Idaho Department of Correction	**Standard Operating Procedure**	Title: **Short Term Restrictive Housing**		Page: 1 of 13
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Open to the public: ☒**Yes**

SCOPE

This SOP is applicable to all staff members at Idaho Department of Correction (IDOC) correctional facilities and community reentry centers (CRCs)

Revision Summary
Revision date (08/06/2026) version 1.1: Renumbered to 319.005 due to duplicate control numbers. No other changes.
Revision date (07/11/2018) version 1.0: This is a new document. Information regarding other forms of specialized housing was placed in separate standard operating procedures.

TABLE OF CONTENTS

Board of Correction IDAPA Rule Number....2
Policy Control Number....2
Purpose....2
Responsibility....2
Standard Procedures....2
1. Overview....2
2. Short-term Restrictive Housing Categories and Placement Authorities....3
3. Time Limits....4
4. Short-term Restrictive Housing Documentation....4
5. Release from Short-term Restrictive Housing....4
6. Transit Status....5
7. Procedures for Facilities without Restrictive Housing Capacity....5
8. Calculating Time Limits of Short-Term Restrictive Housing Processes....5
9. Screening Procedures for Placement in Restrictive Housing....6
10. Mental Health Services....6
11. Medical Services....6
12. Segregation Pending Investigation (SPI) Placement Procedures....6
13. Pre-hearing Segregation (PHS) Placement Procedures....7

14. Monitoring and Documentation of Short-term Restrictive Housing 8

15. Short-term Restrictive Housing Staffing 11

16. Conditions of Confinement 11

Definitions 12

References 12

BOARD OF CORRECTION IDAPA RULE NUMBER

None

POLICY CONTROL NUMBER 319

Restrictive Housing

PURPOSE

The purpose of this standard operating procedure (SOP) is to establish procedures for referral and placement of inmates in restrictive housing, to describe staff responsibilities regarding restrictive housing, and to describe the conditions of confinement and timeframes that apply.

Restrictive housing protects staff and inmates by segregating those who are the most violent or present the greatest danger to the safe operations of the facilities.

RESPONSIBILITY

Facility heads are responsible for implementing this SOP and monitoring staff compliance with the procedures and practices contained herein.

STANDARD PROCEDURES

1. Overview

Unless circumstances and inmate behavior dictate otherwise, inmates are housed in the general population at the lowest appropriate custody level. However, an agency unable to isolate disruptive/violent inmates in restrictive housing is at risk of disruption and incidents affecting inmate and staff safety. Nevertheless, it is important that only those inmates who require restrictive housing be assigned there.

When the need to segregate an inmate in restrictive housing no longer exists, the inmate should be returned to general population. Facility heads are responsible for developing field memorandums to review inmates placed in segregation pending investigation (SPI) and pre-hearing segregation (PHS) to determine if the need for segregation still exists and to ensure that investigations and hearings are conducted within the timeframes established in this SOP.

An inmate may use the grievance procedure to address concerns regarding placement in restrictive housing. (Refer to Grievance and Informal Resolution Process for Prisons and CRC Inmates, SOP 316.02.01.001.)

Placement Parameters

- Safety of others
- Safe and secure operation of the facility

- Victim or perpetrator of violence
- Pending the result of a disciplinary hearing where the outcome could increase custody level
- Preserving the integrity of an investigation

Emergency Restrictions, Lockdowns, and Secure Status

In an emergency, when a section, housing unit, or entire facility is locked down or put on secure status, individual RHOs are not required. The shift commander is responsible for reporting such actions to the facility duty officer and the administrative duty officer, and for sending a *105 Report* in accordance with *Reporting and Investigation of Major Incidents,* SOP 105.02.01.001.

Inmates Restricted from Placement in Restrictive Housing

Inmates with disabilities must be placed in cells that accommodate their disability. Inmates must not be placed in restrictive housing solely due to their disability or due to the lack of available accessible cells.

Juveniles, pregnant women or women who recently gave birth, and inmates with a serious mental illness must be considered for alternative placement in a mental health unit or in a holding cell on a suicide watch or close observation status. Inmates with a designated level of care of Acute Correctional Mental Health Services (ACMHS) or Intermediate Correctional Mental Health Services (ICMHS) are considered to be seriously mentally ill for the purpose of this SOP.

2. Short-term Restrictive Housing Categories and Placement Authorities

Disciplinary Detention

Short-term restrictive housing that a disciplinary hearing officer may impose as a sanction when an inmate commits a disciplinary offense.

Long-Term Restrictive Housing Referral Status

Short-term restrictive housing used to complete investigating and hearing process for inmates who have been referred to long-term restrictive housing.

Pre-hearing Segregation (PHS)

Short-term restrictive housing used for inmates who have a pending *Disciplinary Offense Report* (DOR).

Segregation Pending Investigation (SPI)

Short-term restrictive housing used when an administrative or criminal investigation is needed.

SPI and PHS

Placement authorities for SPI and PHS are:

- Shift commander
- Security manager
- Deputy warden

- Facility head

Long-Term Restrictive Housing Referral Status (see Long-Term Restrictive Housing Program, SOP 319.02.01.003)

- Shift commander
- Security manager
- Deputy warden
- Facility head

Disciplinary Detention

Only a disciplinary hearing officer (DHO) may authorize placement (see *Inmate Disciplinary Process,* SOP 318.02.01.001

3. Time Limits

The time an inmate may be placed in any combination of short-term restrictive housing (SPI, PHS, LTRHRS or disciplinary detention) cannot exceed 15 days based on a single event. The 15-day limit cannot be extended.

Examples:

- An inmate spends 14 days in a combination of SPI and PHS related to a disciplinary offense report. The DHO must only sanction the inmate one day of detention time, even if the inmate was released from PHS for a few days before the hearing.
- However, if an inmate spends 10 days in SPI and is then sanctioned to five days detention and after being released from detention commits a new disciplinary offense, the short-term restrictive process and time limits starts over.

Time limits for each category are as follows:

- SPI – 10 days; a facility head or second in command may grant a 5-day extension
- PHS – 5 days; a facility head or second in command may grant a 5-day extension
- Long-Term Restrictive Housing Referral Status (LTRHRS) – 15 days (no extension)
- Disciplinary detention – 15 days

4. Short-term Restrictive Housing Documentation

When an inmate is placed in short-term restrictive housing, an authorized placement staff member must complete a *Restrictive Housing Order* (RHO). Each time an inmate's status changes, staff must complete a new RHO (for example, the status changes from SPI to PHS). The inmate must receive a copy of each RHO.

The placement authority must ensure that the appropriate action such as an investigation or a *Disciplinary Offense Report* (DOR) is completed in accordance with the time limits.

5. Release from Short-term Restrictive Housing

Segregation Pending Investigation (SPI) and Pre-hearing Segregation (PHS)

The inmate will be released from detention status at the end of the sanctioned detention time. The placement authority who placed the inmate in SPI or PHS may authorize the inmate's release before the sanctioned time is complete with the approval of the second in command or higher.

Disciplinary Detention

The restrictive housing unit manager as designated in *Disciplinary Procedures for Inmates,* SOP 318.02.01.001 may authorize the inmate's release.

Long-Term Restrictive Housing Referral Status (LTRHRS)

During the referral and hearing process, the long-term restrictive housing placement committee chairperson or the facility head may authorize the inmate's release.

6. Transit Status

An inmate may remain in a restrictive housing unit while on transit status awaiting a bunk opening in the appropriate housing unit and custody level. When an inmate is released from restrictive housing, but will remain in the restrictive housing unit on transit status, staff must complete a *Restrictive Housing Release to Transit Form.* Transit status is not a form of restrictive housing even if the inmate remains in the restrictive housing unit. Inmates on transit status must have the following housing standards in addition to the conditions of confinement for short-term restrictive housing:

- Opportunities for three hours or more a day out of cell time
- Property for general population in accordance with *Property: State-Issued and Inmate Personal Property,* SOP 320.02.01.001
- Access to visits

7. Procedures for Facilities without Restrictive Housing Capacity

Some community reentry centers (CRCs) and minimum custody facilities are not located near correctional facilities that have restrictive housing capacity, and therefore must use temporary short-term restrictive housing such as county jails, secure areas within the CRC or minimum custody facility, or other correctional facilities pending the inmate's transfer to an appropriate IDOC facility. After the inmate is transferred, any remaining processes described in this SOP will occur. Facility heads using temporary short-term restrictive housing must develop and follow a field memorandum to manage this transitional step to include serving the RHO, monitoring the inmate's pending transfer, and serving as a liaison with the inmate placement unit to facilitate the inmate's timely transfer to a secure facility.

8. Calculating Time Limits of Short-Term Restrictive Housing Processes

When calculating time in short-term restrictive housing, use this example:

If an inmate was placed in short-term restrictive housing on a Tuesday, the next day (Wednesday) at midnight would be day one. When an inmate is scheduled for release from short-term restrictive housing, the release would be accomplished no later than midnight of the day of release.

Facility heads at facilities with restrictive housing capacity must ensure there is a tracking log, computerized system, or other method to track the timelines and status of inmates

housed in short-term restrictive housing and establish procedures to monitor the status of inmates to ensure that timelines established in this SOP are met.

9. Screening Procedures for Placement in Restrictive Housing

All inmates must receive medical and mental health screening before initial placement in a short-term restrictive housing cell. Medical staff must complete and initial a mental health screening utilizing the *Mental Health Screening* form and review the healthcare record in accordance with *Health Evaluations for Offenders in Segregated/Restrictive Housing*, SOP 401.06.03.045. Many factors may preclude placement in short-term restrictive housing or require special accommodation. Inmates with visual, hearing, or mobility requirements, those with a language barrier or who are non-English speaking, or those with a medical or mental health concern that may worsen with placement in short-term restrictive housing must be considered for accommodation or alternative placement. If the healthcare record review or mental health screening identifies contraindications to placement of the inmate in short-term restrictive housing, medical or mental health staff must notify the shift commander. Medical and mental health staff must work in cooperation with the shift commander to identify appropriate housing or placement options. All specific accommodations related to short-term restrictive housing placement must be clearly documented on the *Restrictive Housing Order.*

Medical and mental health staff must not make the actual decision regarding an inmate's placement in restrictive housing, they may only identify potential contraindications and recommendations for accommodation. In addition, healthcare staff must not determine whether inmates are physically or psychologically able to be placed in isolation.

10. Mental Health Services

Mental health services must be provided in accordance with (*Mental Health Services System,* SOP 327.02.01.002).

11. Medical Services

Medical services must be provided in accordance with *Health Evaluations for Offenders in Segregated/Restrictive Housing,* SOP 401.06.03.045.

12. Segregation Pending Investigation (SPI) Placement Procedures

Placement in SPI requires that the risk to the facility or to the integrity of the investigation be clearly articulated.

Functional Roles and Responsibilities	Step	Tasks
IDOC Staff	**1**	Determines that an inmate should be placed in SPI for one or more of the following reasons: • The inmate requires or has requested protection • To ensure integrity of a criminal or administrative investigation • To isolate a sexual predator

Functional Roles and Responsibilities	Step	Tasks
		• To isolate an inmate whose behavior requires investigation and is a threat to the safe and orderly operation of the facility.
IDOC Staff	**2**	Contact the shift commander or other staff member authorized to make placement in SPI.
Placement Authority	**3**	If placement in SPI is appropriate, and the risk to the facility can be clearly articulated, authorize placement in SPI and complete a *Restrictive Housing Order* (RHO). Notify medical staff to complete the screening process before placement. Notify mental health staff to complete the screening process before placement.
Placement Authority	**4**	Ensure that the facility tracking log is completed.
	5	Before going off shift and within 8 hours of placement in SPI, ensure that the inmate is served a copy of the RHO.
	6	Forward a copy of the RHO placing the inmate in SPI to the facility head. (Facility field memorandum (FM) can describe this process.)
Staff Assigned to Investigate	**7**	Complete the investigation within ten days and forward the report to the placement authority.
Placement Authority	**8**	If the SPI placement is concerning a criminal or administrative investigation and a *Disciplinary Offense Report* (DOR) is warranted, see Section 12, Pre-hearing Segregation (PHS) Placement Procedures.
Placement Authority	**9**	If referral to the long-term restrictive housing program is warranted, the inmate's status must be changed to Long-Term Restrictive Housing Program-Referral Status and the procedures outlined in *Long-Term Restrictive Housing Program,* SOP 319.02.01.003 must be followed.

13. Pre-hearing Segregation (PHS) Placement Procedures

Placement in PHS requires that the inmate's behavior or actions pose a risk to staff, other inmates, the safe and secure operation of the facility, or pending the outcome of a disciplinary hearing where the outcome could increase an inmate's custody level.

Functional Roles and Responsibilities	Step	Tasks

IDOC Staff	**1**	Observes or has knowledge of an inmate whose behavior is a threat to the safe and orderly operation of the facility pending a disciplinary hearing.
	2	Refer the inmate to the shift commander or other staff member authorized to make placement in PHS.
Placement Authority	**3**	If placement in PHS is appropriate, authorize placement in PHS and complete a *Restrictive Housing Order*. Notify medical and mental health staff to complete screening if PHS is the initial placement. If the inmate has already been screened upon initial placement into short-term restrictive housing, this step may be omitted.
	4	Ensure that the facility tracking log is completed.
	5	Ensure that the inmate is served a copy of the *Restrictive Housing Order* within eight hours of placement in PHS.
Shift Commander	**6**	Forward a copy of the RHO to the facility head of the inmate's placement in PHS. (Facility field memorandum (FM) can describe this process.)
Shift Commander or Designee	**7**	Ensure that a *Disciplinary Offense Report* (DOR) is written and submitted to a disciplinary hearing officer (DHO).
DHO	**8**	Hear the DOR within five business days in accordance with *Disciplinary Procedures for Inmates*, SOP 318.02.01.001.
	9	Complete a new *Restrictive Housing Order* and notify appropriate staff regarding any detention time received or of the inmate's release from segregation.

14. Monitoring and Documentation of Short-term Restrictive Housing

Security staff, mental health staff, program staff, medical staff, and mental health staff must make regular visits to the short-term restrictive housing unit and document their visits and significant observations of inmates. All staff members must take immediate action to address any concerns discovered during restrictive housing tours or through interactions with inmates and staff.

Monitoring Frequency and Responsibilities

Shift Commander or Shift Supervisor

Once each shift, visits all cells in the short-term restrictive housing unit(s), and reviews all logs.

- Ensure all activities were properly logged.
- Ensure tier checks were completed every 30 minutes.

Unit Supervisor

- Each day ensure that each inmate has a valid RHO.

- At least daily, conduct reviews of the conditions of confinement logs and unit logs.
- Report concerns about the short-term restrictive housing unit or staffing issues to the security manager, captain, or deputy warden as designated in FM.
- Based upon observations or discussions with inmates, make notes as appropriate in the offender management system.

Unit Staff

- Record tours of short-term restrictive housing in the facility log.
- Visually observe the inmate at staggered intervals not to exceed 30 minutes between checks for the following:
  - Wellbeing of the inmate
  - Inmate needs/problems
  - Unusual or suicidal behavior (For suicidal behavior, immediately implement the provisions of *Suicide Risk Management and Intervention Program,* SOP 315.02.01.001.)
  - Cleanliness
  - Hygiene
  - Laundry needs
  - Security issues
  - Maintenance issues
- Record activities on a *Conditions of Confinement Log* (if an activity is not listed on the *Conditions of Confinement Log*, record it in the unit log).
- Make entries as appropriate in the offender management system.

Unit Control Officer/Officer in Charge

Record staff tier/cell checks in the unit log. (Name, title, time on tier, time off tier, purpose, activity)

Medical Staff

At least three times per week, a qualified health professional visits each short-term restrictive housing cell making verbal and visual contact with inmates to address concerns and provide medical care as required.

Medical staff must also remain aware of environmental conditions in the restrictive housing unit, such as adequate heating, lighting, and ventilation. Medical staff must also ensure that the hygiene and cleanliness of inmates and their living environment are maintained and that they are receiving adequate food, water, and exercise. Any concerns must be reported to the shift commander and documented in the medical record.

The control officer must ensure that each tour of the short-term restrictive housing unit by medical staff is documented (including date, time, and qualified health professional's name) in the unit log.

If an inmate requires a medical examination, it must occur in a clinical area where privacy can be ensured. The inmate will be examined without restraints and without the presence of security staff, unless there is a high risk of violence. If this cannot occur, the inmate's privacy, dignity, and confidentiality should be maintained as much as possible. If security staff must be present, they must maintain visual observation of the inmate during the examination, but must maintain enough distance so any conversation remains private.

Mental Health Services

Once per week, a mental health staff member must visit each short-term restrictive housing cell making verbal and visual contact with inmates to address concerns and provide mental health care as required. The mental health staff member must communicate with each inmate at cell front. Security staff will visually monitor the mental health staff member for safety during the unit tour but will maintain enough distance so the staff member and inmate's conversation remains private. The mental health staff member must also communicate with unit staff and review unit logs and conditions of confinement for issues that might signal a mental health concern. Mental health staff must document in the weekly restrictive housing note, maintained in the medical record, that they have reviewed the inmate's condition of confinement log during their weekly visit.

Mental health staff must also remain aware of environmental conditions in the restrictive housing unit, such as adequate heating, lighting, and ventilation. Mental health staff must also ensure that the hygiene and cleanliness of inmates and their living environment are maintained and that they are receiving adequate food, water, and exercise. Any concerns must be reported to the shift commander and documented in the medical record.

The control officer must ensure that each tour of the short-term restrictive housing unit by mental health staff is documented (including date, time, and mental health professional's name) in the unit log.

Out-of-Cell Interviews

In the event that the mental health staff member identifies that the inmate appears to be decompensating, or if the inmate reports mental health symptoms or concerns, the mental health staff member will request to interview the inmate in a private setting. Although security staff normally escorts inmates in restraints in accordance with this SOP, the facility head or facility duty officer may make exceptions. Security staff must maintain visual observation of the inmate during the interview but must maintain enough distance so the conversation remains private.

If the mental health staff member determines that an inmate is decompensating, the mental health staff member must immediately notify the shift commander and document it in the inmate's medical record. The shift commander, in consultation with a mental health professional, will take applicable action, which may include but is not limited to the following:

- Moving the inmate to more suitable housing (see release from restrictive housing section in this SOP)
- Modifying the conditions of confinement
- Implementing *Suicide Risk Management and Intervention*, SOP 315.02.01.001

15. Short-term Restrictive Housing Staffing

Restrictive housing posts are exempt from the seniority bid process. (See *Staffing Security: Seniority, Post, Vacation, and Scheduled Leave Management,* SOP 216.02.01.002.) All prisons division employees will receive training on de-escalation skills, behavior management, and the effects of isolation biannually as approved by the prison division chief.

16. Conditions of Confinement

Conditions of confinement are conditions such as access to healthcare, showers, movement, and exercise.

Deprivation of an authorized item, activity, or service must be documented in the *Conditions of Confinement* log and in the unit log.

The conditions of confinement for inmates in short-term restrictive housing are as follows:

- Privileges consistent with available resources based on the security needs of the unit.
- From within their cells, when in recreation areas, and while being moved in the restrictive housing unit, have freedom to talk with other inmates on the respective unit or tier.
- Receive prescribed medication.
- Have clothing that is standard facility issue and access to basic personal items, unless there is imminent danger that the inmate will become destructive or self-injurious. (Inmates in detention status will be issued coveralls or scrubs.)
- Have opportunities for personal hygiene similar to those available to the general population, except that an inmate may be limited to three showers per week.
- Receive the same quality and portions of food, including selective and medical diets as served to general population inmates (see *Diets for Inmates: Selective, Medical, Special Provision, and Infirmary*, SOP 404.02.01.003. Food restrictions or modified diets are not to be used as punishment.
- Receive provisions for laundry, barbering, and hair care.
- Receive a security sleep system.
- Have the same opportunities for writing and receiving letters as the general population.
- Have exercise periods available a minimum of one hour per day, five days per week, unless circumstances such as an emergency or extreme weather make such exercise periods impractical or dangerous. Any cancellation of exercise periods will be documented in the unit log and the COCs. The facility head (or designee) may approve that an inmate remain in restraints during exercise if the inmate's behavior puts staff or others at risk of bodily harm.
- Movement outside an inmate's cell and unit will usually be in restraints. If the use of restraints worsens an inmate's condition or the use of restraints is unwarranted, the facility head or facility duty officer may make exceptions allowing an inmate to be moved without the use of restraints. Facility heads may establish procedures in field

memorandum for limited movement without restraints for inmates housed in double-bunked cell assignments to activities such as showers and microwave access.

- Have access to courts in accordance with *Access to Courts,* SOP 405.02.01.001, and field memorandum.
- Practice religious beliefs in accordance with *Religious Activities,* SOP 403.02.01.001 and field memorandum.
- Telephone: Inmates in short-term restrictive housing who are not SPI must receive one opportunity to place a telephone call within 24 hours of placement and another after seven days. Facility heads may set time limits on the calls in an FM. Investigation staff may ask the facility to make an exception to an inmate's telephone call privilege based on maintaining the integrity of an investigation.
- Visits: Receive one visit by submitting a request to the unit management team. Inmates in detention may request a visit after seven days. (Inmates in SPI or PHS status should not receive visits.)
- Attorney visits. Attorney visits may take place in the appropriate visiting area, as scheduled by the attorney with the facility head or designee.
- Be allowed to purchase approved items through the commissary in accordance with *Property: State-issued and Inmate Personal Property,* SOP 320.02.01.001.
- Possess personal property as listed in *Property: State-issued and Inmate Personal Property*, SOP 320.01.01.001.

DEFINITIONS

None

REFERENCES

Conditions of Confinement Log

Restrictive Housing Order

Restrictive Housing Release to Transit Form

Restrictive Housing Tracking Log

Standard Operating Procedure 105.02.01.001, *Reporting and Investigation of Major Incidents*

Standard Operating Procedure 216.02.01.002, *Staffing Security: Seniority, Post, Vacation, and Scheduled Leave Management*

Standard Operating Procedure 327.02.01.002 *Mental Health Services System*

Standard Operating Procedure 315.02.01.001, *Suicide Risk Management and Intervention Program*

Standard Operating Procedure 316.02.01.001, *Grievances and Informal Resolution Procedure for Offenders*

Standard Operating Procedure 318.02.01.001, *Disciplinary Procedures for Inmates*

Standard Operating Procedure 319.02.01.003, *Long-Term Restrictive Housing Program*

Standard Operating Procedure 320.02.01.001, *Property: State-issued and Inmate Personal Property*

Standard Operating Procedure 401.06.03.045, *Health Evaluations for Offenders in Segregated/Restrictive Housing*

Standard Operating Procedure 403.02.01.001, *Religious Activities*

Standard Operating Procedure 404.02.01.003, *Diets for Inmates: Selective, Medical, Special Provision, and Infirmary*

Standard Operating Procedure 405.02.01.001, *Access to Courts*

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