DEPARTMENT OF CORRECTIONS

Policy Number:	**203.220**
Title:	**Delegations**
Effective Date:	**9/24/24**

PURPOSE: To permit incarcerated adults/juvenile residents to leave facility grounds or jail under staff escort, provided that the proper authorization has been obtained.

APPLICABILITY: All facilities.

DEFINITIONS:
Deathbed visit – a private, supervised visit for incarcerated adults/juvenile residents, which takes place at a health care facility when a health care provider has determined that death is imminent for the incarcerated adult's/juvenile resident's immediate family member.

Delegation – used to record the temporary custody or location of an incarcerated adult/juvenile resident when removed from the incarcerated adult's/juvenile resident's designated facility, with the understanding that the incarcerated adult/juvenile resident is expected to return to the facility (for example, a funeral or deathbed visit, medical appointment, writ, etc.).

Funeral visit – a private, supervised visit for incarcerated adults/juvenile residents, which takes place at a public facility or grounds to provide the incarcerated adult/juvenile resident an opportunity to pay respects to the deceased immediate family member (for example, wakes, visitations, etc.).

Immediate family member – an incarcerated adult's/juvenile resident's legal spouse, child (birth, step and adopted), parent, or sibling (birth, step, adopted and half). For the purposes of this directive, if the facility can confirm and document that a special relationship existed between the incarcerated adult/juvenile resident and an extended family member, the facility may allow a delegation. (For example, a grandparent who may have been a surrogate parent to the incarcerated adult/juvenile resident or a grandchild for whom the incarcerated adult/juvenile resident may have been a surrogate parent may qualify as allowed exceptions.)

Levels 2 through 5 – facility custody levels as defined in custody classifications.

Staff – department employees; employees of firms under contract with the department; custody-trained representatives of community agencies; any professional or paraprofessional having access to incarcerated adults/juvenile residents for approved study, specialized services, representation, research, or data collection; and canines.

PROCEDURES:
Incarcerated adults and eligible juvenile residents may be permitted to leave facility grounds under staff/volunteer escort according to the following guidelines.

A. Delegations may be scheduled to:
   1. Transport incarcerated adults and eligible juvenile residents to other correctional facilities/programs (for example, hearings);

   2. Transport incarcerated adults/juvenile residents to court or other mandatory proceedings;

3. Allow incarcerated adults/juvenile residents to attend medical, dental, or mental health appointments outside the facility;

4. Allow incarcerated adults/juvenile residents to develop job or program potential and prepare for reentry into the community (for juvenile facilities and adult minimum-security units only, or with warden/designee approval);

5. Allow incarcerated adults/juvenile residents to participate in restorative justice/community partnership activities (for juvenile facilities and adult minimum-security units, or with warden/designee approval):

6. Transport incarcerated adults to meet mandated release conditions;

7. Allow for the immediate transfer or evacuation of incarcerated adults/juvenile residents for medical care beyond the resources available in the facility, as determined by the responsible health care provider, to a facility where such care is available (this includes 24-hour emergency medical, dental, and behavioral health services); and

8. Allow incarcerated adults/juvenile residents to attend one of the following:
   a) Deathbed visits when approved. Deathbed visits may be approved for juvenile residents and for incarcerated adults residing within a minimum-custody program or medium-custody facility unless an exception is approved by the facility warden (for the purposes of this policy, MCF-Shakopee is considered a medium custody facility). Deathbed visits are allowed:
      (1) Only at a health care facility;
      (2) Only in private to an immediate family member and
      (3) Only when death is determined to be imminent by a health care provider.

   b) Funeral visits. Funeral visits may be approved only for juvenile residents and for incarcerated adults housed in a minimum-custody program (unless an exception is approved by the facility warden). Funeral visits are allowed:
      (1) Only at a public facility prior to or after any public service;
      (2) Only upon an immediate family member's death; and
      (3) Only if the incarcerated adult/juvenile resident did not have a deathbed visit.

B. A delegation may be denied if the facility captain or warden/designee determines that the trip would threaten public safety, create substantial potential for escape, risk to the personal safety of the escorting officers or other persons, or any other security breach.

C. Delegations for health appointments, death bed/wake/funeral/cremation visits, developing job or program potential, and participating in restorative justice/community partnership activities must be restricted to travel within Minnesota.

D. For DOC incarcerated adults housed in a county jail, staff from the facility nearest the jail may conduct the transport for death bed/wake/funeral/cremation visits.

E. Incarcerated adults/juvenile residents who are not allowed deathbed or funeral visits must be offered the opportunity to communicate with family members through telephone calls, video

visits, videograms, recorded funeral services, or other electronic communications available, as approved by the appointing authority.

1. For video visits and videograms, see Policy 302.022, "Incarcerated Person/Resident Kiosk Services."

2. For recorded funeral services, see Policy, 302.300, "Spiritual Care."

F. The incarcerated adult's/juvenile resident's caseworker, health services staff, records staff, or watch commander, as appropriate, must originate and complete a department Delegation Authorization form (attached) and attach any additional necessary documentation.

G. The captain or designee must review and approve or deny the Delegation Authorization form and additional documentation.

1. In the event of a writ/order for transport, the captain or designee must ensure that records staff have verified and signed the Delegation Authorization form indicating authenticity of the court order.

2. An original document, with a raised seal, may also be accepted, but is not required if records staff have verified and signed the Delegation Authorization form.

H. If approved, the originator of the Delegation Authorization form must ensure that the transportation arrangements are completed.

I. Transportation security

1. Transporting staff must have the Delegation Authorization form, three copies of the incarcerated adult's/juvenile resident's picture identification (printed or digital), and any additional documentation to be taken on the delegation.

2. Level 2 incarcerated adults are not required to be transported in restraints, but restraints must be available for use at the discretion of the transport staff. If a higher level of custody incarcerated adult is being transported along with a Level 2 incarcerated adult, full restraints must be required for all incarcerated adults.

3. All incarcerated adults housed in Level 3, 4 and 5 facilities (including unclassified incarcerated adults such as new intakes or those on interim orders of commit) must wear an orange jumpsuit with "DOC" on the back and must be transported for delegations in handcuffs, waist chains with padlocks, security boxes, and leg irons; and in caged vehicles.

4. For incarcerated adults housed in Level 4 and 5 facilities, armed supervision may be necessary to protect the public and/or staff and prevent or deter escape. Facilities must not provide armed escort during off-grounds trips.
   a) If an armed escort is deemed necessary, local law enforcement must be used to provide armed escort along with department transportation staff.
   b) If law enforcement escort is not possible, an unarmed chase vehicle may be used.
   c) Local law enforcement at the delegation destination must also be requested to provide security during an arrival.

5. Transportation of pregnant incarcerated adults is outlined in Policies 301.081, "Response to Resistance, Restraint Systems, and Escape;" 301.095, "Central Transportation – Offenders;" and 301.096, "Medical Transportation."

6. Transportation security and use of restraint for juvenile residents is outlined in Operating Guideline 203.220RW, "Delegations."

7. Only facility-approved vehicles (including vehicles for medical transport) may be used to transport incarcerated adults/juvenile residents.

8. Transportation staff must search each incarcerated adult/juvenile resident and the vehicle before leaving and upon return to the facility. Facility search procedures must be followed when conducting searches.

9. Only staff-authorized communication or contact is allowed between the incarcerated adult/juvenile resident and the public.

10. Staff must inspect and approve all equipment/medical supplies/property and security arrangements for the incarcerated adult/juvenile resident throughout the delegation.

11. Any necessary rest stops must be conducted in an inconspicuous manner. Staff must position themselves between the incarcerated adult/juvenile resident and the obvious exits and must keep the incarcerated adult/juvenile resident in view at all times. This includes the use of the restroom.

12. Staff are authorized to abort any delegation that they suspect, or have reason to believe, could result in the loss of control of the incarcerated adult/juvenile resident or an escape attempt. This includes poor weather conditions. Staff must contact the facility watch commander as soon as possible in these situations.

13. When staff must bring an incarcerated adult/juvenile resident to another mode of transportation, staff must remain at that location until the incarcerated adult/juvenile resident departs.

J. The escorting staff must ensure that the Delegation Authorization form is completed and signed by the staff accepting custody when transferring an incarcerated adult/juvenile resident to another authority (county jail, police officer, correctional facility, agent, etc.)

K. Inpatient incarcerated persons

1. There must be a minimum of one staff person per incarcerated person. An additional staff person equipped with a radio or cell phone must be available to help or relieve the other staff person. One officer must be of the same sex as the incarcerated person to ensure security coverage when the incarcerated person uses the restroom or shower.

2. Officers providing coverage must maintain constant visual contact with the incarcerated person. This includes maintaining visual contact when the incarcerated person uses the restroom, shower, or any other area. Officers must be present when hospital staff are in the room with the incarcerated person. Officers must be discreet, however, while maintaining control.

3. Inpatient incarcerated persons who, due to medical procedures, require the removal of all restraints, must be supervised by two officers during such procedures.

4. If the incarcerated person has been transported to the medical facility in clothing other than an orange jumpsuit, the incarcerated person's clothing and personal property must be bagged, labeled, and secured in the department medical holding area and returned to the sending facility.

5. Officers must secure the incarcerated person to the hospital bed with at least one set of restraints. Two sets of restraints are used when the incarcerated person is considered high risk. Officers should consider alternative restraining options that maintain security and allow hospital staff to complete their medical care (for example, if the incarcerated person has a medical condition that does not allow the incarcerated person's legs to be restrained, the incarcerated person's arm is secured to the bed frame). To permit some mobility, a waist chain may be padlocked to the bed frame and attached to a leg iron, which is secured to the incarcerated person. For pregnant incarcerated adults, restraint use is outlined in Policy 301.081, "Response to Resistance,Use of Force and Restraints Systems, and Escape – Adult."

6. Officers must maintain a log on all incarcerated persons. Security details in the log must include the names of all officers supervising the incarcerated person, all authorized visitors, any phone calls provided to the incarcerated person, and any unusual events impacting incarcerated person coverage. The log must reflect the transfer of custody and keys to officers providing break coverage.

7. Single staff coverage
A single officer of the same sex as the incarcerated person may be sufficient to provide necessary supervision of the incarcerated person under the following circumstances:
   a) For incarcerated persons classified as minimum custody and incarcerated at a minimum custody facility (level two), the appointing authority/designee has discretion depending upon the incarcerated person's institution adjustment, recent behavior, and discipline record. **For the purposes of this section**, Minnesota Correctional Facility-Shakopee (MCF-SHK) is designated a level two facility and all MCF-SHK incarcerated persons fall under this classification.

   b) When the medical professionals and corrections appointing authority determine that an incarcerated person's medical condition has rendered the incarcerated person incapable of physically escaping from custody or otherwise being a threat to security operations.

   c) When single staff coverage has been deemed sufficient, the officer may briefly leave an incarcerated person unsupervised to use a restroom, consult in private with nurse, etc. Restraints must remain on for brief, close proximity absences. If the officer leaves for a break, restraints are removed to allow for potential medical emergencies while absent. Restraints are reapplied upon the officer's return from break. For pregnant incarcerated adults, restraint use is outlined in Policy 301.081, "Response to Resistance,Use of Force and Restraints Systems, and Escape – Adult."

8. Phone calls
   a) If an incarcerated person is hospitalized for an extended period of time (ten days or more) and is physically and mentally able, the incarcerated person is permitted a single, ten-minute telephone call. Phone calls are restricted to the emergency

contact or immediate family members as listed on the incarcerated person's approved visiting list or in COMS.

b) All telephone call requests are reviewed on a case-by-case basis by the facility watch commander, who consults with other DOC staff (such as: health care providers, the office of special investigations, and/or the facility captain or officer of the day) as needed before approving the phone call. The watch commander may deny a telephone call if there is reason to believe the call may jeopardize security.

c) In the event that the incarcerated person must undergo a life-threatening surgery or has a terminal prognosis, the facility watch commander may authorize a telephone call may prior to the completion of the ten days of hospitalization.

d) In emergency situations, the watch commander, captain, or officer of the day (OD) is authorized to make an exception and authorize telephone calls at any point in the hospital stay.

e) If the hospitalization extends beyond the ten days, the watch commander evaluates the need for additional telephone calls on a case-by-case basis, taking the incarcerated person's medical needs into consideration.

f) Officers must monitor the start and end of each telephone call and remain within listening distance during the call. Telephone calls must be logged, including the telephone number, the name of the person called, the start and end times of the call, and any other pertinent information. Officers must terminate any telephone call that, in the officer's judgment, jeopardizes security.

g) The telephone number must be dialed by the facility switchboard and transferred to the hospital room telephone, or the officer may dial the number if the medical facility is unable to provide this service.

8. The incarcerated person is allowed to write and receive mail while admitted in the hospital. Sending facilities must monitor the mail during the incarcerated person's stay in the hospital. The mail is processed via escorting officers through the sending facility.

L. Emergency procedures

1. Escapes, attempted escapes, or disorderly conduct may occur during delegations. Staff must take the following actions during these circumstances.

a) If an incarcerated adult attempts to escape, staff must comply with the procedures outlined in Policy 301.081, "Response to Resistance, Restraint Systems, and Escape," and call law enforcement for assistance.

b) If a juvenile resident attempts to escape, staff must comply with Policy 301.079, "Juvenile Response to Resistance and Restrictive Procedures," and call law enforcement for assistance.

c) Staff must immediately notify the facility via radio or cellular phone of any attempt to escape.

d) If an escape occurs, staff must immediately notify the following by radio or cellular phone:
   (1) 911;
   (2) Statewide emergency radio band; and
   (3) The facility watch commander.

2. In the event of a vehicle breakdown, accident, weather emergency or medical emergency, staff must:
   a) Notify the facility watch commander;
   b) Notify statewide emergency radio band and law enforcement, when appropriate;
   c) Administer first aid or seek medical attention at the nearest hospital when indicated; and
   d) Complete a Minnesota Motor Vehicle Crash Report (attached), if appropriate.

M. The Intake Incarcerated Person Log must be updated for both departing and arriving incarcerated adults. The Daily Population Review and the Watch Commander's Log must be updated for both departing and arriving juvenile residents. In addition, COMS entries must be made for both departing and arriving incarcerated adults/juvenile residents.

INTERNAL CONTROLS:

A. All delegation forms are reviewed and approved by the captain/designee before the incarcerated adult/juvenile resident leaves the facility.

B. The Intake Incarcerated Person Log is maintained for both departing and arriving incarcerated adults. The Daily Population Review and the Watch Commander's Log must be updated for both departing and arriving juvenile residents.

C. COMS entries are made for both departing and arriving incarcerated adults/juvenile residents.

REFERENCES: Minn. Stat. §§ 241.01, subd. 3a(b); 241.07; and 244.07.
Policy 301.079, "Juvenile Response to Resistance and Restrictive Procedures"
Policy 301.081, "Response to Resistance, Restraint Systems, and Escape"
Policy 301.095, "Central Transportation"
Policy 301.096, "Medical Transportation"
Policy 203.120, "Writs and Orders of Transportation"
Policy 302.022, "Incarcerated Person/Resident Kiosk Services"
Policy, 302.300, "Spiritual Care"
Policy 300.050, "Facility Count Reporting"
Policy 302.210, "Incarcerated Person Telephone Use"
Policy 500.010, "Health Services"
Policy 500.012, "Incarcerated Person Emergency Health Care"
Policy 500.180, "Medical Transfer Process"
Operating Guideline 203.220RW, "Delegations"

REPLACES: Policy 203.220, "Delegations," 4/23/21.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: Delegation Authorization form (203.220A)

Minnesota Motor Vehicle Crash Report (external Department of Public Safety form)

APPROVED BY:
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