Minnesota Correctional Facility-Red Wing

Administrative Separation Plan

Name (last, firs	t, midd	le)	OID	
Date and Time I				
	reatmei	nt Plan. Restrictive Proce	ning to your living unit. It does not tak edures can still be used with any accom	
Incentives				
Positive Behav	vior Int	terventions and Supp	oorts	
Interventions				
	Goal:	I will follow the Safety-ba assignments noted below	sed Separation Activity Schedule and any	modifications and
		I will safely participate in		
Date Assigned	Methods/Modifications			
•				
Click				
Click				
•				
Click				
Staff Signature		Date	Resident Signature Resident refused to sign	Date

Distribution: Resident, Resident's E-File