DEPARTMENT OF CORRECTIONS

Policy Number:	**107.040**
Title:	**Fugitive Apprehension and Custody of Release Violators**
Effective Date:	**4/21/20**

PURPOSE: To provide procedures for placement and notifications on department-warranted fugitives and alleged release violators apprehended by the office of special investigations (OSI) - fugitive apprehension unit members (FAUMs) or local law enforcement.

APPLICABILITY: Minnesota Department of Corrections (DOC); FAUMs, warrants unit, transportation unit, adult correctional facility staff, field services staff, and DOC medical and mental health staff.

DEFINITIONS:

Admitted care – when a practitioner officially admits a watch custody offender to the hospital and does not clear the release violator to leave due to medical concerns.

Appropriate facility – Minnesota Correctional Facility - Oak Park Heights (MCF-OPH) if an adult male offender (or another adult male facility as deemed appropriate by health care and facility administrative staff if MCF-OPH transitional care unit (TCU) and/or mental health unit (MHU) is not appropriate), MCF - Shakopee (SHK) if an adult female offender, or MCF - Red Wing (RW) if a juvenile offender.

Extended care – a transfer to a hospital of the department's choosing and at the department's direction subsequent to an admission to a different hospital.

Fugitive – an offender/resident with an active MN DOC warrant who has not been arrested or is left in a location not being watched by law enforcement or MN DOC staff.

Health care – physical or mental health care.

Short term care – less than 8 hours (e.g., a short emergency room visit).

Watch custody offender/resident – an offender/resident who has been arrested or is listed in COMS under a delegation to a specific facility and is being watched by law enforcement or MN DOC staff.

PROCEDURES:

A. OSI FAUMs place an apprehended offender in a local jail and notify the department warrants unit during business hours.

B. If an offender/resident arrested by OSI FAUMs expresses a need for health care or appears to have a need for health care, the OSI FAUM must decide if emergency care is needed.

1. If the OSI FAUM determines that emergency health care is needed, the FAUM dials 911 to summon an ambulance or contacts dispatch via their radio. Once on the scene, the ambulance personnel assess the degree of health care required for the offender/resident.

2. If the ambulance personnel determine a need for immediate or emergency health care, they transport the offender/resident to the medical facility they determine. An OSI FAUM rides in the ambulance since the offender/resident is in custody at this time.
   a) An OSI FAUM must contact warrants to place the offender/resident on apprehension status in the correctional operations management system (COMS).

   b) An OSI FAUM must contact the OSI deputy director/designee to provide information about the hospitalized in-custody offender/resident.
      (1) The OSI deputy director/designee begins to communicate with the hearings and release unit (HRU) supervisor/designee to determine hearing eligibility or possible restructure.
      (2) If custody will be continued, the OSI deputy director/designee begins communication with the appropriate Minnesota Correctional Facility (MCF) to establish security staff for the offender/resident.

   b) If the offender is an adult male, the OSI deputy director/designee contacts the watch commander at MCF-OPH to make arrangements for staff to maintain the custody and care of the offender while at the hospital. Staff coverage must be put in place within a reasonable amount of time if the offender is admitted. MCF-OPH initiates current staff hospital coverage rotation and procedures (MCFs-OPH, STW, LL) and places the offender on the official MCF-OPH count on delegation status in order to ensure payment under the current health care contract. If the offender is in a hospital outside of the metro area, the MCF-OPH watch commander must contact the facility closest to the hospital to provide staff for hospital coverage. In this case, the offender is added to the count of the facility providing the hospital coverage. Facility staff are responsible for secure transportation of the offender from a hospital to the local jail or to a Minnesota DOC designated facility upon release.

   c) If the offender is an adult female, the OSI deputy director/designee contacts the watch commander at MCF-SHK to make arrangements for staff to maintain the custody and care of the offender while at the hospital. The offender must be placed on the official MCF-SHK count on delegation status in order to ensure payment under the current health care contract. Facility staff are responsible for secure offender transportation from the hospital to a local jail or Minnesota DOC designated facility upon release.

   d) If the apprehended person is a juvenile, the OSI deputy director/designee contacts the watch commander at MCF-RW to make arrangements for staff to maintain the custody and care of the resident while at the hospital. The resident must be placed on the official MCF-RW count on special duty status in order to ensure payment under the current health care contract. Facility staff are responsible for secure juvenile male resident transportation from a hospital to the local jail or a Minnesota DOC designated facility upon release, or must immediately notify the responsible facility in the case of a female juvenile.

3. OSI FAUMS are not responsible for admitted-care offenders/residents unless directed by the OSI deputy director/designee due to unforeseen circumstances.

4. The notified watch commander must notify the appropriate nursing staff or on-call health services designee regarding the hospital admission.

5. If an offender is intoxicated and the county jail refuses to take custody, the FAUM must contact the assistant director-investigations and arrangements are made to transfer the offender to a Minnesota DOC designated facility.

6. The notified nursing staff must notify the department health care contractor of an offender's/resident's hospital admission within 12 hours of the nursing staff notification.

7. The OSI FAUM notifies the warrants unit at (651) 361-7189 and if the apprehension is after business hours, MCF-OPH staff must also be notified of the apprehension, location and status of the offender/resident.

8. The warrants staff notify, during regular business hours, the supervising agent in regard to the apprehension and location of the offender/resident.

9. Facility staff assigned to provide hospital coverage must, at all times possible, have in possession a hard copy (faxed) of the active department warrant. This warrant must be passed on from shift to shift while the offender/resident is in the hospital and must be presented if the offender is transported to a county jail. If the offender needs to be transported from the hospital to a county jail prior to warrants staff returning to duty and providing the warrant, the transporting officers must request MCF-OPH to send a teletype message to the receiving jail to notify of the incoming fugitive. NCIC entry may also be used by the receiving jail, upon their running a warrants check and MCF-OPH warrant confirmation.

10. If an offender is released from the hospital during, the staff providing coverage transport the offender to the appropriate local county jail. Previous to the transport, the transporting officers must notify the warrants unit of the discharge so that the warrants unit can notify the receiving local county jail of the transport. Transporting officers must also notify the watch commander at the appropriate facility of the release and transport. The watch commander must then take steps to notify Minnesota DOC departments related to the release of the watch custody offender to the jail facility.

11. If an offender is transported to a Minnesota DOC facility for health care prior to a revocation hearing, the watch commander must notify the director of health care services. Once health care is no longer needed, the offender is then transported back to the appropriate county jail and is considered available for a revocation hearing. Health care staff must contact the warrants unit to make transportation arrangements back to the county jail.

12. If a decision has been made to not return the offender to the county jail and no revocation hearing has taken place, but a determination has been made to transfer the offender out of the transitional care unit (TCU) or the mental health unit (MHU), health services administration must contact the warrants unit to notify of the status change. The watch commander and the transfer coordinator make custody level and transportation changes.

13. For offender transport procedures, refer to Policy 301.095, "Central Transportation - Offenders" and/or Policy 301.096, "Medical Transportation."

C. If the offender/resident is arrested by an outside law enforcement agency and this outside law enforcement agency transports the offender/resident to a hospital, it is anticipated they will notify the warrants unit during business hours, or MCF-OPH after business hours, for warrant confirmation and then the custody and care process is initiated.

1. If the outside law enforcement agency relinquishes custody before the watch custody offender/resident is medically discharged, the warrants unit (or MCF-OPH, after business hours) notifies the MCF-OPH watch commander to make arrangements for appropriate facility staff to maintain custody and care of the offender/resident while at the hospital. If the offender/resident is apprehended by local law enforcement after business hours, the MCF-OPH watch commander notifies the warrants unit via email of the offender's/resident's changed status.

   a) The MCF-OPH watch commander, prior to assigning staff for coverage, must contact the HRU supervisor/designee to confirm whether the watch custody offender/resident needs to remain in-custody or if a restructure is possible due to HRU guidelines.

   b) The MCF-OPH watch commander must e-mail the OSI fugitive unit on-call designee, HRU designee, and MCU/TCU designee if the offender is to remain in-custody and tracked in COMS as an MN DOC offender.

   c) If the watch custody offender is a female, the MCF-OPH watch commander must contact MCF-SHK watch commander to make arrangements for facility staff to maintain custody.

   d) If the watch custody subject is a juvenile resident, the MCF-OPH watch commander must contact the MCF-RW watch commander to make arrangements for facility staff to maintain custody.

2. If facility staff are assigned/arrived to secure a watch custody offender/resident, the acting watch commander who sent the staff to a hospital should e-mail the OSI designated on-call supervisor, HRU executive officer, or designee staff, and medical on-call/designated staff.

INTERNAL CONTROLS:

A. Warrant information is retained in the NCIC and CJIS systems.

ACA STANDARDS: None

REFERENCES: Minn. Stat. § 241.01
Policy 301.095, "Central Transportation – Offenders"
Policy 301.096, "Medical Transportation."

REPLACES: Policy 107.040, "Fugitive Apprehension and Custody of Release Violators," 3/31/15.
All department facility policies, memos or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: OSI On-Call Information (external link)
HRU On-Call Information (external link)

/

APPROVALS:

Deputy Commissioner, Community Services
Deputy Commissioner, Facility Services
Assistant Commissioner, Operations Support
Assistant Commissioner, Strategic Planning, Implementation, and Employee Development