.

APPLICABILITY

1. This AR requires an Operational Procedure for all institutions/facilities and impacted divisions of the Department.

2. This AR requires an audit.

REFERENCES

ACA Standards [4-4425](#); 4-4395, [4-4325](#)

James Dzurenda, Director

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
423**

INSTITUTION/FACILITY ENTRANCE SCANNING PROCEDURE

Supersedes: AR 423 (Temporary, 09/05/11); 06/17/12
Effective date: 01/03/2017, Temporary

AUTHORITY: NRS 209.131; NRS 209.161

PURPOSE:

The purpose of this policy is to prevent the introduction of contraband into NDOC's facilities in an effort to maintain the safety, security and good order of the facility.

RESPONSIBILITY:

The Warden and/or Facility Manager is responsible for the execution of all policies and the enforcement of all regulations at each respective facility.

The Associate Warden is responsible for implementing this policy at each institution and facility.

423.01 USE OF SCANNERS

1. All personnel, employees, and visitors shall be cleared through the walk through scanner and/or subjected to a hand held scanner search prior to gaining access to any institution of the Department to ensure institutional security. The exceptions to the requirement are listed in 423.01.4 below.
2. Should the institution's scanner be inoperable or not available, a hand held scanner of all personnel, employees, and visitors will be utilized prior to gaining access to any institution of the Department.
3. If an employee or any approved person being allowed access cannot clear a walk-through scanner due to medical reasons, a clothed pat down search may be conducted in conjunction with the use of a hand held scanner.
 - A. The search will be conducted in an area to ensure privacy.
 - B. Search will be conducted by a trained correctional staff person of the same sex of the person being searched.

- C. Repetitive and documented medical conditions of staff may not result in a pat search as a hand held scanner may be used instead.
- 4. The following staff/officials are exempt from being processed or searched through any walk-through or hand held scanner in the Department of Corrections:
 - A. Governor of State of Nevada and his executive staff.
 - B. State of Nevada elected officials, to include:
 - (1) Secretary of State;
 - (2) Attorney General and Deputy Attorney Generals;
 - (3) State Senators; or
 - (4) State Assemblymen/Assemblywomen.
 - C. State of Nevada Board of Parole Commissioners.
 - D. Director, Nevada Department of Corrections.
 - E. Deputy Directors, Nevada Department of Corrections.
 - F. Medical Director, Nevada Department of Corrections.
 - G. Inspector General (IG) and IG Investigators, Nevada Department of Corrections.
 - H. Wardens and Associate Wardens, Nevada Department of Corrections.
 - I. All Federal; State and County Nevada Judges.
 - J. Visiting Dignitaries; Policy and Program Consultants; Federal Grant evaluators, as approved by the Director.

APPLICABILITY

- 1. This regulation requires an Operational Procedure for every institution and facility.
- 2. This regulation does not require an audit.

REFERENCES

ACA Standards, 4th Edition 4-4156


James Dzurenda, Director

1/3/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
423**

INSTITUTION/FACILITY ENTRANCE SCANNING PROCEDURE

Supersedes: -AR 423 (Temporary, 09/05/11); 06/17/12

Effective date: 06/17/12-01/03/2017, Temporary Note: This AR was reviewed by the Subject Matter Expert and it was determined that no changes are required as of this date 10/20/14.

AUTHORITY: NRS 209.131; NRS 209.161

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A. Governor of State of Nevada and his executive staff.

B. State of Nevada elected officials, to include:

(1) Secretary of State;

(2) Attorney General and Deputy Attorney Generals;

(3) State Senators; or

(4) State Assemblymen/Assemblywomen.

C. State of Nevada Board of Parole Commissioners.

D. -Director, Nevada Department of Corrections.

E. Deputy Directors, Nevada Department of Corrections.

F. Medical Director, Nevada Department of Corrections.

G. Inspector General (IG) and IG Investigators, Nevada Department of Corrections.

H. Wardens and Associate Wardens, Nevada Department of Corrections.

I. ~~F.~~ All Federal, ~~and~~ State and County of Nevada Judges.

J. Visiting Dignitaries; Policy and Program Consultants; Federal Grant evaluators, as approved by the Director.

APPLICABILITY

1. This regulation requires an Operational Procedure for every institution and facility.
2. This regulation does not require an audit.

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REFERENCES

ACA Standards, 4th Edition 4-4156

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James Dzurenda, Director

____ Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
543**

TRANSITION CENTERS

Supersedes: AR 543 (04/08/11); and AR 543 (Temporary, 05/06/14); 09/16/14
Effective date: 01/03/2017, Temporary

AUTHORITY: NRS 209.341; NRS 209.401; NRS 209.425-209.427;
NRS 209.481; NRS 209.4827 – 209.4829; NRS 209.4871-209.4889; NRS 176A.780

PURPOSE:

The purpose of Transition Centers is to provide inmates and or other designated individuals with the opportunity to successfully transition back into the community. The purpose of this regulation is to provide guidance to staff involved in the selection and placement of individuals in the transitional centers.

RESPONSIBILITY:

The Offender Management Administrator (OMA) is responsible for classification of offenders to transition centers.

The Warden is responsible to ensure compliance with this regulation.

The Facility Manager/Administrator is responsible for the implementation of regulations, operations and management of the Transition Center.

543.01 DEPARTMENT CANDIDATES

1. The department may house inmates in facilities designated for transitional housing and services.
2. The inmate must meet the following criteria to be housed in a transition center:
 - A. The inmate must be within 18 months of probable release.
 - B. Inmates serving only active felony DUI sentence(s) may be considered for transitional housing if the inmate is within 24-months of probably release.
 - C. The inmate is otherwise eligible for Community Trustee per AR 521.

D. The inmate must have six (6) months with no institutional violence and/or major violations of Departmental rules (AR 707) and must have performed their assigned duties.

E. The inmate cannot have been convicted of a violent felony offense or felony involving the use or threat of violence, pursuant to NRS 209.481, within the three (3) preceding three (3) years.

F. The inmate can never have been convicted of a sex offense-that is punishable as a felony.

G. The inmate cannot have escaped or attempted to escape from the NDOC, pursuant to NRS 209.481

H. On a case-by-case basis, with Director/Designee approval, inmates who have been granted parole on their last sentence(s) and have no consecutive sentence(s) pending, who have no felony holds/detainers and who have no convictions for sex offenses that are punishable as a felony, regardless of whether they meet the standard AR 521 and/or AR 543 criteria for Transitional Housing.

I. Minimum custody inmates who may be selected to work inside the perimeter of the facility shall eventually be eligible for Community Trustee Status.

543.02 PAROLE AND PROBATION COMMITMENTS

1. The Department may accept referrals from outside agencies to provide appropriate pre and post release transitional housing and services.

A. Refer to Administrative Regulation 550 (Classification and Management of Safekeeping and Boot Camp Inmates) for further information with regard Regimental Discipline Program participation in Step-Down Program.

B. Opportunity for Probation with Enforcement in Nevada (O.P.E.N) program is designated as an intermediate sanction for the Division of Parole and Probation.

(1) Probationers received into the program are to be entered into the Nevada Offender Tracking (NOTIS) system.

(2) When a probationer is released from CGTH, the probationer is to Return to Committing Authority (RTCA) respectively.

C. Nevada Community Re-entry Program is for NDOC inmates who have been granted parole and are past their parole eligibility dates. Beds designated for this program are located at Casa Grande Transitional Center (CGTH) and the inmate(s) imprisonment status is referred to as Parole Housing Unit (PARHU).

- (1) Inmates from the Overdue for Parole release list will be reviewed and designated P&P staff member will make the final decision on whether an inmate(s) is appropriate and eligible to be accepted into one of these CGTH PARHU beds.
- (2) Even though on parole, the inmate(s) share space with NDOC inmates and if they elect to participate in the CGTH program, the inmate(s) are required to abide by the housing rules, in addition to any other condition(s) of his or her parole.
- (3) Any inmate who is released from this program to a P&P approved residence in the community must have their imprisonment status changed from "PARHU" to CGTH, or applicable institution if returned from this program, prior to being put out to a standard "PAR" (Parole) status.

543.03 CENTER OPERATIONS

1. The Department will notify the referral agency in the event that the individual violates any law, or rule of the Department.

APPLICABILITY

1. This Administrative Regulation requires Operational Procedures within the transitional centers.
2. This Administrative Regulation requires an annual audit.

REFERENCES: ACA 4TH edition: 4-4295; 4-4442;



Director, James Dzurenda

1/3/17

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
543**

TRANSITION CENTERS

Supersedes: AR 543 (04/08/11); and AR 543 (Temporary, 05/06/14); 09/16/14
Effective date: ~~09/16/14~~ 01/03/2017, Temporary

AUTHORITY: NRS 209.341; -
~~_____~~ NRS 209.401;
~~_____~~ NRS 209.425-209.427;
~~_____~~ NRS 209.481;
~~_____~~ NRS 209.4827 – 209.4829;
~~_____~~ NRS 209.4871-209.4889;
~~_____~~ NRS 176A.780

PURPOSE:

The purpose of Transition Centers is to provide inmates and or other designated individuals with the opportunity to successfully transition back into the community. The purpose of this regulation is to provide guidance to staff involved in the selection and placement of individuals in the transitional centers.

RESPONSIBILITY:

The Offender Management Administrator (OMA) is responsible for classification of offenders to transition centers.

~~The center manager is responsible for management of the transition center.~~

The Warden is responsible to ensure compliance with this~~all~~ regulations.

The Facility Center Manager/Administrator is responsible for the implementation of regulations, operations and management of the Transition Center.

543.01 DEPARTMENT CANDIDATES

1. The department may house inmates in facilities designated for transitional housing and services.
2. The inmate must meet the following criteria to be housed in a transition center:

- A. The inmate must be ~~within 18 months of probable release.~~
- B. ~~The inmates serving only active has a Felony DUI sentence(s) may be considered for transitional housing. conviction that is within 24 months of probable release, and will eventually be eligible for the residential confinement phase of the 305 treatment program.~~
- C. The inmate is otherwise eligible for Community Trustee per AR 521.
- D. ~~The inmate must have six (6) months with no institutional violence and/or major violations of Departmental rules (AR 707) and must have The inmate cannot have recently committed a serious infraction within 6 months to the Departmental rules (A.R. 707) or has not performed their assigned duties assigned to him.~~
- E. The inmate cannot have been convicted of a violent felony offense or felony involving the use or threat of violence, pursuant to NRS 209.481. ~~within the preceding 3 years.~~
- F. The inmate can never have been convicted of a sex offense that is punishable as a felony.
- G. The inmate cannot have escaped or attempted to escape from the NDOC, pursuant to NRS 209.481 ~~or any other agency.~~
- H. On a case-by-case basis, with Director/Designee approval, inmates who have been granted parole on their last sentence(s) and have no consecutive sentence(s) pending, who have no felony holds/detainers and who have no convictions for sex offenses that are punishable as a felony, regardless of whether they meet the standard AR 521 and/or AR 543 criteria for Transitional Housing.
- I. Minimum custody inmates who may be selected to work inside the perimeter of the facility shall eventually be eligible for Community Trustee Status.

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543.02 PAROLE AND PROBATION COMMITMENTS

- 1. The Department may accept referrals from outside agencies to provide appropriate pre and post release transitional housing and services.
 - A. Refer to Administrative Regulation 550 (Classification and Management of Safekeeping and Boot Camp Inmates) for further information with regard Regimental Discipline Program participation in Step-Down Program.
 - B. Opportunity for Probation with Enforcement in Nevada (O.P.E.N) program is designated as an intermediate sanction for the Division of Parole and Probation.

(1) Probationers received into the program are to be entered into the Nevada Offender Tracking (NOTIS) system.

(2) When a probationer is released from CGTH, the probationer -is to Return to Committing Authority (RTCA) respectively.

C. Nevada Community Re-entry Program is for NDOC inmates who have been granted parole and are past their parole eligibility dates. Beds designated for this program are located Casa Grande Transitional Center (CGTH) and the inmate(s) imprisonment status is referred to as Parole Housing Unit (PARHU).

(1) Inmates from the Overdue for Parole release list will be reviewed and designated P&P staff member will make the final decision on whether an inmate(s) is appropriate and eligible to be accepted into one of these CGTH PARHU beds.

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(2) Even though on parole, they inmate(s) share space with NDOC inmates and if they elect to participate in the CGTH-in this program, the inmate(s) are required to -abide by the housing rules, in addition to any other condition(s) of his or her parole.

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(3) Any inmate who is released from this program to a P&P approved residence in the community must have their imprisonment status changed from "PARHU" to CGTH, or applicable institution if returned from this program, prior to being put out to a standard "PAR" (Parole) status.

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543.03 CENTER OPERATIONS

1. The Department will notify the referral agency in the event that the individual violates any law, or rule of the Department.

APPLICABILITY

1. This Administrative Regulation requires Operational Procedures within the ~~Offender Management Division and Department~~ transitional centers.

2. This Administrative Regulation requires an annual audit.

REFERENCES: ACA 4TH edition: 4-4295; 4-4442;

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Director,
James Dzurenda

_____ Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
707**

INMATE DISCIPLINARY PROCESS

Supersedes: AR 707 (Temporary, 11/23/09); 02/12/10
Effective Date: 02/13/2017 (Temporary)

AUTHORITY: NRS 209.131; NRS 209.356; NRS 209.361; NRS 209.246

PURPOSE:

The purpose of Administrative Regulation (AR) 707 is to ensure Nevada Department of Corrections has established rules of conduct and sanctions and procedures for addressing violations that are defined in writing and communicated to all inmates and staff.

RESPONSIBILITY:

1. The Director of Corrections is responsible through the respective Deputy Directors for the implementation of the inmate disciplinary process.
2. The Warden is responsible for ensuring compliance with the inmate disciplinary process and the overall management of the inmate disciplinary process at their respective facility through the facility's Operational Procedures.
3. An Associate Warden, under the direction of the Warden is responsible for the compliance of the inmate disciplinary process by their subordinate staff.
4. All staff and inmates are responsible to have knowledge of and comply with the inmate disciplinary regulations and procedures.

707.01 DEPARTMENT POLICY

1. All inmates committed (including safe keepers) to the Department shall be subject to disciplinary action for violations of the Department's rules and regulations.
2. Disciplinary action should be taken as soon after the misconduct as is practical.
3. Discipline shall be applied in an impartial and consistent manner.
4. Corporal punishment or inhumane treatment is prohibited.
5. Disciplinary proceedings are an administrative process, unrelated to and not bound by the rules for criminal procedure, civil trials, administrative codes or procedures.

6. Inmate(s) shall be informed that they can appeal through the grievance procedure any portion of their discipline as it relates to due-process or sanctions imposed as a result of the hearing unless, they agree to bargained plea.
7. Inmate(s) sanctioned to disciplinary segregation shall be advised that they can petition the warden for a release from segregation by utilization of the Inmate Request Form (DOC 301), also referred to as a kite, prior to the completion of imposed sanction as a result of demonstrated good conduct after served one-half of their imposed sanction. Bargained pleases are exempt from early release.
8. Upon commitment to the Department, all inmates shall be issued, and required to sign for a copy of the Inmate Disciplinary Manual and AR 707 Inmate Disciplinary Process.
 - A. Signed acknowledgment will be maintained in the inmate's I-file.
 - B. When a literacy or language problem prevents an inmate from understanding the manual, a staff member or translator will assist the inmate in understanding the rules.
9. The manual will be available to all inmates. Availability is satisfied if a copy is kept in the institutional law library or in the living units for those facilities without a law library.
10. All inmates are assumed to have notice of this manual.
11. The inmate disciplinary process includes the following procedures:
 - A. Only one charge per incident will be assigned to the inmate on the Notice of Charges form NDOC 3017.
 - B. Only the most serious Code violation that can be supported by "some evidence" will be charged on the NDOC 3017. The finding will not be arbitrary or capricious and the finding can be supported by the hearing officer's review of the evidence.
 - C. No additional charges will be added. *Charges will not be stacked.*
 - D. The Preliminary Hearing Officer has the authority to "amend" a charge, as appropriate, but cannot add any additional charges.
 - E. A Hearing Officer may reduce the severity of sanction for a violation, if the inmate pleads guilty to the charge. Inmates cannot appeal a guilty plea.
 - F. A Hearing Officer may reduce the actual sanction for an inmate in a transitional center. This would include, but not limited to tobacco or other violations that do not include new charges of violations of existing statutes.
 - G. The designated Preliminary Hearing Officer shall serve notice within 15-calendar days of the date of discovery of the violation; (or)

- H. Within 15-calendar days of the completion of investigative work concerning the incident;
(or)
- I. In the case of an escapee, within 15-calendar days after the escapee's return to NDOC custody.
- J. If the inmate chooses not to waive the NDOC's disciplinary hearing process, a hearing will be conducted and the inmate's decision not to waive the hearing will be documented on the disciplinary hearing documents, which the inmate will sign.
- K. At least 24 hours prior to any formal hearing before an impartial Disciplinary Hearing Officer, the Notice of Charges shall be served to the inmate. An inmate shall have an opportunity to call witnesses with substantive knowledge of the issues. The witnesses may be present during the hearing at the discretion of the Hearing Officer, and may provide documentary evidence germane to the Notice of Charges.
- L. An inmate shall be provided with a written statement by the Disciplinary Hearing Officer as to the evidence relied on, provided that to do so would not jeopardize institutional safety or security or safety of others.
- M. A finding of guilt will be based on "some" evidence, meaning that after the Hearing Officer weighed the evidence, the infraction was more likely to have occurred than not and there was some evidence to support the finding of guilt.

12. Reliance on any published standard, the use of mandatory language, if such exists, or the creation or procedures related to the conduct of the disciplinary process, including but not limited to timeframes, witnesses or appeals is solely for the purpose of providing guidance for employees and shall be considered representative of the manner in which the Department has chosen to exercise the Department's discretion in such matters.

A. The failure of any employee of the Department to follow any procedure shall not result in any mandatory outcome, e.g., dismissal of charges, but shall be one of many factors to be considered in exercising discretion as to the outcome of any violation. A rehearing may be ordered by the Warden, if warranted.

13. Any disciplinary case may be continued so that the Preliminary Hearing Officer or the Disciplinary Hearing Officer may obtain guidance from the Attorney General's Office concerning any matter in the inmate disciplinary process.

A. Inmate(s) do not have any right or privilege to request or participate in obtaining guidance from the Attorney General's Office.

B. The Department may seek guidance in writing or verbally.

C. The Department's request(s) for guidance shall be made only if there is confusion as to the application of the guidelines set forth in this Code.

D. The Office of the Attorney General shall not be asked to render any opinion as to the guilt or innocence of an inmate facing disciplinary charges.

707.02 DISCIPLINARY OFFENSES (Note: Deleted infractions will not lead to the renumbering of charges.)

1. All offenses listed below in section 707.02.3 through 6, shall also include an attempt or conspiracy to commit that violation.

2. Work Release violations may only be charged if the inmate has minimum or community trustee status.

3. Minor Infractions (All Class E Violations)

- M1- Purchasing, selling, trading, giving, receiving or possessing any item of property, with a value less than \$50, in a manner other than that which is authorized by Administrative Regulation 711.
- M3 - Possession of unauthorized items with a combined value of less than \$25.00.
- M4 – Roughhouse or horseplay.
- M5 - Failure to keep one's person or assigned area neat and clean.
- M6 - Failure to perform work as instructed or a failure to attend work, school or other assignment.
- M7 - Unauthorized use of institutional supplies, tools, equipment or machinery.
- M10 - Failure to produce inmate identification card upon request of correctional employee.

4. General Violations (All Class D Infractions)

- G1 - Disobedience of an order from any correctional employee or anyone who has the authority to supervise inmates in work or other special assignments.
- G2 - Unauthorized contact of any on- or off-duty correctional employee or member of the correctional employee's family; or any unwanted contact with any private citizen, not amounting to harassment or threats.
- G3 - Organizing, participating in, operating any gambling game or betting pool, or possessing any equipment used for gambling or betting purposes.
- G4 - Intentionally destroying, altering or damaging property of another or state property which has a combined replacement value of less than \$50.00.

- G5 - Self mutilation.
- G6 - Fighting or challenging another to fight.
- G7 - Issuing a brass slip with knowledge that it is not covered by sufficient funds.
- G8 - Possession of another inmate's identification card.
- G9 - Abusive language or actions toward another person.
- G10 - Tampering with evidence or influencing a witness involved in any disciplinary process, not amounting to threats.
- G12 - Failure to appear at the proper time and place for count or interfering with the count.
- G13 - Cutting into line.
- G14 - Failure to follow any Department's rules and regulations.
- G15 - Presence in areas identified as off limits to inmates by posted regulations or signs that identify areas that are restricted, not amounting to an attempted escape.
- G18 - Delaying, hindering or interfering with a correctional employee in the performance of their duties.
- G20 - Preparing, soliciting, or giving false or misleading information to or about a staff member and representing the statement as fact.

NOTE:

➤ **Cannot be plea-bargained or sanction bargained.**

- G21 – Possession of gang materials including, but not limited to, jewelry, stationary, emblems and patches.
- G24 - Possession of prescribed medication that is not a controlled substance without the approval of the proper authority.
- G25 - Purchasing, selling, trading, giving, receiving or possessing any item of property, with a combined value equal to or greater than \$50.00, in a manner other than that which is authorized by Administrative Regulation 711.
- G27 Abuse of inmate grievance process.

NOTE:

- This notice of violation may be charged by any Deputy Director.
- Cannot be plea-bargained or sanction bargained.

5. Major Violations

- MJ1 - Arson: Setting a fire with the potential of causing damage or injury to persons or property. (Class A)
- MJ2 - Assault: unlawful attempt coupled with present ability to commit a violent injury on the person of another. (Class A)
- MJ3 - Battery: any willful use of force or violence upon the person of another. (Class A)
- MJ4 Burglary: The entering of a building, structure or vehicle with the intent to commit crime therein. (Class B)
- MJ5 - Embezzlement: The fraudulent conversion of the property of another by one who is already in lawful possession of it. (Class B)
- MJ6 - Escape: The departure or absence from custody of a person who is imprisoned, before he is entitled to his liberty by the process of law. This violation shall be charged in cases of walk-a-ways from assignments of minimum or community custody where no weapons, force or injury to others was involved. (Class B)
- MJ7 - Extortion: The obtaining of property or money from another by wrongful use of actual or threatened force, violence or fear. (Class A)
- MJ8 - False Imprisonment: The unlawful violation of the personal liberty of another, which consists of confinement or detention without sufficient legal authority. (Class A)
- MJ9 - False Pretenses: A false representation of a material present or past fact, which causes the victim to pass title to his property to the wrongdoer who knows his representation to be false and intends thereby to defraud the victim. (Class B)
- MJ10 - Security Threat Group Activities: A validated Security Threat Group member who has engaged or is engaging in criminal activities, threatens the order and security of the institution and/or promotes racism. (Class A).

NOTE:

- Only an Associate Warden or above may charge the inmate with this violation.
- Cannot be plea-bargained or sanction bargained.

- MJ11 - Kidnapping: The unlawful taking, holding and carrying away of a human being by force or against his will. (Class A)
- MJ12 - Larceny: The trespassory taking and carrying away of personal property of another with intent to steal it. (Class C)
- MJ13 - Larceny by Trick: Obtaining possession of another's property by falsehood with the intent to convert it for his own use. (Class C)
- MJ14 - Manslaughter: The unlawful killing of another human being without malice either expressed or implied. It may be either voluntarily, in the heat of passion, or involuntarily. (Class A)
- MJ15 - Mayhem: The infliction of an injury, which disfigures, disables, or dismembers another. (Class A)
- MJ16 - Murder: The unlawful killing of another human being with malice aforethought, either expressed or implied, and all lesser included offenses. (Class A)
- MJ17 - Receiving Stolen Property: One must receive stolen property, know it is stolen, and intend to deprive the owner of it. (Class C)
- MJ18 - Robbery: A larceny where the taking of the property must be from the person of the victim or in his presence and the taking must be by means of violence or intimidation. (Class A)
- MJ19 - Sexual Assault/Sexual Abuse: Subjecting another person to any sexual act or sexual abuse, if the victim does not consent, is coerced into such act by over or implied threats of violence, is unable to consent or refuse; is against their will and/or understanding. Sexual Assault/Sexual Abuse includes any other intentional touching, either directly or through the clothing. (Class A)
- MJ21 - Theft: the taking of property without the owner's consent. (Class C)
- MJ22 - Tampering with any locking device. (Class B)
- MJ23 - Intentionally destroying, altering or damaging the property of another or state property with a combined replacement value equal to or greater than \$50. (Class C)
- MJ24 - Adulteration of any food or drink. (Class A)
- MJ25 - Threats: issuing a threat, either verbally, by gesture or in a written statement to or about any person. (Class B)
- MJ26 - Possession of contraband, including items that present a threat to safety and security of the institutions, excluding drugs or drug paraphernalia. (Class A)

- MJ27 - Rioting or inciting others to riot. (Class A)
- MJ28 - Organizing, encouraging or participating in a work stoppage or other disruptive demonstration or practice. (Class B)
- MJ29 - Charging or collecting a fee or favors for services as a counsel-substitute, legal assistant or "writ writer". (Class C)
- MJ30 - Sexually stimulating activities, including but not limited to caressing, kissing or fondling, clothed or unclothed, between consensual sexual and/or amorous relationships between inmates. (Class A)
- MJ31 - The unauthorized or inappropriate use of telephone, mail, computer, state equipment, or supplies. (Class A)
- MJ32 - Being in an unauthorized area, or hiding on the prison grounds or hiding at a place of assignment or classification. (Class B)
- MJ33 - Bribery: Giving or offering a bribe to any person. (Class B)
- MJ34 - Trading, bartering, lending or otherwise engaging in any personal transactions when such transaction has not been specifically authorized. (Class C)
- MJ35 - Counterfeiting, forging or making an unauthorized reproduction of any document. (Class B)
- MJ39 - Running from a correctional employee when ordered to halt. (Class C)
- MJ40 - Propelling any substance toward any person that strikes them or has the potential to strike them. (Class A)
- MJ41 - Gathering around, blocking, or impeding any correctional employee or visitor, in a threatening or intimidating manner and exhibiting conduct, which causes the person to fear for his safety. (Class A)
- MJ42 - Unauthorized contact, including harassment, of any on-duty or off-duty correctional employee; their family member(s) or private citizen. (Class A)
- MJ44 - Failure to submit to a drug and/or alcohol screening. (Class A)
- MJ46 - The possession or use of a recording device. (Class C)
- MJ47 - Escape: The departure or absence from custody of a person who is imprisoned, before he is entitled to his liberty by the process of law. This violation shall be charged in cases of escape from assignment of medium custody or above, or escapes from any custody where weapons, force, violence, the taking of hostages or injury to others was involved. (Class A)

- MJ48 - Any violation of the Rules of Court, contempt of court, submission of forged or otherwise false documents, submissions of false statements, violations of Rules of Civil Procedure, Criminal Procedure or Appellate Procedure and/or receiving sanctions and/or warnings for any such actions from any court. Although not necessary for disciplinary purposes, any Order from any court detailing such action shall be sufficient evidence for disciplinary purposes. (Class C)
- MJ49 - Possession of any confidential prison regulation. Any prison regulation, which is not specifically delineated as accessible to inmates, is considered confidential. A prison regulation includes, but not limited to, Administrative Regulations, Institutional Procedures, Emergency Response Regulations, and Post Orders. (Class A)
- MJ50 - Sexual Harassment: Conduct that is sexually abusive or offensive to any person and that may include, but is not limited to, unwelcome sexual advances, requests for sexual favors, or verbal comments, suggestive language, gesture, or actions of a derogatory or offense sexual nature by one inmate directed to another, or as an aside; unwanted or inappropriate touching; exposing one's self; performing a sex act with knowledge that it will be observed by another; displaying sexually provocative or explicit materials/drawings. (Class A)
- MJ51 - Compromising Staff, Volunteer or Vendor: Conduct that includes, but is not limited to, bribery, extortion, sexual conduct, or any other behavior designed to violate the safety and security of an institution and/or obtain favorable treatment. (Class A)
- MJ52 - Refusal to complete or participate in a mandatory, structured program. (Class C)
- MJ53 - Possession, introduction, or sales of any narcotics, drugs, alcohol, or other intoxicants or possession of materials/items suitable for such manufacture and/or use. (Class A)
- MJ54 – Possession and/or use of any narcotics, drugs, alcohol, or other intoxicants. (Class B)
- MJ55 – Possession, introduction, or sales of any tobacco product; or possession of materials/items suitable for such manufacture and/or use. (Class B)
- MJ56 - Tattooing: tattooing and/or body piercing oneself or another; or possession of tattooing and/or body piercing equipment. (Class C)
- MJ57 – Failure or refusing to cell as assigned. (Class C)
- MJ58 – False Reporting: Charge should be applicable for inmates who file false reports against staff and/or other inmates (Class A). Reporting a felony, misdemeanor or violation of any Department regulation has been committed, to include but not limited to the knowledge that the information reported, conveyed or circulated is false, circulating a false report or warning of an alleged occurrence or impending occurrence knowing that

the false report is likely to cause the agency to conduct unwarranted criminal or internal investigation. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

6. Work Release Violations (All Class C)

- W1 - Failure to comply with travel arrangements outside the facility.
- W2 - Failure to report to the work assignment contacts in the community as specified and agreed upon in the release plan.
- W3 - Failure to remain in the particular area designated in the release plan.
- W4 - Operation of a motor vehicle, unless such operation is a condition of the job and the prior Department authorization was approved.
- W7 - Failure to return to the facility on or before the time specified in the schedule of the release plan. This includes leaving or hiding from supervision or custody.
- W8 - Failure to report an incident that delays the inmate's return to the facility.
- W9 - Failure to complete or participate in a structured program.
- W10 - Performing work for private persons that are not authorized by the Department.
- W11 - Any violation or attempt to violate rules or conditions of the work program contract.
- W13 - Possession of coin, currency, checks, money orders or other negotiable instruments in excess of the amount authorized by regulation.

707.03 INMATE TRANSFERS

1. When conduct requires an inmate be transferred from one institution or facility to another, any pending disciplinary cases should be completed prior to the transfer. All inmate transfers must be handled by approved regulatory procedures through the Office of Offender Management.

A. If circumstances are such that the transfer must proceed prior to completion of the disciplinary process, the sending institution shall prepare the Notice of Charges and the receiving institution shall complete the disciplinary process.

B. The receiving institution will review the inmate's status within three (3) working days of receipt.

C. Copies of the completed disciplinary will be returned to the sending institution.

2. The Associate Warden/designee at the sending institution or facility is responsible for insuring that the pending case is properly transferred within seven (7) to 14 days from the date of transfer.

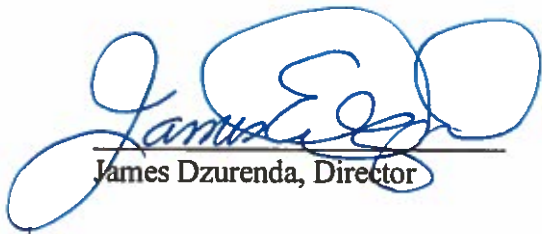
APPLICABILITY

1. This regulation requires an operational procedure for the Department and all institutions and facilities.

2. The regulation requires an annual audit.

REFERENCES

ACA Standards: 4-4226- 31, 4-4238-48, 4-4236, 4-4236, 4-4248, 4-4281



James Dzurenda, Director

2/13/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
707**

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INMATE DISCIPLINARY PROCESS

Supersedes: AR 707 (Temporary, 11/23/09); [02/12/10](#)
Effective Date: ~~02/12/10~~ [02/13/2017 \(Temporary\)](#)

AUTHORITY: [NRS 209.131](#); [NRS 209.356](#); [NRS 209.361](#); NRS 209.246

PURPOSE:

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The purpose of Administrative Regulation (AR) 707 is to ensure Nevada Department of Corrections has established rules of conduct and sanctions and procedures for addressing violations that are defined in writing and communicated to all inmates and staff.

RESPONSIBILITY:

1. The Director of Corrections is responsible through the respective Deputy Directors for the implementation of the inmate disciplinary process.

2. The Warden is responsible for ensuring compliance with the inmate disciplinary process and the overall management of the inmate disciplinary process at their respective facility through the facility's Operational Procedures.

~~3.~~ An Associate Warden, under the direction of the Warden is responsible for the compliance management of the inmate disciplinary process by their subordinate staff.

~~4.~~ All staff and inmates are responsible to have knowledge of and to comply with this the inmate disciplinary regulations and procedures.

707.01 DEPARTMENT POLICY

1. All inmates committed (including safe keepers) to the Department shall be subject to disciplinary action for violations of the Department's rules and regulations.

2. Disciplinary action should be taken as soon after the misconduct as is practicable.

3. Discipline ~~shall~~ be applied in an impartial and consistent manner.

4. Corporal punishment or inhumane treatment is prohibited.

5. ~~Prison~~ Disciplinary proceedings are an administrative process, unrelated to and not bound by the rules for criminal procedure, civil trials, administrative codes or procedures.

6. Inmate(s) shall be informed that they can appeal through the grievance procedure any portion of their discipline as it relates to due-process or sanctions imposed as a result of the hearing unless, they agree to bargained plea.

7. Inmate(s) sanctioned to disciplinary segregation shall be advised that they can petition the warden for a release from segregation by utilization of the Inmate Request Form (DOC 301), also referred to as a kite, prior to the completion of imposed sanction as a result of demonstrated good conduct after served one-half of their imposed sanction. Bargained pleas are exempt from early release.

86. Upon commitment to the Department, all inmates shall be issued, and required to sign for, a copy of the Inmate ~~Disciplinary~~ Manual and AR 707 Inmate Disciplinary Process.

A. Signed acknowledgment will be maintained in the inmate's I-file.

B. When a literacy or language problem prevents an inmate from understanding the manual, a staff member or translator will assist the inmate in understanding the rules.

97. The manual will be available to all inmates. Availability is satisfied if a copy is kept in the institutional law library or in the living units for those facilities without a law library.

108. All inmates are assumed to have notice of this manual.

119. The inmate ~~Within the prison~~ disciplinary process, includes the following an inmate has access to these procedures:

A. A. —Only one charge per incident will be assigned to the inmate on the Notice of Charges form NDOC 3017.

B. Only the most serious Code violation that can be supported by "some evidence" will be charged on the NDOC 3017. The finding will not be arbitrary or capricious and the finding can be supported by the hearing officer's review of the evidence.

C. No additional charges will be added. *Charges will not be stacked.*

D. The Preliminary Hearing Officer has the authority to "amend" a charge, as appropriate, but cannot add any additional charges.

E. A Hearing Officer may reduce the severity of sanction for a violation, if the inmate pleads guilty to the charge. Inmates cannot appeal a guilty plea.

F. A Hearing Officer may reduce the actual sanction for an inmate in a transitional center. This would include, but not limited to tobacco or other violations that do not include new charges of violations of existing statutes.

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G. The designated Preliminary Hearing Officer shall serve notice within 15-calendar days of the date of discovery of the violation; (or);

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H. Within 15-calendar days of the completion of investigative work concerning the incident; (or)

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I. In the case of an escapee, within 15-calendar days after the escapee's return to NDOC custody.

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~~If the inmate is being criminally charged the inmate may choose to waive the NDOC's disciplinary hearing process until the criminal case is adjudicated. However, if the inmate's behavior poses a threat to the safety and security of others or the orderly operation of the facility, the inmate may be placed in administrative segregation pending the adjudication of the criminal case and the disciplinary hearing.~~

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J. If the inmate chooses not to waive the NDOC's disciplinary hearing process, a hearing will be conducted and the inmate's decision not to waive the hearing will be documented on the disciplinary hearing documents, which the inmate will sign.

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K. At least 24 hours prior to any formal hearing before an impartial Disciplinary Hearing Officer, the a Notice of Charges shall will be served to the inmate. An inmate shall have an opportunity to call witnesses with substantive knowledge of the issues. The witnesses may be present during the hearing at the discretion of the Hearing Officer, and may provide documentary evidence germane to the Notice of Charges.

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~~L.B. An inmate qualified opportunity to call witnesses with substantive knowledge of issues and present documentary evidence provided that to do so will not jeopardize institutional security, the safety of others, or correctional goals.~~

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~~L.M.C. An inmate shall have be provided with a written statement by the Disciplinary Hearing Officer as to the evidence relied on, provided that to do so would not jeopardize institutional safety or security or safety of others, and the reasons for the disciplinary findings.~~

M. A finding of guilt will be based on a "somepreponderance" of evidence, meaning that after the Hearing Officer weighed the evidence, the infraction was more likely to have occurred than not and there was some evidence to support the finding of guilt.

129. Reliance on any published standard, the use of mandatory language, if such exists, or the creation or procedures related to the conduct of the disciplinary process, including but not limited to timeframes, witnesses or appeals is solely for the purpose of providing guidance for employees and shall be considered representative of the manner in which the Department has chosen to exercise the Department's it's discretion in such matters.

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A. The failure of any employee of the Department to follow any procedure shall not result in any mandatory outcome, e.g., dismissal of charges, but shall be one of many factors to be considered in exercising discretion as to the outcome of any violation. A rehearing may be ordered by the Warden, if warranted.

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~~1344~~. Any disciplinary case may be continued so that the Preliminary Hearing Officer or the Disciplinary Hearing Officer may obtain guidance from the Attorney General's Office concerning any matter in the inmate disciplinary process.

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A. Inmate(s) do not have any right or privilege to request or participate in obtaining guidance from the Attorney General's Office.

B. The Department may seek guidance ~~may be sought either~~ in writing or verbally.

C. The Department's ~~Such~~ request(s) for guidance shall be made only if there is confusion as to the application of the guidelines set forth in this Code.

D. The Office of the Attorney General shall not be asked to render any opinion as to the guilt or innocence of an inmate facing disciplinary charges.

707.02 DISCIPLINARY OFFENSES (Note

NOTE: Deleted ~~or additional~~ infractions will not lead to the renumbering of charges.)

1. All offenses listed below in section 707.02.3 through 6, ~~shall will~~ also include an attempt or conspiracy to commit that violation.

2. Work Release violations may only be charged if the inmate has minimum or community trustee status.

3. Minor Infractions (All Class E Violations)

- M1- Purchasing, selling, trading, giving, receiving or possessing any item of property, with a value less than \$50, in a manner other than that which is authorized by Administrative Regulation 711.
- M3 - Possession of unauthorized items with a combined value of less than \$25.00.
- M4 ~~--~~ Roughhouse or horseplay ~~or "gunsling"~~.
- M5 - Failure to keep one's person or assigned area neat and clean.
- M6 - Failure to perform work as instructed or a failure to attend work, school or other assignment.

- M7 - Unauthorized use of institutional supplies, tools, equipment or machinery.
- M10 - Failure to produce inmate identification card upon request of correctional employee.

4. General Violations (All Class D Infractions)

- G1 - Disobedience of an order from any correctional employee or anyone who has the authority to supervise inmates in work or other special assignments.
- G2 - Unauthorized contact of any on- or off-duty correctional employee or member of the correctional employee's family; or any unwanted contact with any private citizen, not amounting to harassment or threats.
- G3 - Organizing, participating in, operating any gambling game or betting pool, or possessing any equipment used for gambling or betting purposes.
- G4 - Intentionally destroying, altering or damaging property of another or state property which has a [combined](#) replacement value [of](#) less than \$50.00.
- G5 - Self mutilation.
- G6 - Fighting or challenging another to fight.
- G7 - Issuing a brass slip with knowledge that it is not covered by sufficient funds.
- G8 - Possession of another inmate's identification card.
- G9 - Abusive language or actions toward another person.
- G10 - Tampering with evidence or influencing a witness involved in any disciplinary process, not amounting to threats.
- G12 - Failure to appear at the proper time and place for count or interfering with the count.
- G13 - Cutting into line.
- G14 - Failure to follow [any Department's](#) rules and regulations.
- G15 - Presence in areas identified as off limits to inmates by posted regulations or signs that identify areas that are restricted, not amounting to an attempted escape.
- G18 - Delaying, hindering or interfering with a correctional employee in the performance of [their](#) duties.

- G20 - Preparing, soliciting, or giving false or misleading information to or about a staff member and representing the statement as fact.

NOTE:

➤ **Cannot be plea-bargained or sanction bargained.**

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- G21 – Possession of gang materials including, but not limited to, jewelry, stationary, emblems and patches.
- G24 - Possession of prescribed medication that is not a controlled substance without the approval of the proper authority.
- G25 - Purchasing, selling, trading, giving, receiving or possessing any item of property, with a combined value equal to or greater than \$50.00, in a manner other than that which is authorized by Administrative Regulation 711.
- G27 Abuse of inmate grievance process.

NOTE:

➤ This notice of violation may be charged by any Deputy Director. the DDO.

➤ Cannot be plea-bargained or sanction bargained.

5. Major Violations

- MJ1 - Arson: Setting a fire with the potential of causing damage or injury to persons or property. (Class A)
- MJ2 - Assault: unlawful attempt coupled with present ability to commit a violent injury on the person of another. (Class A)
- MJ3 - Battery: any willful use of force or violence upon the person of another. (Class A)
- MJ4 Burglary: The entering of a building, structure or vehicle with the intent to commit crime therein. (Class B)
- MJ5 - Embezzlement: The fraudulent conversion of the property of another by one who is already in lawful possession of it. (Class B)
- MJ6 - Escape: The departure or absence from custody of a person who is imprisoned, before he is entitled to his liberty by the process of law. This violation shall be charged in cases of walk-a-ways from assignments of minimum or community custody where no weapons, force or injury to others was involved. (Class B)

- MJ7 - Extortion: The obtaining of property or money from another by wrongful use of actual or threatened force, violence or fear. (Class A)
- MJ8 - False Imprisonment: The unlawful violation of the personal liberty of another, which consists of confinement or detention without sufficient legal authority. (Class A)
- MJ9 - False Pretenses: A false representation of a material present or past fact, which causes the victim to pass title to his property to the wrongdoer who knows his representation to be false and intends thereby to defraud the victim. (Class B)
- MJ10 - Security Threat Group Activities: A validated Security Threat Group member who has engaged or is engaging in criminal activities, threatens the order and security of the institution and/or promotes racism. (Class A).

NOTE:

- Only an [Associate Warden](#) or above may charge the inmate with this violation.
- Cannot be plea-bargained or sanction bargained.

- MJ11 - Kidnapping: The unlawful taking, [holding](#) and carrying away of a human being by force or against his will. (Class A)
- MJ12 - Larceny: The trespassory taking and carrying away of personal property of another with intent to steal it. (Class C)
- MJ13 - Larceny by Trick: Obtaining possession of another's property by falsehood with the intent to convert it for his own use. (Class C)
- MJ14 - Manslaughter: The unlawful killing of another human being without malice either expressed or implied. It may be either voluntarily, in the heat of passion, or involuntarily. (Class A)
- MJ15 - Mayhem: The infliction of an injury, which disfigures, disables, or dismembers another. (Class A)
- MJ16 - Murder: The unlawful killing of another human being with malice aforethought, either expressed or implied, and all lesser included offenses. (Class A)
- MJ17 - Receiving Stolen Property: One must receive stolen property, know it is stolen, and intend to deprive the owner of it. (Class C)
- MJ18 - Robbery: A larceny where the taking of the property must be from the person of the victim or in his presence and the taking must be by means of violence or intimidation. (Class A)

- MJ19 - Sexual Assault/Sexual Abuse: Subjecting another person to any sexual act or sexual abuse, if the victim does not consent, is coerced into such act by over or implied threats of violence, is unable to consent or refuse; is against their will and/or understanding. Sexual Assault/Sexual Abuse includes any other intentional touching, either directly or through the clothing. (Class A)
- MJ21 - Theft: the taking of property without the owner's consent. (Class C)
- MJ22 - Tampering with any locking device. (Class B)
- MJ23 - Intentionally destroying, altering or damaging the property of another or state property with a combined replacement value equal to or greater than \$50. (Class C)
- MJ24 - Adulteration of any food or drink. (Class A)
- MJ25 - Threats: issuing a threat, either verbally, by gesture or in a written statement to or about any person. (Class B)
- MJ26 - Possession of contraband, including items that present a threat to safety and security of the institutions, excluding drugs or drug paraphernalia. (Class A)
- MJ27 - Rioting or inciting others to riot. (Class A)
- MJ28 - Organizing, encouraging or participating in a work stoppage or other disruptive demonstration or practice. (Class B)
- MJ29 - Charging or collecting a fee or favors for services as a counsel-substitute, legal assistant or "writ writer". (Class C)
- MJ30 - Sexually stimulating activities, including but not limited to caressing, kissing or fondling, clothed or unclothed, between consensual sexual and/or amorous relationships between inmates. ~~except as authorized by Departmental visitation regulations.~~ (Class A)
- MJ31 - The unauthorized or inappropriate use of telephone, mail, computer, state equipment, or supplies. (Class A)
- MJ32 - Being in an unauthorized area, or hiding on the prison grounds or hiding at a place of assignment or classification. (Class B)
- MJ33 - Bribery: Giving or offering a bribe to any person. (Class B)
- MJ34 - Trading, bartering, lending or otherwise engaging in any personal transactions when such transaction has not been specifically authorized. (Class C)
- MJ35 - Counterfeiting, forging or making an unauthorized reproduction of any document. (Class B)

- MJ39 - Running from a correctional employee when ordered to halt. (Class C)
- MJ40 - Propelling any substance toward any person that strikes them or has the potential to strike them. (Class A)
- MJ41 - Gathering around, blocking, or impeding any correctional employee or visitor, in a threatening or intimidating manner and exhibiting conduct, which causes the person to fear for his safety. (Class A)
- MJ42 - Unauthorized contact, including harassment, of any on-duty or off-duty correctional employee; their family member(s) or ~~other~~ private citizen. (Class A)
- MJ44 - Failure to submit to a drug and/or alcohol screening. (Class A)
- MJ46 - The possession or use of a ~~tape~~-recording device. (Class C)
- MJ47 - Escape: The departure or absence from custody of a person who is imprisoned, before he is entitled to his liberty by the process of law. This violation shall be charged in cases of escape from assignment of medium custody or above, or escapes from any custody where weapons, force, violence, the taking of hostages or injury to others was involved. (Class A)
- MJ48 - Any violation of the Rules of Court, contempt of court, submission of forged or otherwise false documents, submissions of false statements, violations of Rules of Civil Procedure, Criminal Procedure or Appellate Procedure and/or receiving sanctions and/or warnings for any such actions from any court. Although not necessary for disciplinary purposes, any Order from any court detailing such action shall be sufficient evidence for disciplinary purposes. (Class C)
- MJ49 - Possession of any confidential prison regulation. Any prison regulation, which is not specifically delineated as accessible to inmates, is considered confidential. A prison regulation includes, but not limited to, Administrative Regulations, Institutional Procedures, Emergency Response Regulations, and Post Orders. (Class A)
- MJ50 - Sexual Harassment: Conduct that is sexually abusive or offensive to any person and that may include, but is not limited to, unwelcome sexual advances, requests for sexual favors, or verbal comments, suggestive language, gesture, or actions of a derogatory or offense sexual nature by one inmate directed to another, or as an aside; unwanted or inappropriate touching; exposing one's self; performing a sex act with knowledge that it will be observed by another; displaying sexually provocative or explicit materials/drawings. (Class A)
- MJ51 - Compromising Staff, Volunteer or Vendor: Conduct that includes, but is not limited to, bribery, extortion, sexual conduct, or any other behavior designed to violate the safety and security of an institution and/or obtain favorable treatment. (Class A)
- MJ52 - Refusal to complete or participate in a mandatory, structured program. (Class C)

- MJ53 - Possession, introduction, or sales of any narcotics, drugs, alcohol, or other intoxicants or possession of materials/items suitable for such manufacture and/or use. (Class A)
- MJ54 – Possession and/or Use of any narcotics, drugs, alcohol, or other intoxicants. (Class B)
- MJ55 – Possession, introduction, or sales of any tobacco product; or possession of materials/items suitable for such manufacture and/or use. (Class BA)
- MJ56 - Tattooing: tattooing and/or body piercing oneself or another; or possession of tattooing and/or body piercing equipment. (Class C)
- MJ57 – Failure or refusing to cell as assigned. (Class C)
- MJ58 – False Reporting: Charge should be applicable for inmates who file false reports against staff and/or other inmates (Class A). Reporting a felony, misdemeanor or violation of any Department regulation has been committed, to include but not limited to the knowledge that the information reported, conveyed or circulated is false, circulating a false report or warning of an alleged occurrence or impending occurrence knowing that the false report is likely to cause the agency to conduct unwarranted criminal or internal investigation. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

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6. Work Release Violations (All Class C)

- W1 - Failure to comply with travel arrangements outside the facility.
- W2 - Failure to report to the work assignment contacts in the community as specified and agreed upon in the release plan.
- W3 - Failure to remain in the particular area designated in the release plan.
- W4 - Operation of a motor vehicle, unless such operation is a condition of the job and the prior Department ~~prior~~ authorization was approved.
- W7 - Failure to return to the facility on or before the time specified in the schedule of the release plan. This includes leaving or hiding from supervision or custody.
- W8 - Failure to report an incident that delays the inmate's return to the facility.
- W9 - Failure to complete or participate in a structured program.
- W10 - Performing work for private persons that are not authorized by the Department.

- W11 - Any violation or attempt to violate rules or conditions of the work program contract.
- W13 - Possession of coin, currency, checks, money orders or other negotiable instruments in excess of the amount authorized by regulation.

707.03 INMATE TRANSFERS

1. When conduct requires an inmate be transferred from one institution or facility to another, any pending disciplinary cases should be completed prior to the transfer. All inmate transfers must be handled by approved regulatory procedures through the Office of Offender Management.

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A. If circumstances are such that the transfer must proceed prior to completion of the disciplinary process, the sending institution shall prepare the Notice of Charges and the receiving institution shall complete the disciplinary process.

B. The receiving institution will review the inmate's status within three (3) working days of receipt.

C. Copies of the completed disciplinary will be returned to the sending institution.

2. The Associate Warden (~~AW~~)/designee at the sending institution or facility is responsible for insuring that the pending case is properly transferred within seven (7) to 14 ~~30~~ days from the date of transfer.

APPLICABILITY

1. This regulation requires an operational procedure for the Department and all- institutions/ and facilities.

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2. The regulation requires an annual audit.

REFERENCES

ACA -Standards: 4th Edition, and 2008 Supplement
~~4-4226 4-4229-31, 4-42438-486, 4-4231 4-423644, 4-4228 4-4353 4-4230 4-4234~~
~~4-4239 4-4236, 4-4237 4-4245 4-4238 4-4242 4-4240 4-4248,~~
~~4-4243 4-4235 4-4233 4-4226 4-4227 4-4281, 4-4477 4-4281~~

Howard Skolnik James Dzurenda, Director

Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
740**

INMATE GRIEVANCE PROCEDURE

Supersedes: AR 740 (02/12/10); and AR 740 (Temporary, 06/16/14); 09/16/14
Effective Date: 01/03/2017, Temporary

AUTHORITY: NRS 209.131, 42 U.S.C. § 15601, *et seq.* and 28 C.F.R. Part 115

PURPOSE:

1. The purpose of this Administrative Regulation ("AR") is to clearly set forth the requirements and procedures of the administrative process that Nevada Department of Corrections ("NDOC") inmates must utilize to resolve addressable grievances and claims, including but not limited to, claims for personal property, property damage, disciplinary appeals, personal injuries, and any other tort or civil rights claim relating to conditions of confinement. Inmates may use the Inmate Grievance Procedure to resolve addressable inmate claims only if the inmate can factually demonstrate a loss or harm. This procedure describes the formal grievance processes and will guide NDOC employees in the administration, investigation, response and resolution of inmate grievances.

2. The provisions of this AR shall be effective on or after the effective date of this AR. The provisions of this AR are not retroactive and do not apply to incidents and/or claims that occurred prior to the effective date of this AR.

A. Only inmate claims arising out of, or relating to, issues within the authority and control of the NDOC may be submitted for review and resolution by way of the grievance process.

B. A good faith effort will be made to resolve legitimate inmate claims without requiring the inmate to file a formal grievance.

3. This AR does not create any right, liberty or property interest, or establish the basis for any cause of action against the State of Nevada, its political subdivisions, agencies, boards, commissions, departments, officers or employees.

RESPONSIBILITY

1. The Director, through the Deputy Directors (DDs), shall be responsible in establishing and supervising an inmate grievance process that provides an appropriate response to an inmate's claim, as well as an administrative means for the expression of, and prompt and fair resolution of, inmate problems and concerns.

2. The Warden through the Associate Wardens (AWs) shall be responsible in managing the grievance process at each institution and any facilities under the control of the parent institution. The AW may designate an Inmate Grievance Coordinator to conduct functions required by this regulation.

3. The Offender Management Administrator (OMA) shall be responsible for supervision of the Offender Issue Tracking System (OITS) in the Nevada Offender Tracking Information System (NOTIS), the program and the computer system which manages the inmate grievances.

740.01 ADMINISTRATION OF INMATE GRIEVANCES

1. Each institution/facility shall establish locked boxes where all inmates have access to submit their grievances directly to the box. Keys will be issued by the Warden, to an AW and/or a designated staff. .

A. Lock boxes will be maintained in segregation/max units in a manner in which the inmate will be allowed to have direct access. A designated staff may go cell to cell to pick up grievances in segregation /max units due to security and safety concerns, if necessary.

B. Emergency grievances will be handed to any staff member for immediate processing per this regulation.

2. Grievances will be treated as legal correspondence and will be gathered daily, Monday through Friday, excluding holidays, by the AW or designated Grievance Coordinator(s) and or designated staff member.

3. Grievance forms will be kept in housing units and may be accessed through the unit staff, the unit caseworker or in the Institutional Law Library. Emergency forms may be accessed through any employee.

4. Grievances may be GRANTED, DENIED or PARTIALLY GRANTED at any level as deemed appropriate after the claim in the grievance has been investigated.

A. Grievance findings or responses will not be titled "Substantiated."

5. The Grievance Coordinator should record receipts, transmittals, actions, and responses on all grievances to OITS/NOTIS within three (3) working days of receipt.

A. The coordinator should sign, date and enter the approximate time as noted on DOC 3091, 3093 and 3094.

B. The front page of the grievance should be date stamped the day entered into OITS/NOTIS.

6. Monthly and annual grievance reports generated by OITS/NOTIS will be reviewed by the Deputy Directors (DDs), Wardens and Associate Wardens (AWs) on a quarterly and annual basis.

740.02 GRIEVANCE RECORDS

1. Grievance documents shall be stored at the facility/institution where the grievance issue occurred.
 - A. Grievance files shall be in separate files for each inmate and maintained in alphabetical order by the inmate's last name.
 - B. Grievance copies shall not be placed in an inmate's Institutional or Central File, nor shall they be available to employees not involved in the grievance process.
2. Grievance files shall be maintained at each institution for a minimum of five (5) years following final disposition of the grievance.
3. Employees who are participating in the disposition of a grievance shall have access to records essential to the disposition of the grievance.
4. Inmates will not have access to grievance records unless ordered by a court, as grievance records are considered confidential and they may be redacted if appropriate.
5. Upon completion of each level of the grievance process, the form and all relevant attachments shall be maintained in the inmate's separate grievance file. Copies shall be given to the inmate.

740.03 GRIEVANCE ISSUES

1. Inmates may use the Inmate Grievance Procedure to resolve addressable inmate claims, only if the inmate can factually demonstrate a loss or harm. Grievances may be filed to include, but not limited to, personal property, property damage, disciplinary appeals, personal injuries, and any other tort claim or civil rights claim relating to conditions of institutional life. The inmate must state the action or remedy that will satisfy the claim in the grievance.
 - a) If the inmate does not factually demonstrate a loss or harm and does not state the action or remedy that will satisfy the claim in the grievance, the grievance will be "REJECTED" and return to the inmate with an explanation as to what was missing in order for the grievance to be processed.
 - b) A Grievance will not be used as a "KITE" to advise staff of issues, actions or conditions that they do not like but suffered no harm or loss.
2. All allegations of inmate abuse by Department staff, employees, agents or independent contractors, shall be immediately reported to the Warden, AWs, and the Inspector General's Office, in accordance with investigator guidelines via the NOTIS reporting system.
 - A. Any third party reporting of sexual abuse against an inmate will be referred to the Warden or designee for entry into the NOTIS reporting system and referral to the Office of the Inspector General.

B. Inmates who allege abuse other than sexual abuse will be interviewed by a supervisor of the staff who allegedly committed the abuse to ascertain if he/she agrees to pursue administrative remedies, which will be documented in the NOTIS system.

C. Any portion of a grievance that does not indicate an allegation of sexual abuse will have to meet the criteria listed in this section of the AR.

3. Only inmate claims arising out of, or relating to, issues within the authority and control of the Department may be submitted for review and resolution.

A. Non-grievable issues include:

1. State and federal court decisions.

2. State, federal and local laws and regulations.

3. Parole Board actions and/or decisions.

4. Medical diagnosis, medication or treatment/care provided by a private/contract community hospital.

4. Claims for which the inmate lacks standing will not be accepted, included, but not limited to:

A. Filing a grievance on behalf of another inmate unless the inmate is so physically or emotionally handicapped as to be incapable of filing a grievance, and with the other inmate's approval, or in the case(s) of any third party reporting of Sexual Abuse.

B. The inmate filing the grievance was not a direct participant in the matter being grieved, except a third party allegation of sexual abuse.

C. An inmate may not file more than one (1) grievance per seven (7) day week, Monday through Sunday. More than one (1) grievance filed during the seven day week period will be rejected, unless it alleges sexual abuse or it is an emergency grievance that involves health or safety claims. If the practice of filing excessive grievances continues, the inmate will be documented for abuse of the grievance system.

D. The inclusion of more than one grievance, per form will be cause for rejection of the grievance.

E. Grievances that grieve the same issue in a previously filed grievance will be screened out as a duplicate issue, which is already being considered or has been considered and responded to.

F. Grievances that grieve the same issue in a previously filed grievance will also be screened out, even if the requested action or remedy is different on the subsequent grievance.

5. In the event an inmate's claim is deemed inappropriate for review or not within the intended scope of this Regulation, the inmate may not appeal that decision to the next procedural level of review unless the inmate can produce evidence the issue in the grievance is within the scope of this AR or that the NDOC has the authority to grant the remedy or action being requested.

6. An inmate who is dissatisfied with the response to a grievance at any level may appeal the grievance to the next level, within the substantive and procedural requirements outlined herein, unless the action requested has already been Granted or Partially Granted at a lower level.

A. Administrators or employees of the institution shall automatically allow appeals without interference unless the grievance is granted or partially granted as stated in Section C of this AR or the grievance has multiple issues/claims or does not request a remedy that is within the authority of the NDOC.

B. An inmate's election not to sign and date this form at any level shall constitute abandonment of the claim.

C. If the Grievance is "**Granted**" at any level, the grievance process is considered complete and the inmate's administrative remedies exhausted, and the inmate cannot appeal the decision to a higher level. If the inmate files a grievance to a higher level after it has been granted at a lower level, the grievance will be screen out and the notation in the rejection form will state that the grievance has already been granted.

7. Except as required for the initial filing of an Informal Grievance, time limits shall begin to run from the date an inmate receives a response for appeal and the date the Department's respondent receives the appeal.

A. Time frames are waived for allegations of sexual abuse, regardless of when the incident is alleged to have occurred.

8. An overdue grievance response at any level is not an automatic finding for the inmate.

A. The response must be completed, even if it is overdue.

B. The inmate may proceed to the next grievance level, except at the Second Level, if a response is overdue.

C. The overdue response does not count against the inmate's timeframe for an appeal if he waits for the response before initiating the appeal.

9. Inmates who participate in or utilize the Inmate Grievance Procedure shall not be subjected to retaliation, i.e. an assertion that an employee took some adverse action against an inmate for filing a grievance, except as noted in 740.09.

A. Retaliation is a grievable issue.

- B. An unfounded claim of retaliation will be handled as an abuse of the grievance procedure.
 - C. The action did not reasonably advance a legitimate correctional goal.
10. Comprehensive responses are required for inmate grievances. Statements such as "Your grievance is denied" are not acceptable. An explanation is necessary.

740.04 INFORMAL GRIEVANCE

1. Inmates are expected to resolve grievable issues through discussion with staff whose duties fall within the issue in the grievance prior to initiating the grievance process, except as noted in AR 740.03, number 2, or where resolution is not possible, such as disciplinary appeals. Inmates are encouraged to use a kite to bring issues to the attention of staff instead of immediately filling a grievance.
- A. Allegations of sexual abuse will not be referred to a staff member who is the subject of the accusation of sexual abuse.
 - B. Inmates are not required to use an informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.
2. An informal resolution may be accomplished in writing or in direct consultation with the appropriate staff.

740.05 INFORMAL GRIEVANCE

1. At the Informal Level, an inmate shall file a grievance (Form DOC-3091) after failing to resolve the matter by other means such as discussion with staff or submitting a kite.
2. Grievances should be reviewed, investigated and responded to by the staff member that has responsibility over the issue that is being grieved. For example; a medical issue will be submitted to the medical department. Food issues will be submitted to the culinary department. Other examples include but not limited to:
- A. Informal grievances addressing property issues should be responded to by the Property Sergeant or equivalent.
 - B. All allegations of sexual abuse will be referred to the Inspector General's Office for investigation via the First Level Grievance (DOC 3093). When an issue goes directly to the first level, the inmate shall file an Informal Grievance form for tracking purposes only.
 - (1) The Grievance Coordinator will forward a copy of the grievance to the Inspector General's Office immediately upon receipt.
 - (2) If the Grievance is forwarded to the Inspector General's Office, the grievance will be listed as "Partially Granted." A partial granting of a grievance is not to be interpreted as to

denote that the request for investigation is granted, but rather the claims are being referred to the Inspector General's Office for investigation. The "Partial Grant" is not meant to imply that the action or remedy requested is being granted such as a request that an employee be disciplined. Even if the claims against a staff member are sustained, the inmate is not privy to personnel action taken against a staff member.

- C. The Inspector General's Office will have 90-days to respond to this allegation.
 - D. High Risk Prisoner (HRP) status.
 - (1) First Level by the Deputy Director.
 - (2) Informal grievances that will be responded to by the Warden or designee.
 - (3) Second level by the Director or Designee.
 - E. Informal grievances addressing medical/mental health/dental issues should be responded to by health care supervisor such as the Director of Nursing at the institution.
 - F. If the person who would normally respond to a grievance is the subject of the grievance, the Correctional Caseworker (CCS III/AW) should respond to the Informal Grievance.
3. The response to the grievance should be substantial, referencing all policies, procedures, rationale, and/or circumstances in finding for or against the inmate.
4. The inmate shall file an informal grievance within the time frames noted below:
- A. Within one (1) month if the issue involves personal property damage or loss, personal injury, medical claims or any other tort claims, including civil rights claims.
 - B. Within ten (10) days if the issue involves any other issues within the authority and control of the Department including, but not limited to, classification, disciplinary, mail and correspondence, religious items, and food.
 - C. When a grievance cannot be filed because of circumstances beyond the inmate's control, the time will begin to start from the date in which such circumstances cease to exist.
 - D. Time frames are waived for allegations of sexual abuse regardless of when the incident is alleged to have occurred.
5. An inmate should use Form DOC-3097, Grievant Statement Continuation Form, if unable to present the details of their claim in the space available on the above forms.
- A. All documentation and factual allegations available to the inmate must be submitted at this level with the grievance.

6. All grievances submitted should also include the remedy sought by the inmate to resolve this claim.

A. Failure to submit a remedy will be considered an improper grievance and returned to the inmate using Form DOC-3098, Improper Grievance Memorandum, except any grievance or portion of a grievance that alleges sexual abuse.

7. If the inmate's remedy to their grievance includes monetary restitution or damages, then the inmate will get the following forms from unit staff, unit caseworker, or law libraries:

A. Form DOC-3026, Inmate Property Claim, which shall be completed and submitted in addition to the grievance for all property loss or damage claims.

B. Form DOC-3095, Administrative Claim Form, which shall be completed and submitted in addition to the grievance for all personal injury, tort, or civil rights claims.

8. Failure by the inmate to submit a proper Informal Grievance form to the Grievance Coordinator or designated employee in their absence, within the time frame noted in 740.05, number 4, shall constitute abandonment of the inmate's grievance at this, and all subsequent levels, except any portion of the grievance that alleges sexual abuse.

A. When overdue grievances are received, they will be logged into the OITS/NOTIS.

B. The grievance response Form DOC-3098 will note that the inmate exceeded the timeframe and no action will be taken, except any portion of the grievance that alleges sexual abuse.

9. If the issue raised is not grievable, or the grievance is a duplicate of a prior grievance, the Grievance Coordinator will return the grievance to the inmate with Form 3098 noting the reason.

10. When an issue goes directly to the Warden (first level) for a decision such as disciplinary appeals, visiting denials, any allegation of sexual abuse or mail censorship, the inmate shall file an Informal Grievance form for tracking purposes.

11. Grievances alleging staff misconduct will be reviewed by the Warden and if deemed appropriate will be forwarded to the Office of the Inspector General through the OITS/NOTIS.

A. The Informal Response will reflect this action being initiated.

B. Timeframes are suspended until a disposition is received from the Inspector General's Office.

12. The time limit for a response to the informal grievance is forty-five (45) days from the date the grievance is received by the grievance coordinator to the date returned to the inmate.

A. The inmate must file an appeal within five (5) days of receipt of the response to proceed to

the next grievance level.

B. Transmission of the grievance to another institution may result in exceeding this timeframe.

740.06 FIRST LEVEL GRIEVANCE

1. A First Level Grievance (Form DOC-3093) should be reviewed, investigated and responded to by the Warden at the institution where the incident being grieved occurred, even if the Warden is the subject of the grievance, except in any allegation of sexual abuse.

A. The Warden may utilize any staff in the development of a grievance response. The grievance will be responded to by a supervisor that has authority over the issue claimed in the grievance.

B. First Level medical/mental health/dental issues should be responded to by the highest level of Nursing Administration at the institution (DONs I or II).

C. First Level property issues should be responded to by the Associate Warden of Operations after being investigated by a sergeant or lieutenant and reviewed by the Warden.

D. All grievances containing allegations of sexual abuse will be referred to the Inspector General's Office for investigation and they will be designated as "PARTIALLY GRANTED" indicating that it has been submitted for investigation by the Inspector General's Office.

(1) The Inspector General's Office shall make a final decision on the merits of any portion of the sexual abuse grievance within 90 days of the initial filing of the grievance and if applicable the matter assigned for official investigation.

(2) The Inspector General's Office may claim an extension of time to respond to a sexual abuse grievance of up to 70 days if the normal time period for response is insufficient to make an appropriate decision.

(3) The Inspector General's Office shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.

(4) Upon the completion of the investigation into sexual abuse the inmate shall be informed of the outcome of the investigation by the Inspector General's Office.

2. At this level the inmate shall provide a signed, sworn declaration of facts that form the basis for a claim that the informal response is incorrect. This should include a list of persons, if any, who have relevant knowledge or information supporting the claim. Any additional relevant documentation should be attached at this level.

3. A First Level Grievance that does not comply with procedural guidelines shall be returned to the inmate, unprocessed, with instructions using Form DOC-3098, if applicable, for proper filing via the caseworker.

- A. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates shall be permitted to assist inmates in filing a grievance(s) relating to allegations of sexual abuse.
 - B. If a third party files on behalf of the inmate, 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.
 - C. If a third party files on behalf of the inmate, the facility may also require as a condition of processing the grievance, the alleged victim to personally pursue any subsequent steps in the grievance process.
4. The time limit for a response to the inmate for the First Level grievance is forty-five (45) days from the date the grievance is received by the grievance coordinator to the date returned to inmate.
- A. The inmate must file an appeal within five (5) days of receipt of the response to proceed to the next grievance level.
 - B. Transmission of the grievance to another institution may result in exceeding this timeframe.

740.07 SECOND LEVEL GRIEVANCE

1. A Second Level Grievance (Form DOC - 3094) should be reviewed and responded to by the:
- A. Deputy Director of Operations for facility custody or security operations that do not include programs.
 - B. Deputy Director of Programs for all program issues such as education, visiting, or religious programming.
 - C. The Deputy Director of Support Services for fiscal, property and telephone issues.
 - D. The Offender Management Administrator (OMA) for classification and timekeeping issues.
 - E. The Medical Director for medical/ dental issues, including medical co-pays or charges.
 - F. The Mental Health Administrator for mental health issues.
 - G. The Chief Medical Officer for medical issues, including medical co-pays or charges.
- E. The inmate may appeal the decision related to a sexual abuse grievance response from the Inspector General's Office within five (5) days of the grievance, with a subsequent response from the DD for security program, religious and operations.
2. The Grievance Coordinator shall forward copies of all related documents and the appeal to the DDs for review and distribution to other Appointing Authorities and Division Heads.

3. The time limit for a response to the inmate for the Second Level grievance is sixty (60) days, not including transmittal time, from the date the grievance is received by the grievance coordinator to the date it is returned to inmate.
4. Administrators shall respond to the Second Level Grievance, specifying the decision and the reasons for the decision, and return it to the Grievance Coordinator.

740.08 REMEDIES TO GRIEVANCES

1. Grievance remedies should be determined with the goal of appropriately resolving legitimate claims at the lowest level of review possible, considering each institution's particular operational, security and safety concerns.
2. Remedies available for grievances may include, but are not limited to, the following:
 - A. Appropriate measures to resolve unsafe or unsanitary conditions of confinement.
 - B. Appropriate measures to address the violation of an inmate's constitutional, civil or statutory rights.
 - C. Appropriate measures to protect inmates from criminal or prohibited acts committed by Departmental employees and staff or other inmates.
 - D. Appropriate measures to revise, clarify and implement written Departmental and institutional rules or procedures necessary to prevent further violations.
 - E. Appropriate measures to provide a disabled or physically impaired inmate with reasonable accommodation or reasonable modification.
 - F. Appropriate monetary reimbursement for property loss, damage, personal injury, tort, or civil rights claims arising out of an act or omission of the Department of Corrections or any of its agents, former officers, employees or contractors.
3. When deemed appropriate by the staff person rendering a decision on a grievance, a proposed monetary remedy may be submitted to the Deputy Director of Support Services who may award monetary damages at any level of the Inmate Grievance. Once approved:
 - A. A Form DOC-3096, Administrative Claim Release Agreement, will be completed and submitted by the inmate on all monetary claims, except for personal property damage or loss.
 - B. A Form DOC-3027, Property Claim Release Agreement, will be completed and submitted by the inmate on all monetary claims for personal property damage or loss.
 - C. When property claims are settled informally at an institution, DOC 2027 Property Release Agreement will be completed.

4. Compensation for loss of personal property, property damage, personal injury or any other claim arising out of a tort shall not exceed five hundred (\$500.00).

740.09 ABUSE OF THE INMATE GRIEVANCE PROCEDURE

1. Inmates are encouraged to use the Grievance Procedure to resolve addressable claims where the inmate can define a specific loss or harm, however, they are prohibited from abusing the system by knowingly, willfully or maliciously filing frivolous or vexatious grievances, which are considered to be an abuse of the Inmate Grievance Procedure. Any of the below listed violations will result in the grievance be rejected.

2. It is considered abuse of the inmate grievance procedure when an inmate files a grievance that contains, but is not limited to:

A. A threat of serious bodily injury to a specific individual.

B. Specific claims or incidents previously filed by the same inmate.

C. More than two (2) unfounded, frivolous or vexatious grievances per month. The third unfounded, frivolous or vexatious grievance in a 30 day period will result in a disciplinary action against the inmate for abuse of the grievance system. The date of the first unfounded grievance will be the beginning of the 30 day period. .

D. Filing two (2) or more emergency grievances in a seven (7) day week period, Monday through Sunday which are deemed not to be emergencies, will result in disciplinary action against the inmate for abuse of the grievance system.

E. Obscene, profane, and derogatory language.

F. Contains more than one (1) appropriate issue, per grievance.

G. The claim or requested remedy changes or is modified from one level to another.

3. If an inmate files a grievance as listed in (2), the assigned caseworker shall:

A. Return a copy of the improper grievance to the inmate and Form DOC-3098, Improper Grievance Memorandum, noting the specific violation.

B. Give the original to the inmate.

C. Return a copy to the Grievance Coordinator for inclusion in the inmate's grievance file.

D. If the inmate grievance alleges a threat to the safety and/or security of the institution, the grievance will be entered regardless of the content.

4. The inmate shall **not** be given additional time to re-submit the grievance in the proper form.

- A. The inmate's failure to re-submit the grievance in the proper form and **within the prescribed time frame** shall constitute abandonment.
 - B. If the timeframe has been exhausted prior to the inmate receiving Form DOC- 3098, the inmate has five (5) days from the date it was received to re-submit.
5. An inmate who satisfies the criteria contained in 740.09 Section 2 above should:
- A. Be brought to the attention of the Grievance Coordinator as soon as possible.
 - B. The Grievance Coordinator should review all documentation supporting the alleged abuse to determine if abuse has occurred and forward a written recommendation to the Warden.
 - C. The Warden should review and, if warranted, forward to the DDs with a recommendation that a Notice of Charges be issued.
 - D. Only the DDs can write a Notice of Charges on the inmate if they determine an abuse of the grievance process.
 - E. The DDs will forward the Notice of Charges to the Warden for processing through the inmate disciplinary process.
 - F. A conduct violation of this nature is not a form of retaliation.
 - G. An inmate may not be disciplined for filing a grievance related to alleged sexual abuse unless the Department has demonstrated that the inmate filed the grievance in bad faith.

740.10 EMERGENCY GRIEVANCE PROCEDURE

1. An Emergency Grievance (Form DOC-1564) received by any staff member shall be immediately delivered to the shift supervisor no later than is reasonable and necessary to prevent serious injury or a breach of security.
2. Any emergency grievance alleging that an inmate is subject to substantial risk of imminent sexual abuse shall be immediately forwarded to the highest ranking staff member on duty so that corrective action may be taken immediately which may include moving the inmate to administrative segregation for protective custody.
 - A. The inmate shall receive a response to the emergency grievance within 24 hours, with a final facility decision about whether the inmate is in substantial risk of imminent sexual abuse within two (2) regular work days.
 - B. The initial response, final decision and the action taken in response to the emergency grievance will be documented. Action taken can include, but not be limited to:

- (1) Refer the information to the Inspector General's Office;
 - (2) Afford the inmate appropriate medical, mental health care; and
 - (3) Address any safety considerations.
2. The shift supervisor may confer with the on duty medical staff, Warden or Associate Warden and, if necessary, the DDs, to determine whether the grievance constitutes an emergency.
 3. The highest-ranking staff member on duty, with the aid of an authorized Department official, shall immediately take any corrective measures necessary to prevent a substantial risk of injury or breach of security.
 4. The Department official receiving the Emergency Grievance should respond to the filing inmate no later than is necessary to prevent serious injury or a breach of security.
 5. In the event the inmate requests further review of a claim not deemed an emergency, the inmate may file a grievance appeal commencing at the Informal Level.
 6. A copy of the emergency grievance will be forwarded to the Grievance Coordinator for entry into OITS/NOTIS for processing and tracking purposes.

740.11 INMATE TRANSFERS

1. Inmates transferred to another institution pending the resolution of a filed grievance shall have the grievance completed at the sending institution at all levels.
 - A. The receiving institution is responsible for logging in and tracking the grievance through the OITS/NOTIS.
 - B. All responses and correspondence shall be conducted via first class mail to the Grievance Coordinator at the receiving institution.
2. Timeframes do not apply if the inmate has been transferred. Grievances shall be processed as soon as practicable and timeframes shall be adhered to as closely as possible
3. If an inmate expires his sentence or leaves the Department on parole, the grievance will be finalized on the current level. No further appeal may occur.
 - A. It is the responsibility of the inmate to provide a forwarding address during the release process in order to receive a grievance response.

APPLICABILITY

1. This regulation requires an operational procedure for each institution and facility.

2. This regulation requires an audit using the attached checklist form as a guide.

REFERENCES

ACA Standards, 4th Edition and 2008 Supplement, 4-4105, 4-4276, 4-4284, 4-4344, 4-4394, 4-4429, 4-4429-1

ATTACHMENTS

DOC Form 3065, Inmate Grievance Audit Questions


James Dzurenda, Director

1/3/17
Date

INMATE GRIEVANCE AUDIT QUESTIONS

1. Are there existing locked boxes throughout the institution that are accessible to all inmates?
2. Who has access to the keys to these boxes?
3. Is this procedure available to inmates in the institution?
4. Are the grievances being responded to by the appropriate party at each level?
5. Are grievances responded to within the time frame allowed?
6. Are grievance files maintained separately and in alphabetical order?
7. Are all threats of abuse, harassment or misconduct referred to the IG's office?
 - A. Does the inmate receive a response to this effect?
8. Are grievance responses addressing the issue of complaint in a thorough manner in order to resolve each grievance at the lowest level?
9. Is form DOC-3098 being utilized properly when an inmate is not complying with the AR?
10. Are all informal grievances being entered into the OITS?
11. How are pending grievances being followed up on when an inmate transfers to another institution?
12. Is an audit performed at the institution with any frequency to determine outstanding grievances?
13. Do grievances regarding property claims contain all the necessary paperwork? Are legitimate claims resolved in a timely manner?
14. Were emergency grievances handled in an expeditious, professional manner?
15. Are grievance files maintained at the institution according to policy?

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
740**

INMATE GRIEVANCE PROCEDURE

Supersedes: AR 740 (02/12/10); and AR 740 (Temporary, 06/16/14); 09/16/14
Effective Date: ~~09/16/14~~ 01/03/2017, Temporary

AUTHORITY: NRS 209.131, ~~NRS 209.246~~, 42 U.S.C. § 15601, *et seq.* and 28 C.F.R. Part 115

PURPOSE:

1. The purpose of this Administrative Regulation (“AR”) is to clearly set forth the requirements and procedures of the administrative process that Nevada Department of Corrections (“NDOC”) inmates must utilize to resolve addressable grievances and claims, including but not limited to, claims for personal property, property damage, disciplinary appeals, personal injuries, and any other tort or civil rights claim relating to conditions of confinement. Inmates may use the Inmate Grievance Procedure to resolve addressable inmate claims only if the inmate can factually demonstrate a loss or harm. This procedure describes the formal grievance processes and will guide NDOC employees in the administration, investigation, response and resolution of inmate grievances.

2. The provisions of this AR shall be effective on or after the effective date of this AR. The provisions of this AR are not retroactive and do not apply to incidents and/or claims that occurred prior to the effective date of this AR.

A. Only inmate claims arising out of, or relating to, issues within the authority and control of the NDOC may be submitted for review and resolution by way of the grievance process.

B. A good faith effort will be made to resolve legitimate inmate claims without requiring the inmate to file a formal grievance.

3. This AR does not create any right, liberty or property interest, or establish the basis for any cause of action against the State of Nevada, its political subdivisions, agencies, boards, commissions, departments, officers or employees.

RESPONSIBILITY

1. The Director, through the Deputy Directors (DDs), shall be responsible in establishing and supervising an inmate grievance process that provides an appropriate ~~and substantial~~ response to an inmate’s claim, as well as an administrative means for the expression of, and prompt and fair resolution of, inmate problems and concerns.

2. The Warden through the Associate Warden (AW) ~~Wardens (AWs)~~ shall be responsible in managing the grievance process at each institution and any facilities under the control of the parent institution. The AW may designate an Inmate Grievance Coordinator to conduct functions required by this regulation.

3. The Offender Management Administrator (OMA) shall be responsible for supervision of the Offender Issue Tracking System (OITS) in the Nevada Offender Tracking Information System (NOTIS), the program and the computer system which manages the inmate grievances.

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740.01 ADMINISTRATION OF INMATE GRIEVANCES

1. Each institution/facility shall establish locked boxes where all inmates have access to submit their grievances directly to the box. Keys will be issued ~~to by~~ the Warden, to an AW and/or a designated ~~coordinator only~~ staff.

A. Lock boxes will be maintained in ~~close segregation~~ close segregation/max units in a manner in which the inmate will be allowed to have direct access. ~~The grievance coordinator~~ A designated staff may go cell to cell to pick up grievances in ~~close segregation~~ close segregation/max units due to security and safety concerns, if necessary.

B. Emergency grievances will be handed to any staff member for immediate processing per this regulation.

2. Grievances will be treated as legal correspondence and will be gathered daily, Monday through Friday, excluding holidays, by the AW or designated Grievance Coordinator(s) and or designated staff member.

3. Grievance forms will be kept in housing units and may be accessed through the unit staff, the unit caseworker or in the Institutional Law Library. Emergency forms may be accessed through any employee.

4. ~~If an 'emergency grievance' is filed, other staff members~~ Grievances may be ~~involved in receiving~~ GRANTED, DENIED or PARITIAALLY GRANTED at any level as deemed appropriate after the claim in the grievance and delivering the response has been investigated.

A. Grievance findings or responses will not be titled "Substantiated."

5. The Grievance Coordinator should record receipts, transmittals, actions, and responses on all grievances to OITS/NOTIS within three (3) working days of receipt.

A. The coordinator should sign, date and enter the approximate time as noted on DOC 3091, 3093 and 3094.

B. Each The front page of the grievance should be date stamped the day entered into OITS/NOTIS.

6. Monthly and annual grievance reports generated by OITS/NOTIS will be reviewed by the Deputy Directors (DDs, ~~AWs and~~), Wardens for review and evaluation Associate Wardens (AWs) on a monthly/quarterly and annual basis.

740.02 GRIEVANCE RECORDS

1. Grievance documents shall be stored at the facility/institution where the grievance issue occurred.

A. Grievance files shall be in separate files for each inmate and maintained in alphabetical order by the inmate's last name.

B. Grievance copies are shall not ~~to be~~ placed in an inmate's Institutional or Central File, nor shall they be available to employees not involved in the grievance process.

2. Grievance files shall be maintained at each institution for a minimum of five (5) years following final disposition of the grievance.

3. Employees who are participating in the disposition of a grievance shall have access to records essential to the disposition of the grievance.

4. ~~No inmate~~ Inmates will not have access to grievance records unless ordered by a court, as grievance records are considered confidential and they may be redacted if appropriate.

5. Upon completion of each level of the grievance process, the form and all relevant attachments shall be maintained in the inmate's separate grievance file. Copies shall be given to the inmate.

740.03 GRIEVANCE ISSUES

1. Inmates may use the Inmate Grievance Procedure to resolve addressable inmate claims including, only if the inmate can factually demonstrate a loss or harm. Grievances may be filed to include, but not limited to, personal property, property damage, disciplinary appeals, personal injuries, and any other tort claim or civil rights claim relating to conditions of institutional life. The inmate must state the action or remedy that will satisfy the claim in the grievance.

a) If the inmate does not factually demonstrate a loss or harm and does not state the action or remedy that will satisfy the claim in the grievance, the grievance will be "REJECTED" and return to the inmate with an explanation as to what was missing in order for the grievance to be processed.

b) A Grievance will not be used as a "KITE" to advise staff of issues, actions or conditions that they do not like but suffered no harm or loss.

2. All allegations of inmate abuse by Department staff, employees, agents or independent contractors, shall be immediately reported to the ~~AWs, the Warden, AWs,~~ and the Inspector General's Office, in accordance with investigator guidelines via the NOTIS reporting system.

A. Any third party reporting of sexual abuse against an inmate will be referred to the Warden or designee for entry into the NOTIS reporting system and referral to the Office of the Inspector General.

B. ~~The alleged victim~~ Inmates who allege abuse other than sexual abuse will be interviewed by a supervisor of the staff who allegedly committed the abuse to ascertain if he/she agrees to pursue administrative remedies, which will be documented within the NOTIS system.

C. Any portion of a grievance that does not indicate an allegation of sexual abuse will have to meet the criteria listed in this section of the AR.

3. Only inmate claims arising out of, or relating to, issues within the authority and control of the Department may be submitted for review and resolution.

A. Non-grievable issues include:

A-1. State and federal court decisions.

B-2. State, federal and local laws and regulations.

C-3. Parole Board actions and/or decisions.

4. Medical diagnosis, medication or treatment/care provided by a private/contract community hospital.

4. Claims for which the inmate lacks standing will not be accepted, included, but not limited to:

A. Filing a grievance on behalf of another inmate unless the inmate is so physically or emotionally handicapped as to be incapable of filing a grievance, and with the other inmate's approval, or in the case(s) of any third party reporting of Sexual Abuse.

B. The inmate filing the grievance was not a direct participant in the matter being grieved, except a third party allegation of sexual abuse.

C. An inmate may not file more than one (1) grievance per seven (7) day week, Monday through Sunday. More than one (1) grievance filed during the seven day week period will be rejected, unless it alleges sexual abuse or it is an emergency grievance that involves health or safety claims. If the practice of filing excessive grievances continues, the inmate will be documented for abuse of the grievance system.

D. The inclusion of more than one grievance, per form will be cause for rejection of the grievance.

E. Grievances that grieve the same issue in a previously filed grievance will be screened out as a duplicate issue, which is already being considered or has been considered and responded to.

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F. Grievances that grieve the same issue in a previously filed grievance will also be screened out, even if the requested action or remedy is different on the subsequent grievance.

5. In the event an inmate's claim is deemed inappropriate for review or not within the intended scope of this Regulation, the inmate may not appeal that decision ~~only~~ to the next procedural level of review unless the inmate can produce evidence the issue in the grievance is within the scope of this AR or that the NDOC has to authority grant the remedy or action being requested.

6. An inmate who is dissatisfied with the response to a grievance at any level may appeal the grievance to the next level, within the substantive and procedural requirements outlined herein, unless the action requested has already been Granted or Partially Granted at a lower level.

A. Administrators or employees of the institution shall automatically allow appeals without interference unless the grievance is granted or partially granted as stated in Section C of this AR or the grievance has multiple issues/claims or does not request a remedy that is within the authority of the NDOC.

B. An inmate's election not to sign and date this form at any level shall constitute abandonment of the claim.

C. If the Grievance is "Granted" at any level, the grievance process is considered complete and the inmate's administrative remedies exhausted, and the inmate cannot appeal the decision to a higher level. If the inmate files a grievance to a higher level after it has been granted at a lower level, the grievance will be screen out and the notation in the rejection form will state that the grievance has already been granted.

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7. Except as required for the initial filing of an Informal Grievance, time limits shall begin to run from the date an inmate receives a response for appeal and the date the Department's respondent receives the appeal.

A. Time frames are waived for allegations of sexual abuse, regardless of when the incident is alleged to have occurred.

8. An overdue grievance response at any level is not an automatic finding for the inmate.

A. The response must be completed, even if it is overdue.

B. The inmate may proceed to the next grievance level, except at the Second Level, if a response is overdue.

C. The overdue response does not count against the inmate's timeframe for an appeal if he ~~awaits~~waits for the response before initiating the appeal.

9. Inmates who participate in or utilize the Inmate Grievance Procedure shall not be subjected to retaliation, i.e. an assertion that an employee took some adverse action against an inmate for filing a

grievance, except as noted in 740.09.

A. Retaliation is a grievable issue.

B. An unfounded claim of retaliation ~~may~~will be handled as an abuse of the grievance procedure.

C. The action did not reasonably advance a legitimate correctional goal.

10. Comprehensive responses are required for inmate grievances. Statements such as "Your grievance is denied."— are not acceptable. An explanation is necessary.

740.04 ~~INFORMAL~~ RESOLUTION GRIEVANCE

1. Inmates are expected to resolve grievable issues through discussion with ~~their caseworker~~staff whose duties fall within the issue in the grievance prior to initiating the grievance process, except as noted in AR 740.03, number 2, or where resolution is not possible, such as disciplinary appeals. Inmates are encouraged to use a kite to bring issues to the attention of staff instead of immediately filling a grievance.

A. Allegations of sexual abuse will not be referred to a staff member who is the subject of the accusation of sexual abuse.

B. Inmates are not required to use an informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

2. An informal resolution may be accomplished in writing or in direct consultation with the appropriate staff.

740.05 INFORMAL GRIEVANCE

1. At the Informal Level, an inmate shall file a grievance (Form DOC-3091) after failing to resolve the matter by other means such as discussion with staff or submitting a kite.

2. Grievances should be reviewed, investigated and responded to by the ~~inmate's assigned Caseworker with the aid of other Department~~staff except for member that has responsibility over the issue that is being grieved. For example; a medical issue will be submitted to the medical department. Food issues will be submitted to the culinary department. Other examples include but not limited to:

A. Informal grievances addressing property issues should be responded to by the Property Sergeant or equivalent.

B. All allegations of sexual abuse will be referred to the Inspector General's Office for investigation via the First Level Grievance (DOC 3093). When an issue goes directly to the first level, the inmate shall file an Informal Grievance form for tracking purposes only.

(1) The Grievance Coordinator will forward a copy of the grievance to the Inspector General's Office immediately upon receipt.

(2) If the Grievance is forwarded to the Inspector General's Office, the grievance will be listed as "Partially Granted." A partial granting of a grievance is not to be interpreted as to denote that the request for investigation is granted, but rather the claims are being referred to the Inspector General's Office for investigation. The "Partial Grant" is not meant to imply that the action or remedy requested is being granted such as a request that an employee be disciplined. Even if the claims against a staff member are sustained, the inmate is not privy to personnel action taken against a staff member.

C. The Inspector General's Office will have 90-days to respond to this allegation.

D. High Risk Prisoner (HRP) status.

(1) First Level by the ~~Regional~~ Deputy Director.

(2) Informal grievances that will be responded to by the Warden or designee.

(3) Second level by the Director or Designee.

E. Informal grievances addressing medical/mental health/dental issues should be responded to by ~~the charge nurse in health care supervisor such as the Director of Nursing at~~ the institution.

F. If the person who would normally respond to a grievance is the subject of the grievance, the Correctional Caseworker (CCS III/AW) should respond to the Informal Grievance.

3. The response to the grievance should be substantial, referencing all policies, procedures, rationale, and/or circumstances in finding for or against the inmate.

4. The inmate shall file an informal grievance within the time frames noted below:

A. Within ~~six (6) months~~ one (1) month if the issue involves personal property damage or loss, personal injury, medical claims or any other tort claims, including civil rights claims.

B. Within ten (10) days if the issue involves any other issues within the authority and control of the Department including, but not limited to, classification, disciplinary, mail and correspondence, religious items, and food.

C. When a grievance cannot be filed because of circumstances beyond the inmate's control, the time will begin to start from the date in which such circumstances cease to exist.

D. Time frames are waived for allegations of sexual abuse regardless of when the incident is alleged to have occurred.

5. An inmate should use Form DOC-3097, Grievant Statement Continuation Form, if unable to

present the details of their claim in the space available on the above forms.

A. All documentation and factual allegations available to the inmate must be submitted at this level with the grievance.

6. All grievances submitted should also include the remedy sought by the inmate to resolve this claim.

A. Failure to submit a remedy will be considered an improper grievance and returned to the inmate using Form DOC-3098, Improper Grievance Memorandum, except any grievance or portion of a grievance that alleges sexual abuse.

7. If the inmate's remedy to their grievance includes monetary restitution or damages, then the inmate will get the following forms from unit staff, unit caseworker, or law libraries:

A. Form DOC-3026, Inmate Property Claim, which shall be completed and submitted in addition to the grievance for all property loss or damage claims.

B. Form DOC-3095, Administrative Claim Form, which shall be completed and submitted in addition to the grievance for all personal injury, tort, or civil rights claims.

8. Failure by the inmate to submit a proper Informal Grievance form to the Grievance Coordinator or designated employee in their absence, within the time frame noted in 740.05, number 4, shall constitute abandonment of the inmate's grievance at this, and all subsequent levels, except any portion of the grievance that alleges sexual abuse.

A. When overdue grievances are received, they will be logged into the OITS/NOTIS.

B. The grievance response Form DOC-3098 will note that the inmate exceeded the timeframe and no action will be taken, except any portion of the grievance that alleges sexual abuse.

9. If the issue raised is not ~~grieveable~~grieveable, or the grievance is a duplicate of a prior grievance, the Grievance Coordinator will return the grievance to the inmate with Form 3098 noting the reason.

10. When an issue goes directly to the Warden (first level) for a decision such as disciplinary appeals, visiting denials, any allegation of sexual abuse or mail censorship, the inmate shall file an Informal Grievance form for tracking purposes.

11. Grievances alleging staff misconduct will be reviewed by the Warden and if deemed appropriate will be forwarded to the Office of the Inspector General through the OITS/NOTIS.

A. The Informal Response will reflect this action being initiated.

B. Timeframes are suspended until a disposition is received from the Inspector General's Office.

12. The time limit for a response to the informal grievance is forty-five (45) days from the date the grievance is received by the grievance coordinator to the date returned to the inmate.

A. The inmate must file an appeal within five (5) days of receipt of the response to proceed to the next grievance level.

B. Transmission of the grievance to another institution may result in exceeding this timeframe.

740.06 FIRST LEVEL GRIEVANCE

1. A First Level Grievance (Form DOC-3093) should be reviewed, investigated and responded to by the Warden at the institution where the incident being grieved occurred, even if the Warden is the subject of the grievance, except in any allegation of sexual abuse.

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A. The Warden may utilize any staff in the development of a grievance response. The grievance will be responded to be a supervisor that has authority over the issue claimed in the grievance.

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B. First Level medical/mental health/dental issues should be responded to by the highest level of Nursing Administration at the institution (DONs I or II).

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C. First Level property issues should be responded to by the Associate Warden of Operations after being investigated by a sergeant or lieutenant and reviewed by the Warden.

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D. All grievances containing allegations of sexual abuse will be referred to the Inspector General's Office for investigation and they will be designated as "PARTIALLY GRANTED" indicating that it has been submitted for investigation by the Inspector General's Office.

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(1) The Inspector General's Office shall make a final decision on the merits of any portion of the sexual abuse grievance within 90 days of the initial filing of the grievance and if applicable the matter assigned for official investigation.

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(2) The Inspector General's Office may claim an extension of time to respond to a sexual abuse grievance of up to 70 days if the normal time period for response is insufficient to make an appropriate decision.

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(3) The Inspector General's Office shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.

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(4) Upon the completion of the investigation into sexual abuse the inmate shall be informed of the outcome of the investigation by the Inspector General's Office.

2. At this level the inmate shall provide a signed, sworn declaration of facts that form the basis for a claim that the informal response is incorrect. This should include a list of persons, if any, who have relevant knowledge or information supporting the claim. Any additional relevant

documentation should be attached at this level.

3. A First Level Grievance that does not comply with procedural guidelines shall be returned to the inmate, unprocessed, with instructions using Form DOC-3098, if applicable, for proper filing via the caseworker.

A. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates shall be permitted to assist inmates in filing a grievance(s) relating to allegations of sexual abuse.

B. If a third party files on behalf of the inmate, 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.

C. If a third party files on behalf of the inmate, the facility may also require as a condition of processing the grievance, the alleged victim to personally pursue any subsequent steps in the grievance process.

4. The time limit for a response to the inmate for the First Level grievance is forty-five (45) days from the date the grievance is received by the grievance coordinator to the date returned to inmate.

A. The inmate must file an appeal within five (5) days of receipt of the response to proceed to the next grievance level.

B. Transmission of the grievance to another institution may result in exceeding this timeframe.

740.07 SECOND LEVEL GRIEVANCE

1. A Second Level Grievance (Form DOC - 3094) should be reviewed and responded to by the:

~~A.~~ Deputy Director of Operations for facility custody or security; operations that do not include programs.

~~A-B.~~ Deputy Director of Programs for all program; issues such as education, visiting, or religious operations, and environmental issues programming.

~~B-C.~~ The Deputy Director of Support Services for fiscal, property and telephone issues.

~~C-D.~~ The Offender Management Administrator (OMA) for classification and timekeeping issues.

~~D-E.~~ The Medical Director for medical/mental health/ dental issues, including medical co-pays or charges.

F. The Mental Health Administrator for mental health issues.

G. The Chief Medical Officer for medical issues, including medical co-pays or charges.

E. The inmate may appeal the decision related to a sexual abuse grievance response from the Inspector General's Office within five (5) days of the grievance, with a subsequent response from the DD for security program, religious and operations.

2. The Grievance Coordinator shall forward copies of all related documents and the appeal to the DDs for review and distribution to other Appointing Authorities and Division Heads.

3. The time limit for a response to the inmate for the Second Level grievance is sixty (60) days, not including transmittal time, from the date the grievance is received by the grievance coordinator to the date it is returned to inmate.

4. Administrators shall respond to the Second Level Grievance, specifying the decision and the reasons for the decision, and return it to the Grievance Coordinator.

740.08 REMEDIES TO GRIEVANCES

1. Grievance remedies should be determined with the goal of appropriately resolving legitimate claims at the lowest level of review possible, considering each institution's particular operational, security and safety concerns.

2. Remedies available for grievances may include, but are not limited to, the following:

A. Appropriate measures to resolve unsafe or unsanitary conditions of confinement.

B. Appropriate measures to address the violation of an inmate's constitutional, civil or statutory rights.

C. Appropriate measures to protect inmates from criminal or prohibited acts committed by Departmental employees and staff or other inmates.

D. Appropriate measures to revise, clarify and implement written Departmental and institutional rules or procedures necessary to prevent further violations.

E. Appropriate measures to provide a disabled or physically impaired inmate with reasonable accommodation or reasonable modification.

F. Appropriate monetary reimbursement for property loss, damage, personal injury, tort, or civil rights claims arising out of an act or omission of the Department of Corrections or any of its agents, former officers, employees or contractors.

3. When deemed appropriate by the staff person rendering a decision on a grievance, a proposed monetary remedy may be submitted to the Deputy Director of Support Services who may award monetary damages at any level of the Inmate Grievance. Once approved:

A. A Form DOC-3096, Administrative Claim Release Agreement, will be completed and submitted by the inmate on all monetary claims, except for personal property damage or loss.

B. A Form DOC-3027, Property Claim Release Agreement, will be completed and submitted by the inmate on all monetary claims for personal property damage or loss.

C. When property claims are settled informally at an institution, DOC 2027 Property Release Agreement will be completed.

4. Compensation for loss of personal property, property damage, personal injury or any other claim arising out of a tort shall not exceed five hundred (\$500.00).

740.09 ABUSE OF THE INMATE GRIEVANCE PROCEDURE

1. Inmates are encouraged to use the Grievance Procedure to resolve all-addressable claims where the inmate can define a specific loss or harm, however, they are prohibited from abusing the system by knowingly, willfully or maliciously filing frivolous or vexatious grievances, which are considered to be an abuse of the Inmate Grievance Procedure. Any of the below listed violations will result in the grievance be rejected.

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2. It is considered abuse of the inmate grievance procedure when an inmate files a grievance that contains, but is not limited to:

A. A threat of serious bodily injury to a specific individual.

B. Specific claims or incidents previously filed by the same inmate.

C. More than ~~four~~ (two (2)) unfounded, frivolous or vexatious grievances per month, ~~if the current~~. The third unfounded, frivolous or vexatious grievance is not substantial in a 30 day period will result in a disciplinary action against the inmate for abuse of the grievance system. The date of the first unfounded grievance will be the beginning of the 30 day period.

D. Filing two (2) or more emergency grievances ~~per month~~ in a seven (7) day week period, Monday through Sunday which are deemed not to be emergencies, will result in disciplinary action against the inmate for abuse of the grievance system.

E. Obscene, profane, and derogatory language.

F. Contains ~~two or more~~ than one (1) appropriate ~~issues~~ issue, per grievance.

F.G. The claim or requested remedy changes or is modified from one level to another.

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3. If an inmate files a grievance as listed in (2), the assigned caseworker shall:

A. Return a copy of the improper grievance to the inmate and Form DOC-3098, Improper Grievance Memorandum, noting the specific violation.

B. ~~Obtain the inmate's signature on the form and sign as a witness.~~

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C. Give the original to the inmate.

D. Return a copy to the Grievance Coordinator for inclusion in the inmate's grievance file.

E. If the inmate grievance alleges a threat to the safety and/or security of the institution, the grievance will be entered regardless of the content.

4. The inmate shall **not** be given additional time to re-submit the grievance in the proper form.

A. The inmate's failure to re-submit the grievance in the proper form and **within the prescribed time frame** shall constitute abandonment.

B. If the timeframe has been exhausted prior to the inmate receiving Form DOC- 3098, the inmate has five (5) days from the date it was received to re-submit.

5. An inmate who satisfies the criteria contained in 740.09 ~~section~~[Section 2](#) above should:

A. Be brought to the attention of the Grievance Coordinator as soon as possible.

B. The Grievance Coordinator should review all documentation supporting the alleged abuse to determine if abuse has occurred and forward a written recommendation to the Warden.

C. The Warden should review and, if warranted, forward to the DDs with a recommendation that a Notice of Charges be issued.

D. Only the DDs can write a Notice of Charges on the inmate if they determine an abuse of the grievance process.

E. The DDs will forward the Notice of Charges to the Warden for processing through the inmate disciplinary process.

F. A conduct violation of this nature is not a form of retaliation.

G. An inmate may not be disciplined for filing a grievance related to alleged sexual abuse unless the Department has demonstrated that the inmate filed the grievance in bad faith.

740.10 EMERGENCY GRIEVANCE PROCEDURE

1. An Emergency Grievance (Form DOC-1564) received by any staff member shall be immediately delivered to the shift supervisor no later than is reasonable and necessary to prevent serious injury or a breach of security.

2. Any emergency grievance alleging that an inmate is subject to substantial risk of imminent sexual abuse shall be immediately forwarded to the highest ranking staff member on duty so that corrective action may be taken immediately [which may include moving the inmate to administrative](#)

segregation for protective custody.

A. The inmate shall receive a response to the emergency grievance within ~~48~~²⁴ hours, with a final facility decision about whether the inmate is in substantial risk of imminent sexual abuse within ~~5 calendar~~ two (2) regular work days.

B. The initial response, final decision and the action taken in response to the emergency grievance will be documented. Action taken can include, but not be limited to:

(1) Refer the information to the Inspector General's Office;

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(2) Afford the inmate appropriate medical, mental health care; and

(3) Address any safety considerations.

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2. The shift supervisor may confer with the on duty medical staff, Warden or Associate Warden and, if necessary, the DDs, to determine whether the grievance constitutes an emergency.

3. The highest-ranking staff member on duty, with the aid of an authorized Department official, shall immediately take any corrective measures necessary to prevent a substantial risk of injury or breach of security.

4. The Department official receiving the Emergency Grievance should respond to the filing inmate no later than is necessary to prevent serious injury or a breach of security.

5. In the event the inmate requests further review of a claim not deemed an emergency, the inmate may file a grievance appeal commencing at the Informal Level.

6. A copy of the emergency grievance will be forwarded to the Grievance Coordinator for entry into OITS/NOTIS for processing and tracking purposes.

740.11 INMATE TRANSFERS

1. Inmates transferred to another institution pending the resolution of a filed grievance shall have the grievance completed at the sending institution at all levels.

A. The receiving institution is responsible for logging in and tracking the grievance through the OITS/NOTIS.

B. All responses and correspondence shall be conducted via first class mail to the Grievance Coordinator at the receiving institution.

2. Timeframes do not apply if the inmate has been transferred. Grievances shall be processed as soon as practicable and timeframes shall be adhered to as closely as possible

3. If an inmate expires his sentence or leaves the Department on parole, the grievance will be

finalized on the current level. No further appeal may occur.

A. It is the responsibility of the inmate to provide a forwarding address during the release process in order to receive a grievance response.

APPLICABILITY

1. This regulation requires an operational procedure for each institution and facility.
2. This regulation requires an audit using the attached checklist form as a guide.

REFERENCES

ACA Standards, 4th Edition and 2008 Supplement, [4-4105](#), [4-4276](#), [4-4284](#), [4-4344](#), [4-4394](#), [4-4429](#), [4-4429-1](#), [4-4284](#), [4-4344](#), [4-4394](#), [4-4429](#), [4-4429-1](#), [4-4494](#), [4-4282](#), [4-4446](#)

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ATTACHMENTS

DOC Form 3065, Inmate Grievance Audit Questions

James Dzurenda, Director

Date

INMATE GRIEVANCE AUDIT QUESTIONS

1. Are there existing locked boxes throughout the institution that are accessible to all inmates?
2. Who has access to the keys to these boxes?
3. Is this procedure available to inmates in the institution?
4. Are the grievances being responded to by the appropriate party at each level?
5. Are grievances responded to within the time frame allowed?
6. Are grievance files maintained separately and in alphabetical order?
7. Are all threats of abuse, harassment or misconduct referred to the IG's office?
 - A. Does the inmate receive a response to this effect?
8. Are grievance responses addressing the issue of complaint in a thorough manner in order to resolve each grievance at the lowest level?
9. Is form DOC-3098 being utilized properly when an inmate is not complying with the AR?
10. Are all informal grievances being entered into the OITS?
11. How are pending grievances being followed up on when an inmate transfers to another institution?
12. Is an audit performed at the institution with any frequency to determine outstanding grievances?
13. Do grievances regarding property claims contain all the necessary paperwork? Are legitimate claims resolved in a timely manner?
14. Were emergency grievances handled in an expeditious, professional manner?
15. Are grievance files maintained at the institution according to policy?

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
801**

CORRECTIONAL PROGRAMS/CLASSES/ACTIVITIES

Supersedes: 04/08/11; (Temporary, 10/02/13); 10/15/13
Effective Date: 02/13/2017 (Temporary)

AUTHORITY: NRS 209.389; NRS 209.391; NRS 209.433 -449; NRS 209-331

PURPOSE

The purpose of Administrative Regulation (AR) 801 is to ensure NDOC is compliant with federal and state regulations and correctional best practices with establishing quality programs for general education, vocational education, training, rehabilitation and/or activities.

RESPONSIBILITY

The Director is responsible for the implementation of all Departmental programs for inmates.

The Deputy Director of Programs is responsible for approving all Department programs/classes/activities for inmates after the proposed programs have been vetted through the Program Review Committee.

The Deputy Directors are responsible for approving all Department programs/classes/activities for inmates, in their respective Divisions, after the proposed programs have been approved by the Deputy Director of Programs.

Wardens are responsible, through their subordinate staff, for daily management and operation of correctional program, classes, and activities for inmates, within their institution and facilities.

The Psychologist IVs are responsible to provide the clinical and administrative supervision of assigned staff who are conducting mental health programs and classes for inmates.

The Education Program Professional is responsible for monitoring and developing educational programs in cooperation with the various the Nevada Department of Education and the county educational programs where NDOC facilities are located and reporting on performance goals, quarterly.

The Quality Assurance Manager is responsible for recommending Programs to the Program Review Committee and the overall quality control of programs to include, but not limited to, defining performance measures; program goals; location of programs and delivery; reporting program activities; ensuring audit tools are in place and providing system audits with corrective action recommendations; and monitoring the delivery of these programs. The Quality Assurance Manager will provide training and provide quarterly reports on recommendations for system improvement as it relates to programs.

The Re-Entry Coordinator is responsible for the implementation, training, monitoring and quarterly reporting of re-entry programs.

Director for Substance Abuse Programs is responsible for the implementation, training, monitoring, quarterly reporting and providing corrective action plans for the substance abuse programs.

801.01 CORRECTIONAL PROGRAMS/CLASSES/ACTIVITIES

1. The Department shall provide inmates with correctional programs/classes designed to reduce recidivism and in-custody misconduct through methods that may demonstrate or result in measurable positive changes in inmate behavior. The programs will be provided commensurate with the inmate's risk assessment, individualized case plan, classification score, custody level, and availability of the program at the facility where the inmate is housed.

2. Authorized correctional programs consist of Core Programs, Classes and/or Activities.

A. Core Programs –Include, but are not limited to, substance abuse treatment programs, educational/vocational programs, Re-Entry and Evidence-Based behavioral programs. Core Programs are eligible for meritorious credits. Evidence-Based Programs are included on at least one of the national clearinghouses or registries to include, but not limited to: The Results First Clearinghouse, American Correctional Association (ACA), Association of State Correctional Administrators (ASCA), CrimeSolutions.gov, Blueprints for Healthy Youth Development, California Evidence-Based Clearinghouse for Child Welfare, National Institute of Corrections (NIC), Substance Abuse and Mental Health Services Administration's (SAMSHA), National Registry of Evidence-Based Programs and Practices (NREPP), Promising Practices Network, U.S. Department of Education's What Works Clearinghouse, What Works in Reentry Clearinghouse, and the Vera Institute.

B. Best Practices Programs/Classes: Include, but are not limited to, psycho-educational and life-skills programs/classes. These best practice programs/classes will be based on "Best-Practices" as identified by, but not limited to, the National Institute of Corrections (NIC), the American Correctional Association (ACA), the Vera Institute, SAMSHA and the Association of State Correctional Administrators (ASCA). Best Practice programs/classes may be eligible for meritorious credits.

C. Activities: Include but are not limited to, support groups, volunteer sponsored groups (i.e. Veterans, Pups on Parole, God Behind Bars, Alcoholics Anonymous, etc.) and religious activities (excluding regular religious services or religious literature study groups). Activities are not eligible for meritorious credits.

D. Positive Correctional Management Practices: The NDOC may implement practices and activities that are designed to enhance an inmate's ability to program in socially acceptable manner with other inmates by increasing out-of-cell time. Such activities may include recreational activities such as physical fitness programs through a coach or team sports such as basketball. Other activities may include availability of board games such as, but not limited to, checkers, chess and dominos that may increase an inmate's ability to interact with others in a positive manner.

3. A program survey will be conducted every three (3) years to determine the programming needs and interests of inmates. The survey will include an assessment of the NDOC's ability to deliver the programs to the inmate population and will include information on program space, equipment, supplies and instructor/facilitator(s) level of competency. A schedule will be developed by the Associate Warden of Programs at each facility, as directed by the Warden so that each year at least one-third of the programs will be surveyed. The survey results will be provided to the Quality Assurance Manager, who will compile the information for possible system review and improvement.

801.02 CORE PROGRAMS

1. Core Programs are grounded in research and have been shown to improve outcomes for inmates or they have been shown to have promising potential to improve outcomes. To be considered for a core program, an inmate will be assessed by staff using a validated risk assessment instrument.

A. Inmates shall be prioritized for programming based on their risk to re-offend.

B. A criminogenic risk/needs assessment shall be used to refer inmates to appropriate programs through the inmate's caseworker.

C. The result of the criminogenic risk/needs assessment shall be addressed on an individual case plan (ICP).

D. Core Programs may not be available to all inmates who are at risk, but good faith efforts will be made to enroll inmates in Core Programs, as space is available.

E. Inmates may decide to not to participate in a Core Program. When this occurs, the inmate's decision and the reason for the decision will be documented in NOTIS in the case notes. For example, an inmate may decide that he/she may want vocational training or an assignment to a fire-fighting camp.

E. Inmates enrolled in Core Programs will not be reassigned, transferred or be subject to bed moves that will prevent the completion of the Core Program, unless it is due to the inmate's misconduct, failure to comply with program requirements or because the continued participation in the program will result in a danger to the safety of the inmate or others or the orderly operation of the prison.

2. Core Programs should follow standardized curricula approved by the Program Review Committee. The approved curricula will include the lesson plan, the number of hours required to complete the course, and delivery system for the curricula. The delivery system can be instructor based, instructor and group interaction, and educational computerized tablets as approved by the AR 143, Inmate Access to Information Technology.

The Program Review Committee will consist of a minimum of three (3) members from the following:

A. Deputy Director of Programs;

B. Psychologist IV;

- C. Education Programs Professional;
- D. Mental Health Administrator; and
- E. Quality Assurance Manager for Behavioral Services;

The Deputy Director of Program reserves the right to include any NDOC staff member; contractor; and/or community partner to review information presented to the Program Review Committee.

3. All proposed Core Programs and Best Practice Programs will be submitted to the Program Review Committee using Form 2060 or 3501. All Evidence-based program proposals must also include DOC Form 2061.

- A. Wardens or Associate Wardens may submit requests to the Program Review Committee for consideration of a Core Program specific to their facility. Prior to any program being implemented at a facility, the warden must review and approve the program proposals (DOC 2060). These program proposals will be subject to final approval by the Deputy Director of Programs, after they have been vetted by the Program Review Committee.
- B. The Program Review Committee will identify programs that have been approved for use by NDOC facilities.
- C. Inmates will not teach or facilitate any correctional programs or classes approved for meritorious credit.
- D. The Program Committee provides recommendations to the Deputy Director of Programs, who has the authority to deny or approval NDOC Programs, under the authority of the Director.

4. New Core Programs and Best Practice Programs shall undergo a pilot period of a minimum of 90-days at an NDOC facility, approved by the Deputy Director of Programs, to test new interventions, modalities and processes before the program is introduced system-wide.

5. Core Programs shall have program and participant manuals, established schedules, attendance requirements, program goals and program audit instrument. Staff conducting the program will adhere to the requirements of the program. Any requests for exceptions are to be submitted to the Program Review Committee. Exceptions may be granted on a case-by-case basis depending on the degree of variance requested and the reason for the variance, see DOC 2060 or DOC 3501.

6. The recommendation for the introduction of a Core Program will include the target group that the Core Program is designed to assist.

7. The recommendation for the implementation of Core Program will include the identification of which staff will provide the program/class, the resources needed to implement the program (fiscal and institutional), which includes, but is not limited to: training, the cost for materials, qualifications of trainer, facility space, impact on correctional facilities and staff, as well as the identification of the funding source

8. Core Programs will be conducted only by qualified facilitators. The qualification for the staff series/level that will serve as facilitators for any Core Program will be determined by the Program Review Committee. For example; a teacher, vocational instructor or group facilitator will have the appropriate credential and/or training.
9. Core Programs will be evaluated every three-years by qualified individuals, and the results will be reported to the Program Review Committee. The Quality Assurance Manager will develop the audit instrument that will be used to evaluate the program and will provide the results to the Deputy Director for Program and the Program Review Committee.
10. Meritorious credits will be issued to core programs, pursuant to statute.
11. Offender daily attendance shall be recorded in NOTIS by an NDOC staff person.
12. Meritorious Credits will only be awarded upon completion of each core program. This applies during the current incarceration and any subsequent incarceration under the same booking number.
13. The satisfactory completion of a Core Program should be documented with the completion of DOC 3077 in NOTIS, and reported on the Parole Board Report.
14. An approved Merit Credit Program list will be established and revised as necessary to reflect the addition and removal of programs. See AR 803 for further details.

801.03 BEST PRACTICE - PROGRAMS

1. Best Practice Program are classes or groups, taught by approved staff or volunteers, on topics that include, but are not limited to psycho-educational programs, life-skills programs and re-entry programs that have been vetted and recommended as a best practice as described and listed in this AR. Best Practice programs must be submitted with the supporting documentation from one of the agencies listed in this AR.
2. Best Practice Programs will be taught by qualified and approved staff or volunteers.
3. Best Practice Programs/classes may be eligible for meritorious credits and successful completion of these programs will be reported on the Parole Board Report.
4. Best Practice programs will be vetted in the same manner as Core-Programs.
5. The determination as to whether a Best Practice Program is eligible for meritorious credit and how many credits will be awarded will be determined by the Program Review Committee.
6. New Best Practice Programs shall undergo a pilot period of a minimum of 90-days at an NDOC facility, approved by the Deputy Director of Programs, to test new interventions, modalities and processes before the program is introduced system-wide.

801.04 ACTIVITIES

1. Activities include but are not limited to, support groups, volunteer sponsored groups (i.e. Veterans, Pups on Parole, God Behind Bars, Alcoholics Anonymous etc.) and religious activities (excluding regular religious services or religious literature study groups).
2. Activities are not eligible for meritorious credits, but will be included in the Parole Report.
3. No inmate may teach or facilitate an activity without prior written approval of the Warden.
4. All activity proposals will be submitted on DOC 2060 for review and approval by the Warden, with final approval by the Deputy Director.

801.05 POSITIVE CORRECTIONAL MANAGEMENT PRACTICES

Positive correctional management practices are designed to increase inmate out-of-cell time in an effort to increase positive socialization. These practices can include work details on the tiers and yard, board games, interaction with clinicians, intermural sports such as basketball, recreation yard access in small groups and board games or access to library books. These practices do not need Program Review approval and data is not collected. These practices may include, but not limited to the following:

1. Behavior Modification Units will provide a reintegration or step-down process for inmates that have been housed in segregation units in an effort to review the inmate's ability to interact with staff and inmates in a socially acceptable manner.
 - a) The stay in the behavior modification units will be a maximum of 30-days, and may be shorter depending on the inmate's positive, socially acceptable, disciplinary free conduct while in the Behavior Modification Unit (BMU).
 - b) Inmates in the BMU will be evaluated weekly by unit officer(s), supervisor(s) and caseworker(s). Mental health staff will interview the inmate while in the BMU to determine the inmate's need for counseling prior to release to a general population unit and or the community.
 - c) Social interaction will be encouraged during out-of-cell time with intermural sports, board games and library access.
2. Close Custody will receive a minimum of five (5) hours a day out-of-cell time, contingent on positive conduct. Allowable activities include exercising in small groups and/or being assigned to work details on the tier or exercise yard.
3. Administrative Segregation will receive between one (1) to three (3) hours of out-of-cell time, contingent on positive conduct. Inmate may be allowed to exercise in small groups and/or may be assigned to work details on the tier or exercise yard.
4. Medium Custody – will be allowed as much out-of-cell time that is consistent with staff resources, after the inmate has completed his/her Core, Best-Practice or Activity Programs each day. Socially acceptable activities and interaction with staff and inmates, whether in housing units or exercise yards is encouraged

801.05 COMMUNITY VOLUNTEER PROGRAM OR ACTIVITY FACILITATORS

1. Community volunteer facilitators must first be approved as Department Volunteers in accordance with the requirements of AR 802.
2. Community volunteers will submit Volunteer Program Proposals (DOC 3501) to the Warden. Upon approval by the Warden, the program will be reviewed by the Program Review Committee, with final approval by the Deputy Director of Programs.

801.06 MONTHLY PROGRAM ACTIVITY REPORTS

1. The Associate Warden over Programs will provide a Monthly Program Activity report (DOC 3524) to the Warden and Deputy Director Designee including, but not limited to, the number of participants and the number of completions year-to-date. Monthly Program Activity Reports will be submitted in accordance with the established time frame.

APPLICABILITY

1. This AR requires an Operational Procedure (OP) for each institution/facility governing program classes, substance abuse classes, and reentry.
2. This AR requires an audit.

REFERENCES:

ACA Standards 4-4377, 4-4464 through 4-4471, 4-4474, 4-4481


James Dzurenda, Director

2/13/17
Date

**NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
801**

CORRECTIONAL PROGRAMS/CLASSES/ACTIVITIES

Supersedes: [AR 801](#) (04/08/11); and ~~AR 801~~ (Temporary, 10/02/13)-; [10/15/13](#)
Effective Date: ~~10/15/13~~ [02/13/2017](#) (Temporary)

AUTHORITY: NRS 209.389; [NRS 209.391](#); [NRS 209.433](#) -449; ~~209.466~~; ~~209.4236~~;
~~209.4465~~ [NRS 209-331](#)

PURPOSE

The purpose of Administrative Regulation (AR) 801 is to ensure NDOC is compliant with federal and state regulations and correctional best practices with establishing quality programs for general education, vocational education, training, rehabilitation and/or activities.

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RESPONSIBILITY

The Director is responsible for the implementation of all Departmental programs for inmates.

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The Deputy Director of Programs is sare responsible for approving ~~and monitoring~~ all Department programs/classes/activities for inmates after the proposed programs have been vetted through the Program Review Committee.

The Deputy Directors are responsible for approving all Department programs/classes/activities for inmates, in their respective Divisions, after the proposed programs have been approved by the Deputy Director of Programs.

Wardens are responsible, through their subordinate staff, for daily management and operation of correctional program, classes, and activities for inmates, ~~including direct staff supervision,~~ within their institution and facilities.

The Psychologist IVs are responsible to provide the clinical and administrative supervision of assigned staff who are conducting mental health programs and classes for inmates.

The Education Program Professional is responsible for monitoring and developing educational programs in cooperation with the various the Nevada Department of Education and the county educational programs- where NDOC facilities are located and reporting on performance goals, quarterly.

The Quality Assurance Manager is responsible for recommending Programs to the Program Review Committee and the overall quality control of ~~Evidence- B~~ased programs to include, but not limited

to, defining performance measures; program goals; location of programs and delivery; reporting program activities; ensuring audit tools are in place and providing system audits with corrective action recommendations; and monitoring the delivery of these programs. The Quality Assurance Manager will provide training and provide quarterly reports on recommendations for system improvement as it relates to programs.

The Re-Entry Coordinator is responsible for the implementation, training, monitoring and quarterly reporting of re-entry programs.

Director for Substance Abuse Programs is responsible for the implementation, training, monitoring, quarterly reporting and providing corrective action plans for the substance abuse programs.

801.01 CORRECTIONAL PROGRAMS/CLASSES/ACTIVITIES

1. The Department ~~shall should~~ provide inmates with correctional programs/classes designed to reduce recidivism and in-custody misconduct through methods that may demonstrate or result in measurable positive changes in inmate behavior. The programs will be provided commensurate with the inmate's risk assessment, individualized case plan, classification score, custody level, and availability of the program at the facility where the inmate is housed.

2. Authorized correctional programs consist of Core Programs, ~~Optional~~ Classes and/or Activities.

A. Core Programs ~~—Evidence Based Programs, —~~include, but are not limited to, substance abuse treatment programs, educational/vocational programs, Re-Entry and ~~e~~Evidence-Based behavioral programs. Core Programs are eligible for meritorious credits. ~~Evidence-Based Programs are included on at least one of the national clearinghouses or registries to include, but not limited to:~~ The Results First Clearinghouse, American Correctional Association (ACA), Association of State Correctional Administrators (ASCA), CrimeSolutions.gov, Blueprints for Healthy Youth Development, California Evidence-Based Clearinghouse for Child Welfare, National Institute of Corrections (NIC), Substance Abuse and Mental Health Services Administration's (SAMSHA), National Registry of Evidence-Based Programs and Practices (NREPP), Promising Practices Network, U.S. Department of Education's What Works Clearinghouse, What Works in Reentry Clearinghouse, and the Vera Institute.

B. Best Practices Programs/Classes: —Optional programs/classes —include, but are not limited to, psycho-educational, ~~re-entry~~, and life-skills programs/classes. These best practice programs/classes will be based on "Best-Practices" as identified by, but not limited to, the National Institute of Corrections (NIC), the American Correctional Association (ACA), the Vera Institute, SAMSHA and the Association of State Correctional Administrators (ASCA). Best Practice programs/classes may be eligible for meritorious credits.

C. Activities: —include but are not limited to, support groups, volunteer sponsored groups (i.e. Veterans, Pups on Parole, God Behind Bars, Alcoholics Anonymous, etc.) and religious activities (excluding regular religious services or religious literature study groups). Activities are not eligible for meritorious credits.

D. Positive Correctional Management Practices: The NDOC may implement practices and activities that are designed to enhance an inmate's ability to program in socially acceptable manner with other inmates by increasing out-of-cell time. Such activities may include recreational activities such as physical fitness programs through a coach or team sports such as basketball. Other activities may include availability of board games such as, but not limited to, checkers, chess and dominos that may increase an inmate's ability to interact with others in a positive manner.

3. Every three years, a program survey will may be conducted every three (3) years to determine the programming needs and interests of inmates. The survey will include an assessment of the NDOC's ability to deliver the programs to the inmate population and will include information on program space, equipment, supplies and instructor/facilitator(s) level of competency. A schedule will be developed by the Associate Warden of Programs at each facility, as directed by the Warden so that each year at least one-third of the programs will be surveyed. The survey results will be provided to the Quality Assurance Manager, who will compile the information for possible system review and improvement.

801.02 CORE PROGRAMS

1. Core Programs are grounded in research and have been shown to improve outcomes for inmates or they have been shown to have promising potential to improve outcomes. To be considered for a core program, an inmate will be may have been assessed by staff using a validated risk assessment instrument.

A. Inmates shall may be prioritized for programming based on their risk to re-offend.

B. A criminogenic risk/needs assessment shall may be used by staff to refer inmates to appropriate programs through the inmate's caseworker.

C. The result of the criminogenic risk/needs assessment shall may be addressed on an individual case plan (ICP).

D. Core Programs may not be available to all inmates who are at risk, but good faith efforts will be made to enroll inmates in Core Programs, as space is available.

E. Inmates may decide to not to participate in a Core Program. When this occurs, the inmate's decision and the reason for the decision will be documented in NOTIS in the case notes. For example, an inmate may decide that he/she may want vocational training or an assignment to a fire-fighting camp.

E. Inmates enrolled in Core Programs will not be reassigned, transferred or be subject to bed moves that will prevent the completion of the Core Program, unless it is due to the inmate's misconduct, failure to comply with program requirements or because the continued participation in the program will result in a danger to the safety of the inmate or others or the orderly operation of the prison.

2. Core Programs should follow evidence based practices and use standardized curricula approved recommended by the Program Review Committee. The approved curricula will include the lesson plan, the number of hours required to complete the course, and delivery system for the curricula.

The delivery system can be instructor based, instructor and group interaction, and educational computerized tablets as approved by the AR 143, Inmate Access to Information Technology.

The Program Review Ceommittee will consist of a minimum of three (3) members from the following:

- A. ~~Designated~~ Deputy Director of Programs;
- B. ~~Psychologist IV~~;
- C. Education Programs Professional;
- D. Mental Health Administrator; and
- ~~DE~~. Quality Assurance Manager for Behavioral Services;

The Deputy Director of Program reserves the right to include any NDOC staff member; contractor; and/or community partner to review information presented to the Program Review Committee.

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3. All proposed Core Programs and Best Practice optional-P programs will be submitted to the Program Review Committee using Form 2060 or 3501. All Evidence--based program proposals must also include DOC Form 2061.

A. Wardens or Associate Wardens may submit requests to the Program Review Committee for consideration of a Core Program specific to their facility. Prior to any program being implemented at a facility, the A-W wardens must review and approve the program proposals (DOC 2060)-specific to their facilities prior to formal submission to the Program Review Committee. These program proposals will be subject to final approval by the Deputy Director of Programs, after they have been vetted by the Program Review Committee.

B. The Program Review Committee will identify programs that have been approved for use by NDOC facilities.

C. Inmates will not teach or facilitate any correctional programs or classes approved for meritorious credit.

A-D. The Program Committee provides recommendations to the Deputy Director of Programs, who has the authority to deny or approval NDOC Programs, under the authority of the Director.

4. New Core Programs and Best Practice -Optional-Programs -shall undergo a pilot period of a minimum of 90--days at an NDOC facility, approved by the Deputy Director of Programs, to test new interventions, modalities and processes before the program is introduced system-wide.

5. Core Programs shall ~~outd~~ have program and participant manuals, established schedules, and attendance requirements, program goals and program audit instrument. Staff conducting the program will adhere to the requirements of the program. Any requests for exceptions are to be

submitted to the Program Review Committee. Exceptions may be granted on a case-by-case basis depending on the degree of variance requested and the reason for the variance, see DOC 2060 or DOC 3501.

6. The recommendation for the introduction of a Core Program will include the target group that the Core Program is designed to assist.

7. The recommendation for the implementation of Core Program will include the identification of which staff will provide the program/class, the resources needed to implement the program (fiscal and institutional), which includes, but is not limited to: training, the cost for materials, qualifications of trainer, facility space, impact on correctional facilities and staff, as well as the identification of the funding source.

~~**A. INMATES WILL NOT TEACH OR FACILITATE ANY CORRECTIONAL PROGRAM/CLASSES APPROVED FOR MERITORIOUS CREDITS.**~~

~~108. B-~~ Core Programs will be conducted only by qualified facilitators. The qualification for the staff series/level that will serve as facilitators for any Core Program will be determined by the Program Review Committee. For example; a teacher, vocational instructor or group facilitator will have the appropriate credential and/or training.

~~119. C-~~ Core Programs ~~will may~~ be evaluated every three--years by qualified individuals, and the results will be reported to the Program Review Committee. The Quality Assurance Manager will develop the audit instrument that will be used to evaluate the program and will provide the results to the Deputy Director for Program and the Program Review Committee.

~~1026.~~ Meritorious credits will be issued to core programs, pursuant to statute.

11. Offender daily attendance shall be recorded in NOTIS by an NDOC staff person.

~~132. A-~~ Meritorious Credits will only be awarded ~~once~~ upon completion of each core program. This applies during the current incarceration and any subsequent incarceration under the same booking number.

~~1347.~~ -The satisfactory completion of a Core Program should be documented with the completion of DOC via DOC-3077; in NOTIS; and reported on the Parole Board Rreport.

~~1458.~~ An approved Merit Credit Program list will be established and revised as necessary to reflect the addition and removal of programs. See AR 803 for further details.

801.03 BEST PRACTICE - OPTIONAL PROGRAMS

1. Best Practice Program Optional Programs are classes or groups, taught by approved staff or volunteers, on topics that include, but are not limited to psycho-educational programs, life-skills programs and re-entry programs that have been vetted and recommended as a best practice as described and listed in this AR. Best Practice programs must be submitted with the supporting documentation -from one of the agencies listed in this AR.-

~~A. INMATES WILL NOT TEACH OR FACILITATE ANY CORRECTIONAL PROGRAM/CLASSES APPROVED FOR MERITORIOUS CREDITS.~~

2. Best Practice Programs will be taught by qualified and approved staff or volunteers.

3. Best Practice-Optional Pprograms/classes may be eligible for meritorious credits and successful completion of these programs will be reported on the Parole Board Report.

4. Best Practice programs will be vetted in the same manner as Core-Programs.

5. The determination as to whether a Best Practice Program is eligible for meritorious credit and how many credits will be awarded will be determined by the Program Review Committee.

6. New Best Practice Programs shall undergo a pilot period of a minimum of 90-days at an NDOC facility, approved by the Deputy Director of Programs, to test new interventions, modalities and processes before the program is introduced system-wide.

801.04 ACTIVITIES

1. Activities include but are not limited to, support groups, volunteer sponsored groups (i.e. Veterans, Pups on Parole, God Behind Bars, Alcoholics Anonymous etc.) and religious activities (excluding regular religious services or religious literature study groups).

2. Activities are not eligible for meritorious credits, but will be included in the Parole Report.

3. No inmate may teach or facilitate an activity without prior written approval of the Warden.

4. All activity proposals will be submitted on DOC 2060 for review and approval by the Warden, with final approval by the Deputy Director.

801.05 POSITIVE CORRECTIONAL MANAGEMENT PRACTICES

Positive correctional management practices are designed to increase inmate out-of-cell time in an effort to increase positive socialization. These practices can include work details on the tiers and yard, board games, interaction with clinicians, intermural sports such as basketball, recreation yard access in small groups and board games or access to library books. These practices do not need Program Review approval and data is not collected. These practices may include, but not limited to the following:

1. Behavior Modification Units will provide a **reintegration or step-down** process for inmates that have been housed in segregation units in an effort to review the inmate's ability to interact with staff and inmates in a socially acceptable manner.-

a) The stay in the behavior modification units will be a maximum of 30-days, and may be shorter depending on the inmate's positive, socially acceptable, disciplinary free conduct while in the Behavior Modification Unit (BMU).

b) Inmates in the BMU will be evaluated weekly by unit officer(s), supervisor(s) and caseworker(s). Mental health staff will interview the inmate while in the BMU to determine the inmate's need for counseling prior to release to a general population unit and or the community.

c) Social interaction will be encouraged during out-of-cell time with intermural sports, board games and library access.

2. Close Custody will receive a minimum of five (5) hours a day out-of-cell time, contingent on positive conduct. Allowable activities include exercising in small groups and/or being assigned to work details on the tier or exercise yard.

3. Administrative Segregation will receive between one (1) to three (3) hours of out-of-cell time, contingent on positive conduct. Inmate may be allowed to exercise in small groups and/or may be assigned to work details on the tier or exercise yard.

4. Medium Custody – will be allowed as much out-of-cell time that is consistent with staff resources, after the inmate has completed his/her Core, Best-Practice or Activity Programs each day. Socially acceptable activities and interaction with staff and inmates, whether in housing units or exercise yards is encouraged

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801.05 COMMUNITY VOLUNTEER PROGRAM OR ACTIVITY FACILITATORS

1. Community volunteer ~~f~~Facilitators must first be approved as Department Volunteers in accordance with the requirements of AR 802.
2. Community volunteers will submit Volunteer Program Proposals (DOC 3501) to the Warden. Upon approval by the Warden, the program will be reviewed by the Program Review Committee, with final approval by the Deputy Director of Programs.

801.06 MONTHLY PROGRAM ACTIVITY REPORTS

1. The Associate Warden over Programs will provide a Monthly Program Activity report (DOC 3524) to the Warden and Deputy Director Designee including, but not limited to, the number of participants and the number of completions year-to-date. Monthly Program Activity Reports will be submitted in accordance with the established time frame.

APPLICABILITY

1. This AR requires an Operational Procedure (OP) for each institution/facility governing program classes, substance abuse classes, and reentry.
2. This AR requires an audit.

REFERENCES:

ACA Standards 4-4377, 4-446~~5~~4 through 4-4471, 4-4474, 4-4481

James Dzurenda~~James G. Cox~~, Director

Date