

AUTHORITY:

- A. NMSA 1978, Section 33-1-6
- B. Policy *CD-090100*

REFERENCES:

A. ACA Standards 4-4226, Standards for Adult Correctional Institutions, 4th Edition.

PURPOSE:

To provide intensive treatment for inmates with drug trafficking offenses in a close custody General Population setting and to temporarily separate these inmates from other general population inmates to protect the integrity of recidivism reduction programming in those populations.

APPLICABILITY:

All inmates and staff of the New Mexico Corrections Department.

FORMS:

- A. Unit Management Team DSP Completion Decision form (CD-142000.1)
- **B.** Inmate DSP Placement Appeal form (*CD-142001.2*).
- C. DSP/SMP Referral Checklist form (*CD-141601.2*)

ATTACHMENTS

A. Sample DSP Referral Memorandum Attachment (CD-142001.A)

DEFINITIONS:

None

POLICY:

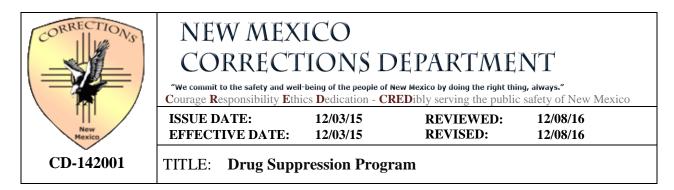
A. It is the policy of the New Mexico Corrections Department to provide treatment to offenders who have demonstrated the inability to habilitate themselves through programs offered to from this objective by introducing the illicit contraband into facilities.

them for treatment of substance addiction; or those who have contributed to the deviation

B. Designation of units; the Penitentiary of New Mexico North Facility or other units as designated by the Director of Adult Prisons or Designee.

DAIGLE

David Jablonski, Acting Secretary of Corrections New Mexico Corrections Department <u>12/08/16</u> Date



AUTHORITY:

Policy: *CD-142000*

PROCEDURE:

A. Placement

- 1. The following sets of criteria apply for when an inmate may be placed in the Drug Suppression Program (DSP):
 - a. Any inmate found guilty of Dealing in Dangerous Drugs A(19): Selling, trading, giving away, introducing, attempting to introduce, or conspiring to introduce any quantity of any item defined as a dangerous drug. There are written rules of inmate conduct that specifies acts prohibited within the institutions and the penalties that can be imposed for various degrees of violation. [4-4226]
 - b. The inmate must have received 365 days loss of visitation privileges, 365 days loss of canteen privileges (hygiene and stationary as exceptions), and 365 days loss of phone privileges upon the finding of guilt for A(19).
 - c. Recommendation from Facility Warden to Restrictive Housing Administrator, using the format in the **Sample DSP Referral Memorandum** Attachment (*CD-142001.A*). The decision for placement will be made by a three (3) member panel appointed by the Director of Adult Prisons with the sole authority to approve entry. The Director of Adult Prisons may not be a member of the Board.
- 2. Recommendations from the Facility Warden must be made immediately after the Deputy Warden has approved the disciplinary decision.
- 3. Upon placement at the designated DSP facility, the inmate may appeal the decision to the Director of Adult Prisons on the **Inmate DSP Placement Appeal** form (*CD-142001.2*).

B. DSP Programs and Requirements

- 1. Inmate programs in the DSP include Substance Abuse, Cognitive Education, Work Programming & GED preparation, Victim Empathy and Trauma Informed Care.
- 2. Lump Sum Awards will not be awarded while an inmate is in DSP other than those that are statutorily required.
- 3. In order to control drug use and trafficking in the DSP the following restrictions will occur:
 - a. All mail, with the exception of legal mail, will be photocopied and given to the inmate.
 - b. No in-person visits. When available, remote video visitation will be granted on a case by case basis as approved by the Unit Management Team.
 - c. Unannounced Urinalysis Testing of Inmates-Testing Unknown Substances will occur on every inmate randomly every month.
- 4. Inmates will be authorized property items found in Policy CD-150200 Inmate Property.

C. Successful Completion and Release from DSP

- 1. Inmates must have been housed in the DSP for 365 days to be considered for successful completion. Credit toward the 365 day completion requirement will not be granted for days spent away from the designated DSP facility (out to court, medical). Time period away must exceed one (1) calendar day.
- 2. Inmates will be released to the general population setting upon successful completion of DSP.
 - a. Inmates successfully completing the DSP program will not have received any finding of guilt on misconduct reports for A16, A17, A18 or A19, and have participated in the DSP-offered programs.
 - b. Successful completion will be determined by the Unit Management Team and approved by the Director of Adult Prisons and documented on *form CD-142000.1* Unit Management Team DSP Completion Decision.
 - c. Release from DSP may include placement in the Special Management Population (*CD-141600*).
- 3. Inmates will be ineligible for release from DSP if found guilty on a misconduct report for A16, A17, A18 or A19 while in DSP.

- a. Sanctions will run consecutively to sanctions imposed on original placement into DSP.
- b. Inmate will remain in DSP until all consecutive sanctions are complete.

DAIGLE

David Jablonski, Acting Secretary of Corrections New Mexico Corrections Department <u>12/08/16</u> Date

Date:_____

NEW MEXICO CORRECTIONS DEPARTMENT Unit Management Team DSP Completion Decision

Inmate Name:	NMCD#:	Date:		
Date sanctions imposed for the finding	of guilt for A19:			
Date of Admission to Drug Suppression	n Program:			
Programs Completed in DSP (check all	that apply):			
Substance Abuse Counseling	Cognitive Edu	cation		
Work Programming	GED Preparati	GED Preparation or other Education		
Victim Empathy	Other:	Other:		
(Inmate must not have received any mi	sconduct reports for A1	6, A17, A18 or A19)		
The listed inmate has successfully conthe Unit Management Team: Yes	npleted the Drug Supp	ression Program as determined by		
IIMT Chairmanan Signatura		Date:		
UMT Chairperson Signature				

Deputy Director of Adult Prisons Signature

NEW MEXICO CORRECTIONS DEPARTMENT Inmate DSP Placement Appeal

Inmate Name: ______ NMCD#:_____

Institution: _____Housing Unit: _____

Date Of Placement in DSP: _____

Note: This Form Must Be Submitted To The Director of Adult Prisons Within 15 Days Of DSU Placement.

State Appeal: Include Documentation And Specific Reasons For Your Appeal. Use Additional Pages, If Necessary:

Inmate's Signature:	 Date:	
U		

To Be Completed By The Director of Adult Prisons:

- A. Date Received:_____
- B. _____Your Appeal Is Accepted For Consideration
- C. Your Appeal Is Being Returned To You For The Following Reason(s):

1.	The appeal is currently under review.
2.	The appeal does not involve a DSP placement decision.
3.	The appeal is a group appeal or petition.
4.	The appeal is not timely.
5.	Other: Specify

NEW MEXICO CORRECTIONS DEPARTMENT **Inmate DSP Placement Appeal**

Director of Adult Prisons Investigation And Recommendation:

 Appeal Granted_____
 Appeal Denied_____

Director of Adult Prisons

Date

NEW MEXICO CORRECTIONS DEPARTMENT Sample DSP Referral Memorandum

To: Deputy Director of Adult Prisons

From: Facility Warden

Re: Inmate Doe, John NMCD# 12345, DSP Placement Recommendation

Date: Today's Date

John Doe NMCD# 12345 was issued an Inmate Misconduct Report on February 16, 2016. On February 22, 2016, inmate Doe was found guilty of A(19) Dealing in Dangerous Drugs through the disciplinary process. The sanctions recommended by the Disciplinary Hearing Officer were: Loss of visitation privileges for a period of three hundred sixty five (365) days; Loss of canteen privileges for a period of three hundred sixty five (365) days; and Loss of phone privileges for three hundred sixty five (365) days. The Deputy Warden approved the recommendation on February 23, 2016.

The inmate was provided the Disciplinary Decision on February 23, 2016, and I therefore recommend that Inmate Doe be placed in the Drug Suppression Program.

NEW MEXICO DEPARTMENT OF CORRECTIONS						
INMATE NAME:	DSP/SMP Referral Checkli NMCD#:	<u>ist</u> DATE:				
DATE OF TRH PLACEMENT:	_ FACILITY:					
Drug Suppression Program						
Special Management Program	REFERRAL CHECKLIST	<u>Γ</u>				
Memo on Inmate in	stitutional history and conduct	Yes No				
Documentation supporting the facts used for referral Yes No						
Misconduct report	showing sanctions imposed by	policy Yes 🗌 No 🗌				
Unit Manager/Designee (Print/Sign)	Date	_				
Facility Warden (Print/Sign)	Date	_				
DSP/SMP Management Board Review and Action						
Approved for Placement						
Denied Decific action to be taken by the facility	y:					
DSP/SMP Management Board (Print/Sign)	Date					
DSP/SMP Management Board (Print/Sign)	Date					

DSP/SMP Management Board (Print/Sign)

Date