



U.S. Department of Justice
Federal Bureau of Prisons

PROGRAM STATEMENT

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Escorted Trips

/s/

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Director, Federal Bureau of Prisons

1. PURPOSE AND SCOPE

§570.40 Purpose and scope.

The Bureau of Prisons provides approved inmates with staff-escorted trips into the community for such purposes as receiving medical treatment not otherwise available, for visiting a critically-ill member of the inmate's immediate family, or for participating in program or work-related functions.

This Program Statement establishes procedures to be followed when considering an inmate for an escorted trip and details the:

- Guidelines for selecting escort staff.
- Responsibilities of escort staff.
- Instructions for using restraint equipment, including the Electronic Custody Control Belt, for MAXIMUM custody inmates.

Escorted trips fall into two categories, medical and non-medical. The need or reason for an escorted trip may arise unexpectedly (e.g., to visit a critically ill family member) or may be planned in advance (e.g., to attend an educational function).

Federal regulations from 28 CFR are in this type.

Implementing instructions are in this type.

a. Summary of Changes

Policy Rescinded

P5538.05 Escorted Trips (10/06/2008)

- Adds language to allow only one transfer order to be completed by unit staff.
- Changes requirements for restraining pregnant inmates during escorted trips.

b. Program Objectives. The expected results of this program are:

- Escorted trips will be available for eligible inmates.
- Escorted trips will be supervised by the correct number and type of employee.
- Appropriate procedures, including those concerning restraint equipment, will be used during all escorted trips.
- The public will be protected from undue risk.
- Application of an Electronic Custody Control Belt will be authorized only:
 - For a MAXIMUM custody inmate who requires greater security than can be afforded through conventional restraints.
 - Where no medical condition precludes its use.
- An Electronic Custody Control Belt will be applied only to prevent escape or serious bodily harm and activated only for the purpose of controlling that inmate.
- Lieutenants who apply the Electronic Custody Control Belt or escort an inmate wearing an Electronic Custody Control Belt will be properly trained in its application, operation, effectiveness, and follow-up requirements.
- Every incident involving the activation of an Electronic Custody Control Belt will be properly reviewed, documented, and reported.
- Violations of escorted trips will be processed in accordance with regulations.

c. Pretrial/Holdover Procedures. Procedures in this Program Statement apply to pretrial and holdover inmates.

2. MEDICAL ESCORTED TRIPS

§570.41 Medical escorted trips.

a. Medical escorted trips are intended to provide an inmate with medical treatment not available within the institution. There are two types of medical escorted trips.

(1) *Emergency Medical Escorted Trip.* An escorted trip occurring as the result of an unexpected life-threatening medical situation requiring immediate medical treatment not available at the institution. The required treatment may be on either an in-patient or out-patient basis.

When the inmate's custody level is not readily available at the time of the emergency medical escorted trip, the inmate, for purposes of the escorted trip, is considered to have the highest custody level housed at the institution, or will be escorted at the Warden's discretion.

(2) *Non-Emergency Medical Escorted Trip.* A pre-planned escorted trip for the purpose of providing an inmate with medical treatment ordinarily not available at the institution. The required treatment may be on either an in-patient or out-patient basis.

In-patient. In-patient treatment occurs when the inmate is admitted to the outside medical facility for care that extends beyond the day of admission.

Out-patient. Ordinarily, treatment is considered out-patient when the inmate departs and returns to the institution on the same day (prior to midnight).

Emergency out-patient treatment may extend beyond midnight (e.g., left institution at 11:00 p.m. and returned at 3:00 a.m.).

b. The Clinical Director or designee is responsible for determining whether a medical escorted trip is appropriate.

See the Program Statement **Patient Care** for utilization review procedures.

c. *Escorted Trip Procedures – Out-Patient Medical Treatment.* A recommendation for an inmate to receive a medical escorted trip is prepared by medical staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden for review. The Warden may approve an inmate for an out-patient medical escorted trip.

Staff seeking approval complete an Escorted Trip Authorization (BP-A0502) and route it and the Inmate's Central File through:

- The Case Management Coordinator (CMC) for screening and clearance.

- The Special Investigative Supervisor/Special Investigative Agent (SIS/SIA), for identifying any Security Threat Group (STG)/management interest group, etc., information.
- The Captain for appropriate action.
- The Unit Manager and the appropriate Associate Warden for review and recommendation.

In making a determination, staff consider the inmate's suitability for the trip and the degree of supervision necessary.

(1) **Emergency Out-patient.** Approval for an emergency out-patient escorted trip during non-duty hours may be provided by the Administrative Duty Officer (ADO) or, if the ADO is not available, by the Lieutenant on duty.

In an emergency, the Shift Lieutenant may give approval verbally, with paperwork to follow. The approving official during non-duty hours must notify the Warden immediately.

(2) **Non-emergency Out-patient.** Ordinarily, approval for a non-emergency out-patient escorted trip is obtained during regular duty hours.

The ADO may approve during non-duty hours. Authority during non-duty hours may not be delegated below ADO level.

An inmate with OUT or COMMUNITY custody may be approved, at the Warden's discretion, for a furlough to obtain local medical treatment not otherwise available at the institution. See the Program Statement **Inmate Furloughs** for additional information.

(3) The Regional Director (or Regional Duty Officer if non-duty hours) must be notified of any medical escorted trip for a MAXIMUM custody inmate. See Section 4 of this Program Statement for additional information.

(4) **Only the Regional Director** may approve any deviation from MAXIMUM custody escort guidelines.

d. Escorted Trip Procedures – In-Patient Medical Treatment. A recommendation for an inmate to receive a medical escorted trip is prepared by medical staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. The Warden may approve an inmate for an in-patient medical escorted trip.

For non-emergency in-patient medical treatment, approval must be given prior to the inmate's transfer to a community medical facility using an Escorted Trip Authorization (BP-A0502).

(1) **Transfer to Medical Facility.** When treatment is expected to extend beyond the day of a transfer, the inmate is considered transferred to the medical facility for in-patient care. The Regional Health Systems Administrator (RHSA) must be notified, ordinarily by the institution Health Services Administrator (HSA).

For a non-emergency medical escorted trip, notification should be before the transfer has occurred. For an emergency medical escorted trip, notification may be after the transfer has occurred. In all cases, the HSA notifies the RHSA of the inmate's return to the institution.

(2) **Emergency In-patient.** The ADO may approve an emergency escorted trip for in-patient medical treatment during non-duty hours; if the ADO is not available, the Shift Lieutenant may approve it.

The approving official during non-duty hours notifies the Warden and, when applicable, the ADO, as soon as possible.

(3) **Non-emergency In-patient.** Approval for a non-emergency escorted trip for in-patient treatment may not be delegated below the level of Acting Warden (or ADO).

(4) **In-patient Admission.** If an escorted trip for medical purposes is expected to result in the inmate being admitted to a community medical facility for in-patient treatment, these procedures must be followed:

When applicable, the Captain (or, in the Captain's absence, the Lieutenant) contacts the contract guard service to arrange for custodial coverage.

Contract guard services **will not be used** with MAXIMUM custody inmates, as provided in Section 4. If the inmate is in pretrial status, the U.S. Marshals Service must be contacted to provide custodial coverage.

Correctional Systems staff produce the Transfer Receipt (BP-A0821) to establish an appropriate chain of custody. When Correctional Systems staff are not available, the Lieutenant prepares a temporary Transfer Receipt.

When the inmate returns, Correctional Systems staff complete the "Return of Service" section on the transfer order.

The Captain develops post orders and log book procedures for correctional officers and contract staff who provide coverage for inmates receiving in-patient care to follow.

The designated officers sign a statement that they understand the required procedures (Escort Instructions, BP-A0939).

Escort officers maintain the post orders and log book procedures during the community placement and return them to the institution upon completing the escorted medical trip. Contract guard services must meet the requirements in the post orders and log book procedures.

When medical treatment is expected to extend beyond one day, only the Warden may approve reduction in restraints below the minimum requirements. When restraints are reduced under these procedures, the escort OIC, as well as the Operations Lieutenant, document the Warden's approval in their official logs.

(5) **Regional Director Notification.** The Regional Director (or Regional Duty Officer during non-duty hours) is notified of any medical escorted trip for a MAXIMUM custody inmate. See Section 4 of this Program Statement for additional information. The Regional Director has approving authority for deviations from MAXIMUM custody escort guidelines.

(6) **Charging Overtime.** Only when an inmate is actually released from the institution can overtime for his/her security be charged to the outside medical cost center (B325). The inmate must be released for a visit to a medical consultant or a hospital visit under the SENTRY ARS category of "Local Hosp," or be released on transfer to a Medical Referral Center. These procedures are necessary for any case in which the inmate is released from the institution, even if only for a few hours. Institutions do not carry these temporary releases in out count status.

The correctional officer(s) receiving overtime pay must provide security for an inmate outside the institution while the inmate is transferred from the institution to the consultant or hospital, or while he/she is transported back to the institution. An officer may be allowed two hours of outside medical overtime to prepare for the detail.

Medical overtime may not be charged for security provided within the institution, except if a staff member on duty and assigned to an inside post is the only qualified, available person for the outside escort and must be replaced.

When overtime for a medical situation is credited to staff, a copy of the SENTRY report Inmate History Inquiry, indicating the inmate's name and number and the time the inmate was in the

release status of “Local Hosp,” or “Transfer” to a Medical Referral Center, is attached to the Time and Attendance sheet.

3. NON-MEDICAL ESCORTED TRIPS

§570.42 Non-medical escorted trips.

a. Non-medical escorted trips allow an inmate to leave the institution under staff escort for approved, non-medical reasons.

There are two types of non-medical escorted trips.

(1) *Emergency Non-Medical Escorted Trip.* An escorted trip for such purposes as allowing an inmate to attend the funeral of, or to make a bedside visit to, a member of an inmate’s immediate family. For purposes of this rule, immediate family refers to mother, father, brother, sister, spouse, children, step-parents, and foster parents.

(2) *Non-Emergency, Non-Medical Escorted Trip.* An escorted trip for such purposes as allowing inmates to participate in program-related functions, such as educational or religious activities, or in work-related functions.

b. *Escorted Trip Procedures – Emergency Non-Medical Reasons.* Unit staff are to investigate, and determine, the merits of an escorted trip following a review of the available information. This includes contacting those persons (e.g., attending physician, hospital staff, funeral home staff, family members, U.S. Probation Officer) who can contribute to a determination on whether an escorted trip should be approved.

(1) The government assumes the salary expenses of escort staff for the first eight hours of each day. All other expenses, including transportation costs, are assumed by the inmate, the inmate’s family, or other appropriate source approved by the Warden.

The necessary funds must be deposited to the inmate’s trust fund account prior to the trip. Funds paid by the inmate for purposes of the escorted trip are then drawn, payable to the Treasury of the United States. Unexpended funds are returned to the inmate’s trust fund account following the completion of the trip.

Unit staff, in consultation with the Business Office, determine the escorted trip's cost. The inmate completes a BP-199, Request for Withdrawal of Inmate's Personal Funds, payable to the U.S. Treasury in the amount of the expenses he/she is to pay.

(2) A request for an inmate to receive an emergency non-medical escorted trip is prepared by unit staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. Except as specified in §570.43, the Warden may approve an inmate for an emergency non-medical escorted trip.

§570.43 refers to Section 4 of this Program Statement.

Unit staff, after obtaining the required information, route the Escorted Trip Authorization (BP-A0502) and the Inmate Central File through the:

- CMC for screening and clearance.
- Captain for appropriate action.
- SIA/SIS for identifying any STG/management interest group, etc., information.
- Unit Manager and the Associate Warden for review and recommendation.

In making a determination, staff consider the inmate's suitability for the trip and the degree of supervision necessary.

The ADO may grant approval for an emergency non-medical escorted trip during non-duty hours. This authority may not be further delegated.

c. Escorted Trip Procedures - Non-Emergency, Non-Medical Reasons. This type of escorted trip is considered for an inmate who has been at the institution for at least 90 days, and who is considered eligible for less secure housing and for work details, under minimal supervision, outside the institution's perimeter.

A recommendation for an inmate to receive an escorted trip for non-emergency, non-medical reasons is prepared by the recommending staff, forwarded through the appropriate staff for screening and clearance, and then submitted to the Warden. Except as specified in §570.43, the Warden may approve an inmate for a non-emergency, non-medical escorted trip.

§570.43 refers to Section 4 of this Program Statement.

Ordinarily, escorted trips for emergency non-medical cases are available only to inmates with either OUT or COMMUNITY custody. The requesting department submits the Escorted Trip Authorization (BP-A0502). For the review procedure, see Section 4 of this Program Statement.

Specific arrangements for inmate town drivers may be established locally.

Approval for a non-emergency, non-medical escorted trip may not be delegated below the level of Acting Warden.

4. INMATES REQUIRING A HIGH DEGREE OF CONTROL AND SUPERVISION

§570.43 Inmates requiring a high degree of control and supervision.

Only the Regional Director may approve a non-medical escorted trip (either emergency or non-emergency) for an inmate determined to require a high degree of control and supervision.

The Regional Director's approval authority may not be delegated below the level of Acting Regional Director.

The phrase "a high degree of control and supervision" ordinarily refers to an inmate with MAXIMUM custody or HIGH security.

The Regional Director may approve escorted trips for emergency and non-emergency, non-medical reasons only upon receiving a favorable Warden's recommendation and his/her determination that the trip is warranted. In making this determination, all relevant information (e.g., inmate's sentence, time in custody, adjustment, and the nature of the request) must be considered. The Regional Director maintains a written record, including reasons, for regional approval.

The Regional Director's prior approval is not necessary for an inmate requiring a high degree of control and supervision to receive an emergency medical escorted trip. However, during non-duty hours, the Regional Director or Regional Duty Officer must be notified as soon as possible of any medical escorted trip for a MAXIMUM custody inmate.

5. SUPERVISION AND RESTRAINT REQUIREMENTS

§570.44 Supervision and restraint requirements.

Inmates under escort will be within the constant and immediate visual supervision of escorting staff at all times. Restraints may be applied to an inmate going on an escorted trip, after considering the purpose of the escorted trip and the degree of supervision required by the inmate.

Except for escorted trips for a medical emergency, an inmate going on an escorted trip must agree in writing to the conditions of the escorted trip (for example, agrees not to consume alcohol).

The escort Officer-in-Charge (OIC) may terminate an escorted trip (without contacting the institution) in circumstances where staff, the public, or the inmate is at risk of immediate serious injury or death, or the inmate is attempting to or has demonstrated the intent or means to escape.

Escort staff contact the institution (i.e., the Operations Lieutenant or Captain) for guidance prior to terminating all other escorted trips. Any escorted trip that is terminated (by supervisor's instructions or by the escort OIC's decision) requires a written justification by the staff member canceling it. The justification is reviewed to ensure compliance with policy, and to determine if further action is needed (training, alternative escort locations, procedure changes, etc).

When it is necessary for a staff member to use a restroom, additional restraints must be applied before he/she leaves the area; remaining staff continue constant visual supervision. Staff leave the area only to use the nearest restroom.

Institutions using escort staff with OUT or COMMUNITY custody inmates make prior arrangements to address the security and supervision of the inmate, if it is necessary for staff to use the restroom.

An escorted trip merely extends the limits of an inmate's confinement. Before an escorted trip, escort staff are given preparation time and are expected to read both this Program Statement and Chapter 7 of the Program Statement **Correctional Services Procedures Manual** and sign the Escort Instructions (BP-A0939). This form also establishes minimum requirements on using restraints.

All non-medical escorted trips, such as bedside visits and funeral trips, require the use, throughout the escorted trip, of at least the minimum restraints specified in the Escort Instructions. No exceptions will be made.

Except for medical emergency trips, the inmate must sign the Conditions of Escorted Trip (BP-A0938).

6. WITNESS SECURITY INMATES

Except for emergency medical escorted trips, prior authorization must be received from the Inmate Monitoring Section (IMS), Central Office, for a witness security inmate to go on an escorted trip.

In emergency medical situations, the inmate is transported to the nearest medical facility in accordance with local procedures.

During normal working hours, the IMS must be notified as soon as possible by telephone. After normal working hours, the IMS Duty Officer, located in the Central Office, will be notified. Direct questions about this section to the institution's CMC.

7. VIOLATION OF ESCORTED TRIP

§570.45 Violation of escorted trip.

a. Staff shall process as an escapee an inmate who absconds from an escorted trip.

b. Staff may take disciplinary action against an inmate who fails to comply with any of the conditions of the escorted trip.

8. SELECTION OF ESCORTS

The Captain, in consultation with the HSA, the Unit Manager, or others as appropriate, selects the number of escorting staff.

The Captain indicates, on the approval form, the specific staff member (ordinarily with the highest correctional services rank) who serves as Officer-In-Charge (OIC). Where staff are non-custody, the Captain indicates which staff member is the OIC. This person has decision-making authority and responsibility on the trip.

Depending on the inmate's custody and other conditions the Warden imposed, the requirements outlined below apply. The designated staff, weapons, and restraint requirements for an escorted trip remain in effect while the inmate is in in-patient status. This also applies to contract guard services.

For MAXIMUM custody inmates, any deviation from the requirements listed requires the Regional Director's prior approval.

Escorts who carry weapons must follow the requirements of Chapter 7, Firearms and Badges, of the Program Statement **Correctional Services Procedures Manual**. Restraint requirements must be per the Program Statement **Correctional Services Manual**.

Escort staff must be certified in Basic Prisoner Transportation (BPT) training.

An inmate who is pregnant, in labor, delivering her baby, or in post-delivery recuperation, or who is being transported or housed in an outside medical facility for treating labor symptoms, delivering her baby, or post-delivery recuperation, should not be placed in restraints unless there are reasonable grounds to believe the inmate presents an immediate, serious threat of hurting herself, staff, or others, or that she presents an immediate, credible risk of escape that cannot be reasonably contained through other methods.

In preparation for the escorted trip, the Clinical Director (or designee) makes restraint recommendations based on the inmate's medical condition and pregnancy status. The Captain makes recommendations based on security needs, and the Warden makes the final determination. Restraints should not be used during active labor and delivery without approval of the Clinical Director. In any case in which restraints are used, the type of restraints and factors supporting the decision should be documented in the Escorted Trip Authorization (BP-A0502).

During unusual medical or life-threatening circumstances, the Warden, after consulting with the Captain and the HSA, considers all factors concerning the type(s) of restraints that may be necessary to meet the security needs for the inmate. An example includes transporting inmates with fractured limbs or serious neck injuries. When similar factors are present, the Warden balances the inmate's security needs with his/her medical requirements.

The existence of unusual factors may cause the Warden or designee to:

- Not use all required restraints.
- Increase staff escorts.

- Consider authorizing the use of a weapon, wheelchair, soft or vinyl restraints, chase vehicle, etc.

If it is necessary to deviate from the norm, the Escorted Trip Authorization (BP-A0502), must reflect factors used to support the decision.

a. **MAXIMUM Custody.** Contract guard services may not be used.

(1) **Staffing.** A minimum of three staff escorts are required for each inmate, with one staff member holding the rank of at least GS-11 Lieutenant. In addition, there must be staff in a back-up car (follow vehicle). It is recommended that two staff occupy the back-up car.

The staff-inmate ratio is maintained regardless of the number of inmates supervised. At least one escort, in addition to the Lieutenant, must be a non-probationary staff member.

(2) **Weapons.** At least one staff escort must be armed. Staff in the follow vehicle must also be armed. It is recommended that staff carry three fully loaded magazines of ammunition with each weapon, in addition to the magazine in the weapon.

(3) **Restraints.** Handcuffs with the C&S handcuff cover, martin chains, padlock, and leg restraints are used at all times.

See above for considerations when escorting pregnant inmates.

(4) **Protective Vests.** Staff members escorting MAXIMUM custody inmates must wear protective vests (threat level III-A, at a minimum).

b. **IN Custody.** Contract guard services may be used for IN custody inmates who are MINIMUM or LOW security levels. Contract guard services are not used for MEDIUM and HIGH security inmates.

(1) **Staffing.** A minimum of two staff escorts is required for the first inmate, with one additional staff member required for each additional inmate. The Warden may require an additional number of escorts if he/she determines it is warranted. At least one staff escort must be non-probationary.

(2) **Weapons.** The Warden determines if escorting staff will be armed. If weapons are authorized, a minimum of two staff escort IN custody inmates, with at least one staff member armed.

(3) **Restraints.** Handcuffs with martin chains will be used at all times. Other restraint equipment may be used at the escorting officers' discretion. See above for considerations when escorting pregnant inmates.

(4) **Protective Vests.** Staff members involved in escorting IN custody inmates wear protective vests (threat level III-A at a minimum), when the escort requires weapons.

c. **OUT Custody.** Contract guard services may be used.

(1) **Staffing.** At least one staff member must be non-probationary. One staff member may escort a maximum of five OUT custody inmates.

(2) **Weapons.** No weapons are required.

(3) **Restraints.** Restraints may be used at the discretion of the escorting officer(s). See above for considerations when escorting pregnant inmates.

d. **COMMUNITY Custody.** Contract guard services may be used.

(1) **Staffing.** At least one staff member must be non-probationary. One staff member may escort a maximum of five COMMUNITY custody inmates.

(2) **Weapons.** No weapons are required.

(3) **Restraints.** No restraints are required.

e. **Other Considerations:**

- At least one staff member of the same sex as the inmate is assigned to escort inmates with IN, OUT, COMMUNITY, or MAXIMUM custody.
- Privately owned vehicles are not used for escorted trips.
- Inmate movement from institution to institution by means other than a bus (e.g., van movements), is conducted as outlined in this Program Statement. Staffing requirements for an escorted trip apply to inmate movements.

9. AUTHORIZATION FOR USING A CUSTODY CONTROL BELT

Electronic Custody Control Belts (e.g., REACT, Band-it) are approved for use with MAXIMUM custody inmates. Only the Warden of an ADMAX, High, or Administrative security level institution or his/her designee may approve using an Electronic Custody Control Belt. The approving official authorizes using the belt only after determining that an inmate requires greater security than is afforded through conventional restraints and has no medical condition precluding its use.

a. **Use of Other Restraints.** The custody control belt is not intended for use in lieu of conventional restraints, but **in addition to** such restraints. Escorting staff may reduce minimum restraint requirements only if the Warden has given specific prior approval.

While the custody control belt is intended to provide a less-than-lethal security option for high-risk escorts, in the interest of general safety, staff must follow the requirements on the use of deadly force in Chapter 7, Firearms and Badges, of the Program Statement **Correctional Services Procedures Manual**.

It is Bureau policy to use Electronic Custody Control Belts to prevent escapes or to prevent the loss of life or grievous bodily harm.

(1) **Escape Prevention.** In an attempted escape, verbal orders to halt are first given to the inmate wearing the belt. If the inmate fails to halt immediately, the belt is activated. If the inmate has escaped and is out of view of the escorting officer, a verbal warning to halt is not necessary.

This does not preclude, in certain circumstances, using deadly force, which may or may not be used before activating the belt. See Chapter 7, Firearms and Badges, of the Program Statement **Correctional Services Procedures Manual**.

(2) **Preventing Loss of Life or Grievous Bodily Harm.** Staff may use the custody control belt when there is a reasonable belief that the inmate's actions are likely to result in the loss of life or grievous bodily harm to staff, inmates, or others.

The escort detail's OIC must exercise sound judgment when making a decision to activate the belt. Verbal orders are not required if the staff member reasonably believes a danger of death or grievous bodily harm is imminent.

b. **Authorized Official.** The OIC of any escort detail when the Electronic Custody Control Belt is used must be a GS-11 Lieutenant trained in its use.

Training encompasses either training by a vendor representative of the custody control belt or a Bureau employee whom a vendor has certified to provide training. The Employee Services Manager (EMS) documents training.

Only the escort detail's OIC may carry and use the activating device for the belt. Only after mandatory Electronic Custody Control Belt training may a GS-11 Lieutenant serve as the OIC, or as a member of a team escorting an inmate approved to wear the belt.

Before applying the belt, the OIC completes the Electronic Custody Control Belt Documentation (BP-A0599). The justification for the approval to use the belt must be documented in detail on the Escorted Trip Authorization (BP-A0502).

10. USING A CUSTODY CONTROL BELT

a. **Medical Staff Review.** When medical staff review the Escorted Trip Authorization form, a specific indication is made for each MAXIMUM custody inmate whether any medical condition would preclude using a custody control belt. Disqualifying medical situations include:

- Pregnancy.
- Heart disease.
- Multiple sclerosis.
- Muscular dystrophy.
- Epilepsy.

Only a health services professional (Physician, Physician Assistant, or Nurse Practitioner) may conduct this review, which includes a review of the Inmate's Health Record and other documentation at the institution.

b. **Inmate Notification.** Before applying the belt, the inmate is advised by the OIC that the belt is going to be placed on him/her, and under what circumstances it can be activated. This is done by allowing the inmate to read, or have read to him/her, the Inmate Notification of Electronic Custody Control Belt Use (BP-A0600).

If possible, the inmate is given the opportunity to sign the form. However, if this is not possible or if the inmate refuses, staff document this refusal on the form.

11. CUSTODY CONTROL BELT REPORTING REQUIREMENTS

If the custody control belt is activated while being worn by an inmate, the escort detail OIC notifies the approving Warden or his/her designee as soon as possible.

a. **Medical Examination.** Medical staff examine the inmate as soon as possible after activation of the belt and document the examination in the Inmate's Health Record. Any injuries, bruises, or marks on the inmate's body are documented via photograph or videotape, which the Captain must retain. When an examination may not be possible (e.g., lengthy escorted trip), escorting staff go to a local medical facility for examination and possible treatment.

b. **OIC Reports.** The OIC submits both a written report and page 2 of the Electronic Custody Control Belt Documentation (BP-A0599) to the Warden whenever the belt is activated while worn by an inmate. Reports are submitted before the end of the OIC's tour of duty.

c. **Use of Force Reports.** Per the Program Statement **Use of Force and Application of Restraints**, both the Report of Incident (BP-A0583), and the After-Action Review Report – Use of Force/Restraints/Chemical Agents/Non-Lethal Weapons (BP-A0586), are completed and routed.

d. **Reports to Regional and Central Office.** The Warden submits a full written report of an incident involving activation of the belt to the Regional Director within 24 hours. Copies are sent to the Assistant Directors, Correctional Programs Division and Health Services Division.

12. CUSTODY CONTROL BELT TRAINING RESPONSIBILITIES

a. **Electronic Custody Control Belt.** The Correctional Services Administrator, Central Office, in conjunction with the Management and Specialty Training Center, provides training regarding the Electronic Custody Control Belt. This is also provided at each institution where the belt is authorized.

The Warden at each High and Administrative security level institution ensures that only GS-11 Lieutenants who have been trained and certified on the Electronic Custody Control Belt's application, operation, effectiveness, and follow-up requirements are authorized to apply it.

b. **Escorted Trip.** The Captain at each Bureau institution ensures that all staff escorts are trained in accordance with this Program Statement.

13. PROGRAM REVIEW RESPONSIBILITIES

The Program Review Division, Correctional Services Branch, reviews the Escorted Trip Program. The Warden may select appropriate staff to conduct periodic internal reviews.

14. SENTRY RESPONSIBILITIES

Correctional Systems staff enter admission and release transactions. After normal duty hours, if no Correctional Systems staff are available, Correctional Services staff complete these transactions.

15. CONFIDENTIALITY

Except in unusual circumstances, inmates scheduled for an escorted trip may not be advised of the:

- Time.
- Date.
- Method of travel.
- Destination.

16. AGENCY ACA ACCREDITATION PROVISIONS

- American Correctional Association Standards for Adult Correctional Institutions, 4th Edition: 4-4189, 4-4190, 4190-1, 4199, 4-4204M, 4-4348, 4-4349, and 4-4445.
- American Correctional Association Performance Based Standards for Adult Local Detention Facilities, 4th Edition: 4-ALDF-1B-06, 4-ALDF-2B-02, 4-ALDF-2B-02-1, 4-ALDF-2B-04, 4-ALDF-2B-08M, 4-ALDF-4C-05, and 4-ALDF-4C-06.

REFERENCES

Program Statements

P5100.08	Inmate Security Designation and Custody Classification (9/12/06)
P5180.05	Central Inmate Monitoring System (12/31/07)
P5280.09	Inmate Furloughs (1/20/11)
P5500.11	Correctional Services Manual (10/10/03)
P5500.14	Correctional Services Procedures Manual (10/9/12)
P5540.07	Prisoner Transportation Manual (6/3/14)
P5566.06	Use of Force and Application of Restraints (11/30/05)

P6031.04 Patient Care (6/3/14)
P7331.04 Pretrial Inmates (1/31/03)

Federal Regulations

Rules cited in this Program Statement: 28 CFR 570.40 through 570.45.

BOP Forms

BP-199 Request for Withdrawal of Inmate's Personal Funds
BP-A0502 Escorted Trip Authorization
BP-A0583 Report of Incident
BP-A0586 After-Action Review Report – Use of Force/Restraints/Chemical Agents/Non-Lethal Weapons
BP-A0599 Electronic Custody Control Belt Documentation
BP-A0600 Inmate Notification of Electronic Custody Control Belt Use
BP-A0821 Transfer Receipt
BP-A0938 Conditions of Escorted Trip
BP-A0939 Escort Instructions

Records Retention Requirements

Requirements and retention guidance for records and information applicable to this program are available in the Records and Information Disposition Schedule (RIDS) on Sallyport.