DEPARTMENT OF CORRECTIONS

Policy Number:	**205.123**
Title:	**Healthy Start Placement for Pregnant and Post-Partum Persons**
Effective Date:	**12/28/22**

PURPOSE: To advance both the public interest and community safety, the commissioner of corrections may conditionally release pregnant or post-partum incarcerated persons to community-based programming for the purpose of participation in prenatal or postnatal care programming and to promote mother-child bonding.

APPLICABILITY: Only those incarcerated persons who are pregnant or have given birth within eight months of the date of commitment; and for the duration of the pregnancy and up to one year post-partum.

DEFINITIONS:

Healthy Start review team – a multi-disciplinary team reviewing candidates for healthy start placement including designated staff from the following department of corrections (DOC) business units or roles: release planning, field services supervision, reentry services, parenting coordinator, assigned caseworker, victim services, and reentry director.

Healthy Start release team – a multi-disciplinary team engaging in pre- and post-release planning and community reviews including the participant and designated staff from the following DOC business units or roles: release planning, field services supervision, reentry services, parenting coordinator, assigned caseworker, tribal affairs, victim services, and, if housing support is needed, a member of the community stability team. This team also includes the presumed supervision agent of record and various community-service providers and support persons, as necessary.

Required Programming – includes such examples as evidence-based parenting skills programming, working at paid employment, seeking employment or making employment plans, participating in vocational training or educational programs, engaging in substance use disorder and/or mental health treatment services, and other medical or community supportive needs for participants and their infants.

PROCEDURES:

A. Healthy Start conditional release placement decisions must prioritize the health of the baby and mother and are guided by principles of child development, attachment theory, equity, risk reduction, and public safety.

B. Eligibility Screening

1. Upon intake, health services staff must determine pregnancy status and ask all individuals if they have given birth within twelve months of commitment. Health services staff must notify the facility parenting coordinator or designee of pregnancy or post-partum status.

2. The parenting coordinator verifies birth and parenting plans for potential inclusion into Healthy Start, for which there is a presumption of eligibility if the following criteria are met:

   a) The candidate is:

      (1) pregnant; or

      (2) up to eight months post-partum;

   b) The candidate will reach their supervised release date:

(1) While pregnant;
(2) Up to one-year post-partum; or
(3) In conjunction with participation in other conditional release programs for which the candidate is eligible;

c) Termination of parental rights has not occurred, or is not imminent, for the child in question; and

d) The candidate does not have a current sentence from a federal jurisdiction or from a state other than Minnesota.

4. People returned to prison following revocation from supervised release are eligible if they meet the above criteria.

5. For individuals who do not meet the above criteria, the parenting coordinator must review situations where placement on Healthy Start is vital for the infant's health and development (such as needs while residing in a neonatal intensive care unit) and make recommendations for exceptions to the Healthy Start review team. These exceptions must be based primarily on what is in the best interest of the infant given their health and prioritize physiological benefits for the infant over attachment concerns, so long as public safety can be managed appropriately.

6. If the candidate meets the above criteria, is serving a sentence controlled by Minn. Stat. § 169A.276, subd. 1(c), and has not yet completed chemical dependency treatment as required by statute, department staff must work to create treatment opportunities to meet the statutory requirements to permit an otherwise eligible candidate to move forward with Healthy Start.

7. The parenting coordinator notifies candidates of eligibility.
   a) The parenting coordinator or designee documents if someone is ineligible and is screened out.

   b) Those who are screened in as eligible meet with the parenting coordinator.

   c) If a candidate declines Healthy Start, it must be noted in case notes, and on the Healthy Start Declination form (attached).

   d) Candidates must complete a Healthy Start Information Packet (attached) to be provided to the Healthy Start review team for review. This includes:
      (1) A release of information to share pregnancy and childbirth information with the Healthy Start review and release teams.
      (2) A self-assessment of strengths and barriers to provide foundational information regarding their needs and a listing of any potential release residential address options and opportunities.

C. <u>Candidate Public Safety Review and Decision</u>

1. The parenting coordinator provides the information packet to the Healthy Start review team.

2. Expedited screening and planning services may be necessary for persons in the latter part of their pregnancy and for post-partum candidates.

3. Within two weeks of the eligibility screening, each team member reviews candidates and their information packets to provide individual recommendations delineating public safety or victim concerns and any program or intervention recommendations for release planning purposes.

4. The director of reentry services is the commissioner of corrections' designee for Healthy Start and reviews these recommendations for healthy start placement decisions. In deciding whether to place someone on Healthy Start, the department must consider whether a placement meets public interest and community safety. The director of reentry services must consult with the commissioner of corrections prior to making any placement decisions.

5. Eligible Healthy Start placement requests should be approved unless it is determined, based on the factors listed below, that such placement poses a public safety risk. The commissioner must consider:
   a) History of criminal activity demonstrating safety concerns for the specific child in question;
   b) Programming and treatment needs that are severe enough to require completion prior to release and that the programming or treatment must be provided in a Minnesota correctional facility; and
   c) Any other individualized factors deemed relevant by the commissioner.

6. The director of reentry's determination must be shared with the review team, documented in a letter, including a statement of reasons if denied, sent to the applicant, and saved in the case files and retained in ODocS.

7. For persons who refuse or are denied participation:
   a) Supplemental reviews must occur when there is a material change in the health of the individual, in the health of the fetus or baby, or in other caregiving circumstances supporting the need for Healthy Start placement.
   b) The parenting coordinator must share the need for supplemental review and related new information with the Healthy Start review team for consideration.

D. <u>Release Planning</u>

1. Once participation is approved and confirmed with the participant, the Healthy Start review team is expanded to include community-based service providers and other support persons, becoming the Healthy Start release team. Additional releases of information must be completed to inform additional team members, as needed.

2. A pre-release meeting must be held as soon as possible after the person is approved to create a Healthy Start plan, identify Healthy Start Participant Agreement ("program agreement") requirements, and address release needs. This includes such examples as:
   a) Initial program review team recommendations;
   b) Residence options;
   c) Supervision requirements and conditions of release;
   d) Required programming;
   e) Birthing or childcare plans and arrangements;
   f) Planning and support to clear any outstanding detainers or warrants prior to participation;
   g) Health insurance and public assistance benefits applications;
   h) Personal identification needs; and

i) A completed program agreement outlining agreed-upon requirements signed by the participant.

3. The caseworker then creates the release plans per standard DOC policies.

E. Community Release and Participation Requirements

1. Participants must follow all conditions of release and program agreement requirements.

2. The Healthy Start release team meets at least quarterly with participants to review and amend program agreement requirements and goal completions. The community navigator or parenting coordinator schedules these meetings in coordination with the supervision agent. A DOC Healthy Start release team member enters brief records of these release team meetings into COMS.

F. Completion and Termination

1. Participants who reach their confinement release date while on Healthy Start, or those who transition to other release programs while in the community, are considered to have completed the Healthy Start program.
   a) The parenting coordinator enters the program completion into COMS.

   b) The agent of record provides the hearing and release unit with a non-violation restructure to supervised release or to another conditional release program.

   c) Healthy Start resources and services may continue to be offered to the participant for up to six months after program completion.

2. The commissioner or designee may rescind a participant's conditional release status at any time if new information is discovered that makes the participant ineligible. Such information includes pregnancy termination or miscarriage. Healthy Start conditional release status will be rescinded once the statutorily authorized conditional release period ends.

3. Participants who violate any of the rules of their supervision, including lack of participation in the required programming as outlined in the program agreement, are subject to:
   a) Having the rules of their supervision restructured and additional rules imposed; and

   b) Revocation of their Healthy Start status and return to institution confinement status.

INTERNAL CONTROLS:

A. Healthy Start information packet, declination form, signed Healthy Start approval or denial letter, program agreement, conditions of release, and termination reports are retained in the participant's electronic file.

B. Healthy start review team individual member recommendations are retained by the parenting coordinator's office.

C. Case notes, Healthy Start review/release team reports, program review team (PRT) reports, custody status, and sentence administration are recorded and retained in ODocS.

D. Healthy Start release team meeting notes are retained in COMS.

E. Healthy Start completions are retained in COMS.

REFERENCES: Minn. Stat. § 244.065; Minn. Stat. §§ 169A.276, Subd. 1 (c)
Policy 203.010, "Case Management Process"
Policy 203.018, "Agent Assignment and Release Planning"

REPLACES: All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: Healthy Start Declination Form (205.123A)
Healthy Start Information Packet (205.123B)
Healthy Start Participant Agreement Form (205.123C)

APPROVALS:
Deputy Commissioner, Reintegration and Restorative Services
Deputy Commissioner, Facility Safety and Security
Assistant Commissioner, Organizational and Regulatory Services
Assistant Commissioner, Chief of Staff
Assistant Commissioner, Health, Recovery, and Programming