



*State of North Carolina*  
*Department of Correction*  
*Division of Prisons*

Chapter: C  
Section: .1300  
Title: **Intensive Control**  
Issue Date: 11/01/11  
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**POLICY & PROCEDURES**

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**.1301 GENERAL**

- (a) Intensive control is the long-term removal of close custody felon or minimum custody level I misdemeanor inmates from the general inmate population to confinement in a secure area. The intent is the control of offenders whose behavior has proven to be repeatedly disruptive to the operations of the facility, non-compliant with instructions and orders, or as a transition following assignment to maximum control status. Intensive control is authorized at any point during an offender's confinement if needed to contain the offender in a more secure environment over a long period of time. Procedures for authorizing such long-term segregation will be accomplished through referrals to and actions by a Director's Classification Authority (DCA) for all male inmates and a Director's Classification Committee (DCC) for all female inmates. Generally, such actions may be taken in response to the following circumstances:
- (1) to protect staff and other inmates from the threat of harm by the inmate;
  - (2) to minimize the risk of escape by the inmate or others influenced by his actions;
  - (3) to preserve order where other methods of control have failed; or
  - (4) to provide necessary control while completing an investigation.

**.1302 PROCEDURE**

- (a) Inmates referred for consideration for an intensive control assignment will typically have been confined through administrative segregation procedures and referred for subsequent intensive control assignment by a facility classification committee. In exceptional cases, referral may be made directly by facility administrator or designee, but typically referrals will be initiated subsequent to a facility classification action properly reviewed and documented.
- (b) Referrals for intensive control assignment will be initiated at the facility level and referred to the appropriate Director's Classification Authority at the Division of Prisons authorization level for all male inmates and to the appropriate Director's Classification Committee for all female inmates. Such requests and action will be processed through the use of the Control Action (IS11) automated record screen process and supported by explanatory comments by appropriate authorizing reviews. Comments are required at each level of action.
- (c) The Facility Committee for all inmates and the Director's Classification Committee for female inmates shall consist of at least three members. After review, the inmate will be informed of the reasons isolation is being imposed and will be given the opportunity to speak about any matters relevant to the control action circumstance currently under review. Should the facility committee

and the DCA or the Female Command DCC determine that continued isolation and control confinement is appropriate, each will note its findings in the appropriate comment section of the Control Action (IS11) automated screen record process. All decisions must be reviewed and approved by the appropriate authorizing authorities.

(d) Procedures for the Director's Classification Authority (DCA) for male inmates and the Director's Classification Committee (DCC) for female inmates.

(1) Every male inmate considered for intensive control shall be entitled to an impartial hearing before the Director's Classification Authority. Every female inmate considered for intensive control shall be entitled to an impartial hearing before the Director's Classification Committee. No staff member who provides information against the accused or initiates the referral action may serve as the Director's Classification Authority or as a member of the Director's Classification Committee. The inmate shall receive written notice of the hearing at least forty-eight (48) hours before the hearing takes place. This written notice must reasonably inform the inmate of the reasons for intensive control consideration. (4-4302)

(2) At the hearing, the inmate shall be confronted with any relevant information tending to indicate that confinement in intensive control is necessary. The content of psychiatric, psychological and classification reports need not be released since release may undermine the subsequent efforts to treat mental disorders or other significant problems and to rehabilitate offenders. The name of the person supplying the information need not be disclosed where the threat of reprisal exists. The inmate will be given the opportunity to refute the information as presented and may submit any relevant information in his or her own behalf.

(3) If the inmate has been found guilty of a major infraction by a disciplinary hearing authority as a result of the incident from which the classification review arises, the Director's Classification Authority or the Director's Classification Committee may rely on these findings. Otherwise, the DCA/DCC must make its own findings of facts. In these cases, the DCA or the DCC chairperson will determine whether the complexity of the issue or the illiteracy of the inmate makes it unlikely that he or she will be able to collect and present the evidence necessary for an adequate presentation of the case. If so, the DCA or the DCC chairperson shall appoint a member of the staff of the facility to which the inmate is assigned to assist the inmate with his or her presentation.

(4) At the hearing, the Director's Classification Authority/Director's Classification Committee will review the factors relevant to a final decision. Neither the staff member presenting the case nor representatives of the referring unit shall be allowed to participate in the actual decision-making process. For female inmates being reviewed by the Director's Classification Committee the inmate will leave the hearing room and the committee membership will discuss the factors relevant to a final decision. If the Director's Classification Authority or the Director's Classification Committee determines that, based on the disciplinary report or the information presented, intensive control is appropriate, the inmate will be classified in that status. In all such cases, the inmate involved shall be entitled to a written summary of the facts upon which the DCA/DCC relied in making the determination. If the DCA/DCC differs with the referring facility's recommendation and

decides intensive control is inappropriate, the DCA/DCC shall make a recommendation to the Manager of Classification, the Assistant Director of Support Services or other designated approving authority who will confer with the appropriate Region Director/Female Command Manager or designee prior to rendering a final decision.

- (e) Inmates assigned to intensive control will have their assignments reviewed by a Director's Classification Authority for male inmates and by a Director's Classification Committee for female inmates at least once every six months. Facility authorities may with appropriate documentation authorize the release of an inmate from intensive control. Inmates who are validated Level III STG members must be reviewed by a DCA/DCC prior to removal from ICON. It will be the responsibility of the facility to refer all validated inmates to the DCA if male and to the DCC if female. The divisional classification coordinator will then ensure that the Chief of Security's Office is notified of the inmate's return to the regular population for referral to the STGMU screening committee.
- (f) Therapeutic Control: Therapeutic control is a status that recognizes the need for security as well as the need for treatment of mental illness. In this status the inmate conditions of confinement as well as control status may be altered using established procedures outlined in this policy and developed and adopted by the facilities Inpatient/Residential mental health services.

Housing assignment for inmates assigned to ICON, where it has been determined by the Psychiatric/Psychological staff that there is a need for residential mental health housing as the inmate can not be treated on an outpatient basis, will be provided by transfer to a residential facility designated to provide those services.

- (1) Inmate's assigned to ICON who have been diagnosed or is diagnosed with a mental illness, the mental health staff will evaluate and determine if the inmate meets the requirements for therapeutic control. If the inmate meets the requirements, the mental health staff at a facility designated for therapeutic control housing will be contacted. If the therapeutic control staff agrees, the inmate will be transferred as soon as possible. If there is a disagreement as to the appropriateness of a case, the Director of Mental Health Services will make the final decision.
- (2) Referral for therapeutic control may occur during the initial referral for a control status and should be documented on the IS11 comment screens for consideration by the reviewing authorities.
- (3) For those inmates already assigned to ICON and are subsequently diagnosed with a mental illness, referring authorities will make appropriate comments on the IS11 (F15) comment screen documenting the need for mental health treatment and assignment to therapeutic control.
- (4) Upon assignment to a facility designated for therapeutic control housing, the inmate will remain on ICON and all conditions of confinement will be adhered to as provided in policy Chapter C Section .1200 and will be afforded therapeutic treatment for the diagnosed mental illness.

- (g) Therapeutic control inmates may be reviewed at any time during the control period. A Therapeutic Control Committee will consist of three (3) members. These members will be the Unit Manager and Psychological Program Manager or their designees and either the Assistant Superintendent for Programs or Assistant Superintendent for Custody/Operations. The Classification Coordinator will also be present during the review hearing to ensure proper policy and procedures are being followed. Only the three (3) committee members will vote on a decision. A majority decision will be required to finalize the action. The case will be presented by the Psychologist assigned to the Therapeutic Control housing unit.
- (h) In an effort to return the inmate to the regular population, the facility may in the scope of providing mental health treatment, employ other techniques and strategies that may not be afforded to inmates assigned to ICON housing. The following facilities may submit a petition for temporary suspension of Conditions of Confinement (DC-556) thru the appropriate chain of command for review by the facility head:

NCCIW  
Central Prison  
Maury Correctional Institution  
Alexander Correctional Institution

If approved, strict security measures should be maintained; however, MCON inmates may be allowed to integrate with ICON inmates for treatment team purposes.

- (i) Inmates removed from therapeutic control (ICON) status as result of an acceptable program performance will be placed in the mental health out-patient population for housing.

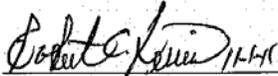
### **.1303 TEMPORARY TRANSFER**

Generally, inmates considered for intensive control units will be temporarily assigned to an institution pending their hearing before the DCA. If a hearing is held at the receiving institution, the chairperson of the reviewing classification committee will see that the necessary information to complete the record is gathered from both the sending and receiving facilities and that a full record is immediately forwarded through the appropriate chain of command to the appropriate DCA.

### **.1304 APPROVING AUTHORITY**

- (a) The approving authority for assignment to intensive control is the Director of Prisons or designee, e.g. Director of Support Services, Region Directors or designees, Assistant Director for Auxiliary Services, and Manager of Classification or designee. The results of each request will be forwarded to the approving authority for final action through the automated Control Action (IS11) record process.
- (b) All initial assignments to Therapeutic Control must be approved by the Section Chief for Mental Health Services or their designee. On subsequent reviews, the final decision is made by the Therapeutic Control Committee. The approving authority for cases being reviewed that are assigned to therapeutic control (ICON) is the Region Director, Assistant Director for Auxiliary

Services, Manager of Classification or their designees. The results of each request will be forwarded to the approving authority for final action through the automated control action (FS11) record process.

  
Director of Prisons      Date

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