



# NEW MEXICO CORRECTIONS DEPARTMENT

Secretary  
Alisha Tafoya Lucero

CD-080100 Institutional Classification, Inmate Risk Assessment and Central Office Classification	Issued: 2/1/01 Effective: 2/1/01	Reviewed: 11/30/20 Revised: 8/24/16
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

## AUTHORITY:

NMSA 1978, Sections 33-1-6, 31-5-17, 31-5-4 and 31-5-10 as amended.

## REFERENCE:

- A. ACA Standard 2-CO-4A-01, 2-CO-4B-01, 2-CO-4B-02, 2-CO-4B-03, *Standards for the Administration of Correctional Agencies*, 1993.
- B. ACA Expected Practices 5-2C-4132, 5-5A-4285, 5-5A-4286, 5-5B-4295, 5-5B-4296, 5-5B-4297, 5-5B-4298, 5-5B-4299, 5-5B-4300, 5-5B-4301, 5-5B-4302, 5-5B-4303, 5-5B-4305, 5-5E-4429 and 5-5F-4444, *Performance Based Expected Practices for Adult Correctional Institutions*, 5<sup>th</sup> Edition.

## PURPOSE:

- A. To provide guidelines for institutional security levels and inmate custody level assignments.
- B. To provide criteria to assigned Classification staff for objective risk management and assessment.
- C. To ensure that a management information system is maintained within the New Mexico Corrections Department (NMCD) for all persons committed to its care in which all major decisions, pertinent background and events are recorded.
- D. To set standards and consistency in the methods by which the NMCD identifies inmates' custody, programming and special needs. **[5-5B-4305]**
- E. To provide a system for:
  1. Continued monitoring and tracking of each inmate's program accomplishments during confinement.
  2. Information to assist Classification staff so they can properly assess the custody level and needs assessment of each inmate to determine the appropriate facility and program assignment.
  3. Inmate participation in the Classification system through assigned Classification staff at the facility level.
  4. A classification review and appeal process. **[2CO-4B-03]**

**APPLICABILITY:**

Director and Deputy Director of Adult Prisons Division, Central Office Classification Bureau, Facility Wardens, Unit Managers, Program Managers, Classification Staff, Inmates and Classification Committees at all institutions.

**FORMS:**

- A. **Intake Screening** form (CD-080102.1)
- B. **Initial Custody Scoring** form (CD-080102.2)
- C. **Reclassification Scoring** form (CD-080102.3)
- D. **Custody Level Scale** form (CD-080102.4)
- E. **Supervisory Review** form (CD-080102.7)
- F. **Classification Committee** form (CD-080102.8)
- G. **Classification Committee Hearing Notice** form (CD-080102.9)
- H. **Inmate Classification Appeal** form (CD-080102.10)
- I. **Contact Chrono** form (CD-080102.11)
- J. **International Prisoner Transfer Notification and Acknowledgment** form (CD-080102.12)
- K. **International Prisoner Transfer Application Questionnaire** form (CD-080102.13) (4 Pages)
- L. **Certified Case Summary for State Inmate** form (CD-080102.14) (4 Pages)
- M. **Pending Charges** form CD-080102.15

**ATTACHMENTS:**

- A. **Level IV Table of Services** (CD-080101.A)
- B. **International Prisoner Transfer Program Synopsis** Attachment (CD-080102.A)
- C. **International Prisoner Transfer Treaty Partners of the U.S.** Attachment (CD-080102.B)
- D. **Instructions for Completing the Certified State Case Summary** forms Attachment (CD-080102.C) (4 Pages)
- E. **Severity of Offense Scale** Attachment (CD-080103.A)(38 pages)
- F. **Disciplinary Offense Scale** Attachment (CD-080103.B) (2 Pages)

**DEFINITIONS:**

- A. *Absconder*: Any probationer or parolee who, while under the supervision of the Probation and Parole Division, changes residence or leaves the jurisdiction without permission and/or ceases reporting or is otherwise not available for supervision.
- B. *Active Felony Warrant-No Detainer*: A written legal writ authorizing the arrest of a specific individual for felony charges but the detaining agency is not requesting to place a hold on the individual.

- C. Active Misdemeanor Warrant-No Detainer: A written legal writ authorizing the arrest of a specific individual for misdemeanor charges but the detaining agency is not requesting to place a hold on the individual.
- D. Admission Summary: The summary prepared by RDC Classification Officers to provide an overall profile of all newly committed and returning inmates.
- E. Central Office Classification Bureau: A group of classification specialists at the Central Office level who comprise the Operational Classification Unit of the Adult Prisons Division. The Classification Bureau Chief monitors the overall responsibilities of the group.
- F. Classification: The process by which inmates are regularly reviewed to determine their level of custody and facility assignment, as well as programs and treatment needs.
- G. Classification Committee: For purposes of this policy:
1. At facilities/units with Unit Management the Classification Committee shall be composed of the Unit Manager, Classification Supervisor, or Program Manager as well as a security representative, Sergeant or above. For Special Management a representative from the Behavioral Health shall serve on the classification committee as required by policy.  
  
If a Unit Manager, Classification Supervisor or Program Manager is not available; a classification officer with over one year of experience in classification may serve on the Classification Committee as acting Classification Supervisor. If a Sergeant or above is not available, a Correctional Officer may serve as acting Sergeant.
  2. At facilities without Unit Management the Classification Committee shall be composed of the Classification Supervisor or Program Manager as well as a security representative, Sergeant or above.
- H. Classification Officer: A correctional employee responsible for the inmate's classification within the facility. The Classification Officer is responsible for managing the inmate's case in relation to good time, program assignment and acts as a liaison between the public, administration and other agencies. The Classification Officer is also responsible for the assigned duties and functions detailed in this NMCD policy.
- I. Classification Supervisor: A correctional employee assigned to oversee the classification system within each assigned facility. At facilities without a Classification Supervisor, the Unit Manager or Program Manager shall be responsible for the duties of the Classification Supervisor.
- J. COMPAS: The Correctional Offender Management Profile for Alternative Sanctions is a statistically based assessment designed to assess needs (and certain risk) factors by providing valid measurement of the relevant risk/needs dimensions.

- K. Criminal Management Information System (CMIS): An automated computer system utilized by the Corrections Department for the purpose of tracking the status of offenders.
- L. Custody Levels: An objective assessment of each inmate's risk of violence and escape. These include Level I, II, III and IV. Female inmates should be scored to determine their Custody Level for programming assignments. The Custody Level will be utilized to determine each inmate's housing status.
- M. Detaining Agency: The agency that issues a detainer, indictment, warrant or criminal complaint includes a District Attorney's Office, Federal law enforcement agency (e.g. FBI, U.S. Marshals, ICE, Bureau of Alcohol, Tobacco and Firearms), U.S. or State Attorney General's Office, police departments, probation/parole officers and sheriff's departments.
- N. Discretionary Reviews: Classification reviews that will be conducted on an inmate at the discretion of the Classification Supervisor or Officer.
- O. Extended Care Unit: The housing unit located at Central New Mexico Correctional Facility (CNMCF) which has been designated to house inmates who are considered by medical staff to have severe limitations on physical performance and capacity for exercise and who do not have a history of known management/behavior problems.
- P. Felony Detainer: A written request from a detaining agency to place a hold on a person who has been formally charged or convicted with a crime, probation violation or parole violation. This request must be accompanied by a formal written charging document (e.g. grand jury indictment, criminal information, warrant, judgment and sentence, etc.).
- Q. Gender-Responsive: Taking account of the differences in experience, which men and women bring to the criminal justice and corrections systems and adjusting our strategies and practices in ways that are appropriately responsive to those differences.
- R. Inconclusive NCIC: Information obtained from the National Crime Information Center (NCIC) that indicates an inmate has an incomplete NCIC Triple I. An incomplete NCIC Triple I is one where the disposition on a *previous* (and *not* the current) offense/charge is questionable in terms of whether the charge is still pending.
- S. Initial Classification Review: Classification review conducted on inmates received at the Reception and Diagnostic Center.
- T. Facility Inmate File: The compilation of information as it relates to the inmate's criminal history, institutional status and adjustment and classification documents. It is also used as a means of tracking an inmate's sentence.
- U. Interstate Corrections Compact Inmates: New Mexico inmates placed in other states with whom the NMCD has specific contracts or inmates who are housed in New Mexico but serving a sentence from another state.

- V. Interstate Corrections Compact Administrator for Institutions: A Central Office Administrator assigned to implement and oversee the interstate compact process for inmates
- W. Mandatory Reclassification Reviews: Classification reviews that are conducted on a six-month or annual basis for all NMCD inmates.
- a. Maximum: Female inmates who are in Special Management status shall be approved for this housing status.
  - b. Medium: Female inmates whose custody score is Level IV shall be approved for this housing status.
  - c. Minimum: Female inmates whose custody score is Level I, II or III shall be approved for this housing status.
- X. Misdemeanor Detainer: A written request from a detaining agency to place a hold on a person who has been formally charged or convicted with a misdemeanor. This request must be accompanied by a formal written charging document.
- Y. Offender Management Program (OMP): A module within the Criminal Management Information System that provides a record of inmates' goals, activities and classes as well as inmates' participation in program assignments.
- Z. Program Assignment: Assignments which include, but are not limited to:
1. Vocational (all varieties), Adult Basic Education, college courses, etc.
  2. Residential Drug and Alcohol Program (RDAP).
  3. Group therapy, Anger Management, Sex Offender Treatment, etc.
  4. Special Management.
- AA. Program Provider: A staff member at the facility who works with inmates to provide education, addictions services, behavioral health or medical treatment and/or services.
- BB. Protective Custody Inmate: Inmate that requires separation from the general population based on the inmate's request and/or an in-depth review of the facts and documentation indicating that, if placed in general population, the inmate would be in jeopardy of serious bodily harm. An assessment by the classification committee shall determine the inmate's need for placement in either the Protective Custody Unit.
- CC. Reception and Diagnostic Center (RDC): The designated facility within the NMCD that conducts the initial classification process of court-ordered inmates into the Department to include sixty-day diagnostic evaluations.
- DD. RDC Programming: An inmate's participation in the RDC process to include any RDC related activities (i.e. Intake Admission Process, Initial Reception and Orientation and Initial RDC Classification).

- EE. Records Clerk: A correctional employee assigned as the custodian of the Facility Inmate Files.
- FF. Release Eligible Inmate: An inmate who has completed all of his or her basic sentence, including concurrent and consecutive, and who is serving his or her parole term in prison, but who can be released immediately with an approved parole plan and parole certificate.
- GG. Special Needs Inmates: Inmates whose mental and/or physical condition requires special accommodation by staff. Special needs inmates may include, but are not limited to, drug or alcohol addicts or abusers, the emotionally disturbed, mentally retarded, suspected mentally ill, physically handicapped, chronically ill, the disabled or infirm, those with documented custody issues and those with academic or learning disabilities. **[5-5B-4305]**
- HH. Security Threat Intelligence Unit (STIU) Memorandum: A memorandum developed by the STIU Coordinator which is provided to the Classification Supervisor containing background information on an inmates' potential threat to security.
- II. Supervisory Review: A Classification Review conducted by the Classification Supervisor, Unit Manager, or Program Manager that does not involve a classification committee hearing. These reviews do not require that a 48-hour notice be provided to the inmate. If the above individuals are not available, a classification officer with over one year of experience in classification may conduct the supervisory review as acting Classification Supervisor.
- JJ. Tier 2 Level III: Housing Units located at Lea County Correctional Facility (LCCF), North East New Mexico Detention Facility (NENMDF) or Guadalupe Count Correctional Facility that has been designated to house inmates who require separation from all other general population facilities, but are able to function among other Tier 2 Level III inmates. Orientation, program services and conditions of confinement are the same as those afforded to Level III inmates. **[4-4250]**
- KK. Transition Accountability Plan (TAP): The goals, activities and program assignments established for inmates to assist them in their re-entry to the community.
- LL. Transition Accountability Plan (TAP) Committee: A multidisciplinary team established within each institution, which meets to develop or modify the transition accountability plan for each inmate. The Committee Chairperson is the facility Classification Supervisor, Unit Manager or Program Manager. The membership includes the assigned Classification Officer as well as institutional representation from the Education Bureau, Behavioral Health Services, Medical Services and Security, Sergeant or above. If a Sergeant or above is not available, a Correctional Officer may serve as acting Sergeant.
- MM. Transport Order: An electronic form that authorizes an inmate's movement from one permanent facility to another. The Classification Bureau Chief or designee authorizes this Transport Order.

NN. Unit Manager: A Corrections Administrator who is responsible for the oversight of operations at designated units within a facility. At facilities without a Classification Supervisor, the Unit Managers shall be responsible for the duties of the Classification Supervisor.

OO. Verbal Notification of Felony Detainer: Initiated by the RDC classification staff or facility records staff and verbally issued at the request of a law enforcement agency or district attorney's office.

PP. Verbal Notification of Misdemeanor Detainer: Initiated by the RDC classification staff or facility records staff and verbally issued at the request of a law enforcement agency or district attorney's office.

QQ. Warden: Corrections Administrator designated to oversee the operations and program implementation at a Facility or a Facility Complex.

RR. Work Assignment: Assignments include but are not limited to Corrections Industries, porter, food service, outside work details, work crews, etc.

#### **POLICIES:**

- A. The NMCD shall establish procedures to implement and monitor an inmate's status relating to their risk assessment, program assignment, good time and release preparation. This will include consideration of any special needs of the inmate. The NMCD shall ensure that all inmates are classified into the most appropriate custody level based on security and custody considerations with the intent of balancing the inmate's program and treatment needs. **[2-CO-4A-01] [2-CO-4B-01]**
- B. A summary admission report for all new admission shall be prepared. The report includes, at a minimum, the following information: **[5-5A-4286]**
  - Legal aspects of the case;
  - Summary of criminal history, if any
  - Social history;
  - Medical, dental, and mental health history;
  - Occupational experience and interests;
  - Educational status and interests;
  - Vocational programming;
  - Recreational preference and needs assessment;
  - Psychological evaluation;
  - Staff recommendations;
  - Pre-institutional assessment information.
- C. The NMCD utilizes an objective rating process to assign inmates to the most appropriate custody level consistent with the safety of the general public, staff and other inmates.

- D.** The gender-responsive principles will be considered when developing and designing program assignments and classification plans for female offenders:
- Acknowledge that gender makes a difference;
  - Create an environment based on safety, respect and dignity;
  - Develop policies, practices and programs that are relational and promote healthy connections to children, family, significant others and the community;
  - Address substance abuse, trauma and behavioral health issues through comprehensive, integrated, and culturally relevant services and appropriate supervision;
  - Provide women with opportunities to improve their socioeconomic conditions; and,
  - Establish a system of community supervision and re-entry with comprehensive collaborative services.
  - Level I, II, and III female inmates may be housed and participate in programming together.
- E.** In the event of a significant facility disturbance or emergency situation, the Secretary or Deputy Secretary may declare an emergency. Such declaration shall suspend the provisions of this policy.
- F.** All case records shall be reviewed to ensure that they contain current and accurate information. **[2-CO-1E-09]**
- G.** Discrimination on the basis of disability in the provision of services, programs, and activities administered for program beneficiaries and participants is prohibited. **[5-5E-4429]**
- H.** Each inmate is assigned to a staff member to ensure supervision and personal contact; a unit management team may perform this function. **[5-5B-4299]**
- I.** The NMCD shall provide for a written inmate classification plan. The plan shall specify the objectives of the classification system and methods for achieving them, and it provides a monitoring and evaluation mechanism to determine whether the objectives are being met. The classification system shall include graduated release through a systematic decrease in supervision and corresponding increase in inmate responsibility. **[5-5B-4295]**  
**[5-5F-4444]**
- J.** The classification system specifies the level of custody required and provides for a regular review of each classification. **[5-5B-4296]**
- K.** The classification plan provides for maximum involvement of representatives of relevant institutional programs and the inmate concerned in classification reviews. **[5-5B-4297]**
- L.** The Department solicits and uses pre-institutional assessment information regarding the inmate's progress and adjustment. **[5-5B-4298]**
- M.** An inmate's classification status shall be reviewed at least every twelve (12) months. **[5-5B-4300]**



- N.** Male and female inmates, when housed in the same facility, will be provided separate sleeping quarters with equal access to all available services and programs shall be provided. Neither sex shall be denied opportunities solely on the basis of their smaller number in the population. **[4-4278]**
- O.** The classification system shall be used to divide the inmates into groups that reduce the probability of assault and disruptive behavior. At a minimum, the classification system evaluates the following: **[5-2C-4132]**
- Mental and emotional stability;
  - Escape history;
  - History of assaultive behavior;
  - Medical status;
  - Age; and
  - Enemies of record.
  - Male and female inmates shall be housed in separate cells/rooms.
- P.** The classification plan specifies criteria and procedures for determining and changing an inmate's program status; the plan includes at least one level of appeal. **[5-5B-4301]**
- Q.** Unless precluded for security or other substantial reasons, all inmates shall be allowed to appear at their classification hearing and shall be given notice at least 48 hours prior to the hearing; such notice may be waived by the inmate in writing. If security reasons preclude the 48-hour notification or preclude attendance, such circumstances will be documented on the classification documents. **[5-5B-4302]**
- R.** The classification plan specifies the conditions under which an inmate can initiate a review of progress and program status. **[5-5B-4303]**
- S.** The NMCD shall provide for a process for the identification of special needs inmates. **[5-5B-4305]**



# NEW MEXICO CORRECTIONS DEPARTMENT

Secretary  
Alisha Tafoya Lucero

CD-080101 Custody Level Designations and Security Levels	Issued: 2/1/01 Effective: 2/1/01	Reviewed: 11/30/20 Revised: 8/24/16
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

## **AUTHORITY:**

Policy *CD-080100*

## **INDEX:**

Table of Services Tier 1 and Tier 2 Level IV

## **PROCEDURES: [5-5B-4296] [5-5F-4444]**

### **A. Institutional Assignment:**

Assignment to a custody level does not grant the right to be assigned to, or remain at, a particular facility.

### **B. The following is a brief description of the eligibility criteria for the placement of inmates and the security level of each facility:**

#### 1. Level I Custody, General Population Assignment:

- a. Criminal background and record of institutional behavior indicate the ability to function appropriately and productively among staff and other inmates without the need for continuous staff supervision or a security perimeter (to include double fences with razor wire, armed towers and armed vehicle patrol).
- b. Level I facilities include Central Level I Unit, Springer Correctional Center (SCC).
- c. Level I inmates may be temporarily housed at the Penitentiary of New Mexico Level II Facility.

#### 2. Level II Custody, General Population Assignment:

- a. Criminal background and record of institutional behavior indicate that the inmate can function among staff and other inmates in a dormitory setting without presenting a significant risk to the safe, secure and orderly operation of the institution. There must be no history of recent violent incidents or recent escapes.

A significant threat does not exist to the safety of staff, other inmates or the community. Inmate may have the ability to work outside the confines of the facility with staff supervision without posing a risk of escape.

- b. Level II facilities include Central Level II Unit, Southern Level II Unit, Penitentiary of New Mexico Level II Unit, Western Level II Unit, Roswell Correctional Center (RCC), Springer Correctional Center (SCC), Western New Mexico Correctional Facility (WNMCF) and Otero County Prison Facility (OCPF).

3. Level III Custody, General Population Assignment:

- a. Tier I: Criminal background and record of institutional behavior indicate that the inmate requires placement within the confines of the security fences and armed vehicle patrols. Has the ability to function among other inmates in general population under staff supervision without posing a threat to the safety of other inmates, staff or to the security of the institution.

Tier 2: Criminal background and record of institutional behavior indicate that the inmate requires placement within the confines of the security fences and armed vehicle patrols. This group includes inmates who have been identified by the STIU as inactive security threat group, disruptive group or street gang members and have the ability to function among other STIU Identified inactive security threat group, disruptive group and street gang members.

- b. Level III facilities include the Lea County Correctional Facility (LCCF), Guadalupe County Correctional Facility (GCCF), New Mexico Women's Correctional Facility (NMWCF), Southern New Mexico Correctional Facility (SNMCF), Western New Mexico Correctional Facility (WNMCF), Central New Mexico Correctional Facility Extended Care Unit (CNMCF), and Otero County Prison Facility (OCPF).

4. Level IV Custody, General Population Assignment:

Tier I: Criminal background and institutional behavior indicate that the inmate requires the need for continued staff supervision and observation within the confines of the security fences and armed vehicle patrols. Has the ability to function in general population, but mandatory override prohibits a lower custody level. Inmate movement is limited to groups (up to 16 inmates) and inmates are placed under escort during any movement or group activity. Inmate movement for female inmates at WNMCF is limited to groups of up to 25 inmates. Programs, services and conditions of confinement are outlined in the table of services attachment *CD-080101.A*.

Tier II: Criminal background and institutional behavior indicate that the inmate requires the need for continued staff supervision and observation within the confines of the security fences and armed vehicle patrols. Has the ability to function in general population, but behavior prohibits a lower custody level. Inmate movement is limited to groups (up to 16 inmates) and inmates are placed under escort during any movement or group activity. Programs, services and conditions of confinement are outlined in the table of services attachment *CD- 080101.A*.

- a. Level IV facilities include Southern New Mexico Correctional Facility (SNMCF), Penitentiary of New Mexico (PNM South), and Western New Mexico Correctional Facility (WNMCF); Reception and Diagnostic Center inmates will be housed at Level IV custody until classified for transfer to the appropriate facility.
5. Special Management Assignment (Special Management Population) :
- a. Institutional behavior indicates the inability to function in general population because the inmate poses a threat to the safety of staff, other inmates or to the security of the institution. Requires separation from the general population with limited movement and activities under escort. Inmates in this status will progress to a general population facility.
  - b. Facilities include the Penitentiary of New Mexico South Unit (PNM-South), Western New Mexico Correctional Facility (WNMCF); and Central New Mexico Corrections Facility (CNMCF), MHTC
6. Special Management Assignment (Predatory Behavior Management Program, Drug Suppression Program):
- a. Institutional behavior threatens the security of the institution requiring separation from the general population. This behavior includes, but is not limited to, assault, escape, murder, inciting riots and planning or participating in security threat group activities. This behavior poses a high risk and inmates are not allowed to congregate with other inmates. Inmates may only be moved outside of their assigned cell with full restraints with an escorting officer. This status is also for inmates who require protection in a segregated unit while alternative housing is identified.
  - b. Facilities include the Penitentiary of New Mexico North Unit (PNM-North), Western New Mexico Correctional Facility (WNMCF); and Central New Mexico Corrections Facility (CNMCF), MHTC.



**NEW MEXICO CORRECTIONS DEPARTMENT** Attachment CD080101.A  
**LEVEL IV TABLE OF SERVICES**

<b>AREA</b>	<b>ITEM</b>	<b>Female Inmates Tier 1 ALLOWED</b>	<b>Tier 1 ALLOWED</b>	<b>Tier 2 ALLOWED</b>
<b>STATE- ISSUED PROPERTY</b>	State issued clothing	3 shirts and trousers, 7 socks, 7 under shorts, 1 pair shoes, and 1 laundry bag	3 shirts and trousers, 7 socks, 7 under shorts, 1 pair shoes, and 1 laundry bag	3 shirts and trousers, 7 socks, 7 under shorts, 1 pair shoes, and 1 laundry bag
	Linens	2 sheets, 1 pillow case, 2 blankets, a mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, a mattress, 2 towels	2 sheets, 1 pillow case, 2 blankets, a mattress, 2 towels
	Standard State issued hygiene items (Necessary items above the standard issue will be purchased by the inmate unless the inmate is indigent)	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper, and 1 deodorant	1 shampoo, 1 toothpaste, 1 safety toothbrush, 1 soap, 1 toilet paper, and 1 deodorant
	Foot locker (issued only if cell has no property storage)	1 foot locker	1 foot locker	1 foot locker
<b>PERSONAL PROPERTY</b>	Personal clothing	1 sweat pants, 1 sweat shirt, 3 tee shirts, and 1 gym shorts (must be gray with no emblems)	1 sweat pants, 1 sweat shirt, 3 tee shirts, and 1 gym shorts (must be gray with no emblems)	1 sweat pants, 1 sweat shirt, 3 tee shirts, and 1 gym shorts (must be gray with no emblems)
	Personal hygiene items (from Canteen)	Not to exceed two of any one item	Not to exceed two of any one item	Not to exceed two of any one item
	MP3 or Cassette Player, Tapes, Headphones	Yes. 1 MP3 player or AM/FM cassette walkman player with adapter, 1 pair headphones, and 10 cassette tapes.	Yes. 1 MP3 player or AM/FM cassette walkman player with adapter, 1 pair headphones, and 10 cassette tapes.	Yes. 1 MP3 player or AM/FM cassette walkman player with adapter, 1 pair headphones, and 10 cassette tapes.
	Watch	1 watch. <i>(Not to exceed \$50.00 in Value)</i>	1 watch. <i>(Not to exceed \$50.00 in Value)</i>	1 watch. <i>(Not to exceed \$50.00 in Value)</i>
	Photos	1 photo album 12 x 12 inches	1 photo album 12 x 12 inches	1 photo album 12 x 12 inches
	Caps/Hats	1	1	1
	Shower shoes	1 pair	1 pair	1 pair
	Tennis shoes	1 pair <i>(Not to exceed \$75.00 in Value)</i>	1 pair <i>(Not to exceed \$75.00 in Value)</i>	1 pair <i>(Not to exceed \$75.00 in Value)</i>

<b>AREA</b>	<b>ITEM</b>	<b>Female Inmates Tier 1 ALLOWED</b>	<b>Tier 1 ALLOWED</b>	<b>Tier 2 ALLOWED</b>
			<i>Value)</i>	
	Drinking cup	1 as authorized	1 as authorized	1 as authorized
	Sunglasses	Allowed only if recommended by medical.	Allowed only if recommended by medical.	Allowed only if recommended by medical.
	Prescription glasses	1 clear lenses	1 clear lenses	1 clear lenses
	Correspondence	10 letters (maximum allowed in possession at any one time; unlimited receipt, but must destroy or send home any correspondence in excess of maximum allowable amount)	10 letters (maximum allowed in possession at any one time; unlimited receipt, but must destroy or send home any correspondence in excess of maximum allowable amount)	10 letters (maximum allowed in possession at any one time; unlimited receipt, but must destroy or send home any correspondence in excess of maximum allowable amount)
	Wedding ring	1 only	1 only	1 only
	Earrings	2 pair value under \$25	None	None
<b>HYGIENE</b>	Razors (controlled issue only)	1 in possession;	1 in possession;	1 in possession;
	Showers	1 X a day during scheduled tier time	1 X a day during scheduled tier time	1 X a day during scheduled tier time
<b>CANTEEN</b>	Canteen	\$55 a week maximum purchase Maximum of 25 food items per week Make up	\$55 a week maximum purchase Maximum of 25 food items per week	\$55 a week maximum purchase Maximum of 25 food items per week
	Stinger	1 purchased through the canteen	1 purchased through the canteen	1 purchased through the canteen

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**LEVEL IV TABLE OF SERVICES**  
(Continued)

<b>AREA</b>	<b>ITEM</b>	<b>Female Inmates Tier 1 Allowed</b>	<b>Tier 1 ALLOWED</b>	<b>Tier 2 ALLOWED</b>
<b>RELIGION</b>	Religious Items	<ul style="list-style-type: none"> <li>• One item to be worn around the neck (necklace or medicine bag)</li> <li>• 2 Small religious items (rosary, feather, etc.)</li> <li>• 2 religious book (Bible, Koran, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>• One item to be worn around the neck (necklace or medicine bag)</li> <li>• 2 Small religious items (rosary, feather, etc.)</li> <li>• 2 religious book (Bible, Koran, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>• One item to be worn around the neck (necklace or medicine bag)</li> <li>• 2 Small religious items (rosary, feather, etc.)</li> <li>• 2 religious book (Bible, Koran, etc.)</li> </ul>
	Religious Programs	1 Service, Group setting as appropriate	1 Service, Group setting as appropriate	Volunteer religious advisor approved by Warden. Chaplain visits, TV programs.
	For Native American inmates: pipe and smudge stick	2 x a month (in cell or in group at the discretion of the Warden)	2 x a month (in cell or in group at the discretion of the Warden)	2 x a month in cell
	For Native American inmates: access to sweat lodge	1 time every 30 days for 6 hours. # of inmates participating at one time may be limited to a maximum number, at the discretion of the Warden.	1 time every 30 days for 6 hours. # of inmates participating at one time may be limited to a maximum number, at the discretion of the Warden.	1 time every 30 days for 6 hours. # of inmates participating at one time may be limited to a maximum number, at the discretion of the Warden.
<b>RECREATION HOBBY CRAFT</b>	Recreation (may wear gray sweats)	7 days per week in groups of no more than 25 inmates. Tier time during inclement weather.	7 days per week in groups of no more than 16 inmates. Tier time during inclement weather.	7 days per week in groups of no more than 16 inmates. Tier time during inclement weather.
	Tier Time	4 hours or more(at the discretion of the Deputy Warden 7 days per week	4 hours or more(at the discretion of the Deputy Warden) 7 days per week	2-4 hours(at the discretion of the Deputy Warden 7 days per week
	Hobby Craft Material	As approved by Deputy Warden	As approved by Deputy Warden	As approved by Deputy Warden
<b>VISITING/ TELEPHONE</b>	Visiting	A combination of 3 contact visits with immediate family; or 3 non-contact visits per	A combination of 3 contact visits with immediate family; or 3 non-contact	3 non-contact visits per week; maximum of 2 hours per visit. Times and schedule to be determined



<b>AREA</b>	<b>ITEM</b>	<b>Female Inmates Tier 1 Allowed</b>	<b>Tier 1 ALLOWED</b>	<b>Tier 2 ALLOWED</b>
		week maximum of 2 hours per visit. Times and schedule to be determined by the facility Warden	visits per week maximum of 2 hours per visit. Times and schedule to be determined by the facility Warden.	by the facility
	Telephone	Unlimited during tier time.	Unlimited during tier time.	Unlimited during tier time.
<b>TV(approved but not provided)</b>	Television	1 approved television (12" or 13")	1 approved television (12" or 13")	1 approved television (12" or 13")
<b>PROGRAMS</b>	Education	Yes, as determined by TAP committee	Yes, as determined by TAP committee	Yes, as determined by TAP committee
	Group	Yes, Monday through Friday. Activities and schedule to be determined by the facility.	Yes, Monday through Friday. Activities and schedule to be determined by the facility.	Yes, Monday through Friday. Activities and schedule to be determined by the facility.
	Work	Yes, as determined by TAP committee	Yes, as determined by TAP committee	Yes, as determined by TAP committee
<b>LEGAL ACCESS</b>	Legal Access	Per <i>CD-121000</i>	Per CD-121000	Per <i>CD-121000</i>
	Attorney Phone Calls	Per <i>CD-150400</i>	Per CD-150400	Per <i>CD-150400</i>
	Attorney Visiting	Yes	Yes	Yes
	Legal Materials	Must fit in footlocker (or designated in cell storage area); excess legal material to be handled pursuant to <i>CD-150202</i> .	Must fit in footlocker (or designated in cell storage area); excess legal material to be handled pursuant to <i>CD-150202</i> .	Must fit in footlocker (or designated in cell storage area); excess legal material to be handled pursuant to <i>CD-150202</i> .
<b>LIBRARY AND CORRESPONDENCE</b>	Personal Reading Material	3 books and 3 magazines Excluding program materials	3 books and 3 magazines Excluding program materials	3 books and 3 magazines Excluding program materials
	General Library	Weekly access to book cart or to the general library	Weekly access to book cart or to the general library	Weekly access to book cart or to the general library
	Writing Material	5 security pens; 2 tablets or comparable quantity of writing paper	5 security pens; 2 tablets or comparable quantity of writing paper	5 security pens; 2 tablets or comparable quantity of writing paper
<b>MEALS</b>	Meals	3 meals outside of cell 20 minutes	3 meals outside of cell 20 minutes	2 meals outside of cell 20 minutes



# NEW MEXICO CORRECTIONS DEPARTMENT

Secretary  
Alisha Tafoya Lucero

CD-080102 Institutional Classification	Issued: 2/1/01 Effective: 2/1/01	Reviewed: 11/30/20 Revised: 8/24/16
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

## AUTHORITY:

Policy *CD-080100*

## INDEX:

- A. Intake Admission Process;
- B. Initial Reception and Orientation;
- C. Initial Classification at RDC;
- D. Mandatory and Discretionary Initial Classification Committee Reviews;
- E. Initial Orientation at Receiving Facilities;
- F. Institutional Reclassification Reviews;
- G. Health Services Transfers;
- H. Removal From General Population;
- I. Placement in Special Management;
- J. Special Management Reviews;
- K. Placement in Protective Custody;
- L. Release from Protective Custody;
- M. Emergency Transfers;
- N. Interstate Corrections Compact Transfers;
- O. International Transfers of Foreign Nationals;
- P. Institutional Classification Appeals;
- Q. Work Release Approval;
- R. Re-entry Planning;
- S. Responsibility of Administrators and Staff.

## PROCEDURES: [5-5A-4285]

Upon receipt at the New Mexico Corrections Department (NMCD) Reception and Diagnostic Center (RDC), inmates will participate in the following RDC process:

### A. Intake Admission Process: [5-2C-4132]

- 1) All inmates admitted to the custody of the NMCD are admitted initially through the RDC at Los Lunas, New Mexico (male inmates) and the New Mexico Women's Correctional Facility (NMWCF) located in Grants, New Mexico (female inmates). Admission of inmates to RDC includes, but is not limited to:
  - a. The following information must be entered/updated into the Criminal Management Information System (CMIS):

- 1) Court cases;
  - 2) Non-referred offenses;
  - 3) Referred offenses;
  - 4) Prison admissions;
  - 5) Legal status;
  - 6) Housing status;
  - 7) Initiating Good Time record;
  - 8) Detainers;
  - 9) Warrants.
- b. Photographing, fingerprinting, notation of tattoos and identifying marks, (this information must be entered/updated into the CMIS).
- c. Recording basic personal data and information, (the following information must be entered and updated into the CMIS):
- 1) Name;
  - 2) Aliases, monikers, nicknames, etc.
  - 3) Emergency contact person;
  - 4) Visiting list;
  - 5) Basic demographics;
  - 6) Date of Birth;
  - 7) Social Security Numbers (including any additional SSN inmate has used);
  - 8) Other numbers (e.g. FBI, ICE, etc.);
  - 9) Cautions (reason for cautions must be explained under “C” notes);
  - 10) Enemies.
- d. Completion of DNA sampling on applicable inmates. (This information must be entered/updated into the CMIS.) If an inmate refuses DNA sampling, the inmate shall be referred to the NMCD Inspector General for follow-up.
- e. An escape flyer shall be generated. (This information must be entered/updated into the CMIS.)
- f. Identification of inmate enemy concerns, NOTE: Enemies must be named specifically. (If John Smith is named as an enemy, it must be indicated which John Smith is the enemy. This information will be entered/updated in the CMIS.)
- 2.) New admissions to RDC shall be accepted at the Identification Area located in the Intake Unit of CNMCF or NMWCF and shall immediately, and before housing, go through the following: **[5-5A-4285] [2-CO-4A-01]**
- a. Inmates will go through a behavioral health screening. Information shall be entered into the CMIS.

- b. Inmates will go through medical screening. Information shall be entered into the CMIS.
- c. Inmates will go through a dental screening. Information shall be entered into the CMIS.
- d. Inmates will go through STIU screening to identify gang affiliation or risk issues. An STIU alert card will be generated on all inmates and forwarded to Records for placement in the inmate's hard file.
- e. Inmates will go through Classification screening during which the **Intake Screening** form (*CD-080102.1*) shall be completed by the Classification Officer. The information obtained will be based on an interview with the inmate. Following completion of this form, it shall be placed in the inmate's file. This information must be entered/updated into the CMIS by the classification officer.
- f. The inmates will be assigned an appropriate housing unit by the I.D. Lieutenant. This information must be entered/updated into the CMIS.
- g. Return from Court Admission: Inmates must be interviewed to determine disposition of court appearance or any new charges, custody issues, secure housing issues or medical needs.
- h. Inmates will go through PREA risk screening within seventy two (72) hours of arrival.

**B. Initial Reception and Orientation: [2-CO-4A-01] [2-CO-4B-01]**

- 1. After a sentencing court has committed an individual to the NMCD, or a Parole Revocation Warrant has taken place on a parolee, the inmate will be received at the RDC. Upon arrival of the inmate:
  - a. Commitment documents will be examined for accuracy. New commitments and diagnostic evaluations shall have a certified Court Order or Judgment and Sentence. Exceptions to this will be approved by the facility Warden. This information must be entered/updated into the CMIS.
  - b. An NMCD inmate number will be issued upon arrival. In the case that an inmate has previously served time and had previously been issued an NMCD number, that inmate will be issued that previous original number. This information must be entered/updated into the CMIS.
  - c. Inmates shall receive Initial Orientation in accordance with Inmate Orientation policy *CD-041000*.

2. During the reception period, the daily program for inmates will consist of admission-related activities.

**C. Initial Classification at the RDC: [5-5B-4296] [5-5B-4297]**

The RDC shall ensure that, except in unusual circumstances, initial reception, orientation and classification of inmates are completed within four (4) weeks after admission. Unusual circumstances that would prevent this from happening will require documentation in the inmate's file.

1. RDC Classification Officer:

- a. At initial classification, each inmate is assigned to a Classification Officer to ensure supervision and personal contact. The Classification Officer shall review all relevant casework materials. [5-5B-4299]
- b. The NMCD shall solicit and use pre-institutional assessment information regarding the inmate's progress and adjustment including, but not limited to, Judgment and Sentence, Pre-Sentence Report (PSR), and any prior commitment records available. [5-5B-4298]
- c. Admission Summary: The Classification Officer will complete the Admission Summary. The Classification Officer will complete the preparation of an Admission Summary report for all new admissions following an interview with the inmate. The report includes legal aspects of the case, details of criminal history, social history, occupational experience and interests, vocational programming, educational status and interests, recreational preference, psychological review, staff recommendations, and pre-institutional assessment information, STIU information and needs assessment. The Classification Officer will attempt to verify the inmate's version of the information provided at the initial interview through available records, NCIC, FBI Rap Sheets and telephone interviews. [5-5A-4286]
- d. The Classification Officer shall complete the **Initial Custody Scoring** form (*CD-080102.2*) or the **Reclassification Scoring** form (*CD-080102.3*) using the classification desktop in the CMIS. A copy of the **Initial Custody Scoring** form shall be provided to the inmate upon completion of the form.
  - 1) The inmate's custody score shall constitute the assigned custody level unless an override has been requested in accordance with provisions contained herein.
  - 2) All unclassified inmates at RDC will be considered as Level IV until a classification has been designated, unless the inmate requires segregation from the general population.

The Classification Officer is responsible for documenting program recommendations based on the inmate's COMPAS assessment and this information must be entered into the CMIS.

- e. The NMCD shall provide for identification of special needs inmates. Special needs inmates will be identified upon arrival to the RDC through the testing process by education, medical and behavioral health staff. The information will be submitted to the Classification Officer using the appropriate chronos. [5-5B-4305]
- f. Referral to the RDC Unit Manager or Classification Supervisor: Upon completion of the **Initial Custody Scoring** form, **COMPAS** and all other documents, the Classification Officer shall make a recommendation to the RDC Unit Manager or Classification Supervisor regarding the inmate's custody level, program and treatment needs, as well as facility assignment. Special needs inmates will be identified.
- g. The classification officer will complete the PREA risk screening form.

2. RDC Unit Manager or Classification Supervisor:

- a. The RDC Unit Manager or Classification Supervisor shall be responsible for approving the Classification Officer's recommendation regarding the inmate's custody level (not involving a discretionary custody override) program and treatment needs as well as facility assignment through a Supervisory Review.

If approved by the RDC Unit Manager or Classification Supervisor, the recommendation shall be forwarded to the Classification Bureau Chief for final custody decision and facility assignment via the CMIS.

Discretionary override recommendations by either the Classification Officer or the RDC Unit Manager or Classification Supervisor shall be forwarded by the RDC Unit Manager to the RDC Classification Committee.

Discretionary override information must be entered into the CMIS by the RDC Classification staff and must ensure that the Central Office Classification Bureau is provided with sufficient information.

- b. RDC Classification Agenda: The RDC Unit Manager or Classification Supervisor is responsible for developing a written agenda, utilizing the CMIS, indicating the names of the inmates to be reviewed at least forty-eight hours prior to the RDC Classification Committee hearings.

3. Security Threat Intelligence Unit (STIU) Coordinator:

- A. The Security Threat Intelligence Unit (STIU) Coordinator is responsible for providing an **STG Threat Assessment Investigation** containing the following information if applicable to the inmate:

The STIU Coordinator is responsible for ensuring an initial intake interview is conducted. The investigation should address current status in the group, rank, alliances, etc. The investigation shall address appropriate population placement. STG affiliation and/or STG validation.

- a. High profile STG inmate.
  - b. History of assaultive behavior toward inmates and/or staff.
  - c. Summary of any confidential information received regarding the inmate.
  - d. History of STG activities (past or present).
  - e. Summary of inmate's lockdown history.
  - f. STG alert form.
- B. Completed investigation and recommendation shall be forwarded to appropriate Unit Manager, Classification Supervisor, Classification Bureau Chief, and STIU Operations Manager
- C. The STIU Coordinator is responsible for ensuring that the **STG Alert** Form is placed in the inmate's file and is available to the RDC Unit Manager or Classification Supervisor prior to any RDC Supervisory Reviews or Classification Committee hearings.
4. RDC Classification Committee:
- a. The RDC Classification Committee shall review any recommendation for discretionary custody override and forward the committee's decision to the Classification Bureau for final action. This information must be entered into the CMIS.
  - b. All inmates scheduled for review by the classification committee will be afforded at least a 48-hour written notice of hearing. The inmate may waive the notice in writing.
5. RDC Re-entry Planning:
- If an inmate arrives at RDC with less than 180 days until projected release, the RDC classification staff shall be responsible for initiating re-entry planning in accordance with Re-entry Planning policy *CD-083000*. A progress report must be completed and placed in the inmates file on top of the Good-Time Figuring Sheet. (J Drive folder for parole plans or progress reports, accessible by all facilities).

**D. Mandatory and Discretionary Initial Classification Reviews:**

1. New Commitments: A mandatory initial classification review shall be conducted on all newly committed inmates received at RDC using the **Initial Classification Scoring** form (CD-080102.2).

Also, if the inmate's first six-month or annual review date for reclassification has not yet been reached, or whenever **new or additional information has been received** by *the NMCD that* would alter any of the factor scores, prior to the inmate's Mandatory Reclassification Review date, the initial custody scoring form will be used.

NOTE: The exception will be if an inmate receives a disciplinary report. In that case, the **Reclassification Scoring** form (CD-080102.3) will be used. Copies of the Scoring Forms will be provided to the inmate.

1. Parole Violators and Recently Discharged Inmates: An assessment of any RDC inmate who has either paroled or discharged from an NMCD facility within the past two years or has been transferred to the New Mexico prison system under the Interstate Compact shall be done using the **Reclassification Scoring** form (CD-080102.3).
2. Discretionary Initial Classification Reviews: Shall be conducted using the **Initial Classification Scoring** form (CD-080102.2). This will occur if the inmate's first review date for reclassification has not been reached. Reasons for initial discretionary reviews include the following:
  - a. Medical or behavioral health need;
  - b. Custody needs;
  - c. Security needs;
  - d. Program/services need change;

These reviews may also be conducted for any other reason deemed necessary by the Classification Officer or Classification Supervisor/Unit Manager/Program Manager that is documented in the record. Copies of the forms will be provided to the inmate.

When an inmate receives a finding of guilt on a misconduct report that will affect his or her custody level, then a mandatory classification review will be completed using **Reclassification Scoring** form (CD-080102.3) even if the inmate's current classification level was scored using the **Initial Classification Scoring** form and the inmate's first six-month review date for reclassification has not been reached.

3. The above information must be entered/updated into the CMIS.

**E. Orientation (facility specific) at Receiving Facilities:**



Inmates will be assigned to a classification officer to ensure supervision and personal contact upon arrival and within seven (7) days of admission to a facility other than RDC shall receive Facility Specific Orientation in accordance with Inmate Orientation Policy CD-041000. [5-5B-4299]

**F. Institutional Reclassification Reviews: [5-5B-4296] [5-5B-4301] [5-5F-4444]**

The NMCD shall provide for regular classification reviews for all inmates. During the Reclassification Review, the Classification Officer is responsible for updating the assessment forms as well as inmate enemy information and emergency contact information. This information must be updated into the CMIS. [5-5B-4300] [2-CO-4B-01]

1. Mandatory Reclassification Reviews:

- a. **Six Month Reclassification Reviews:** The Classification Officer shall assure that each inmate is reviewed at least once every six months for those inmates classified to Custody Levels II, III and IV including inmates on Interim and Pending Transfer Hold (PTH) status. The first reclassification review is due six months from the RDC initial classification review date.
- b. **Annual Reclassification Reviews:** Inmates whose custody level is I, or are in Special Management status, will be administered Reclassification Reviews on an annual basis. The first reclassification review is due one (1) year from the RDC initial classification review date.
- c. **Reclassification Scoring form:** At each six-month or annual reclassification review, the Classification Officer shall complete the **Reclassification Scoring form (CD-080102.3)**, using the classification desktop in the CMIS.

Once the form has been approved, a copy will be provided to the inmate. The inmate's custody score will indicate the inmate's custody level unless the Classification Officer has recommended an override.

- d. **Referrals to Classification Supervisor/Unit Manager/Program Manager:** The Classification Officer shall make recommendations to the Classification Supervisor/Unit Manager/Program Manager regarding the inmate's custody level as well as work or program assignments based on the information obtained from the custody and COMPAS assessment forms.

2. Discretionary Reclassification Reviews:

The following are to be considered as cause for discretionary reviews:

- a. Change in the inmate's custody level based on factors such as new disciplinary conviction, reversal of conviction or new warrants/detainers being issued;
- b. Decisions regarding work or program assignments, good time reviews and family visits;
- c. Medical or behavioral health needs;
- d. An inmate may initiate a review of his or her progress and program status provided that the inmate is able to provide documentation showing that a discretionary review is warranted. **[5-5B-4303]**
- e. Any other reason deemed sufficient by the Classification Officer and approved by the Classification Supervisor/Unit Manager/Program Manager.
- f. The Classification Officer shall make recommendations to the Classification Supervisor, Unit Manager or Programs Manager on all discretionary reviews. These referrals may or may not require completion of custody scoring forms. It will be at the discretion of the Classification Officer and Classification Supervisor/Unit Manager/Program Manager. Inmates will receive copies of all forms.
- g. If a discretionary review includes the completion of custody scoring form, then the next mandatory review will be either six months or one year following the date of that discretionary review.

3. Supervisory Review:

- a. The Classification Supervisor/Unit Manger or Program Manager shall review and take action on all recommendations from the Classification Officers regarding inmates' second or more family visits, work and program assignments, custody levels, Lump Sum Awards and the amount of monthly/quarterly good time awards for inmates engaged in programs recommended by the Classification Supervisor and approved by the Warden. This includes both mandatory and discretionary reviews.  
Certain decisions, such as termination and reinstatement of eligibility to earn good time, forfeiture and restoration of good time, discretionary overrides and transfer reviews, require review by the Classification Committee.  
**NOTE:** At private facilities the awarding of quarterly good time is subject to review by the NMCD Contract Monitor. The awarding of good time is subject to review by the Warden or Deputy Warden at all State Facilities.

All decisions shall be entered into the CMIS and a copy of the decision shall be provided to the inmate within two working days.

- b. The Classification Supervisor/Unit Manager/Program Manager shall develop a written agenda, using the CMIS, indicating the names of the inmates to receive Supervisory Reviews.
4. Classification Committee: The Classification Committee shall:
    - a. Approve or deny all recommendations for discretionary custody overrides.
    - b. Make a determination on referrals to the Central Office Classification Bureau regarding intra-state transfers:
      - 1) Best efforts will be made not to transfer inmates who are successfully participating in major programs (e.g. RDAP, Crossings, Corrective Thinking, and SOAR) until program completion.
      - 2) Intra-facility transfers of inmates between housing units (e.g. Southern Level II to Southern Level III) must be approved by the Classification Bureau based on recommendations from the Classification Committee.
      - 3) Facility staff is authorized to transfer inmates between housing units on “holding” status until a classification decision is made. However, it is the responsibility of the Facility Classification Supervisor, Unit Manager or Program Manger of the sending Unit to notify the Central Office Classification Bureau (via e-mail) of any intra-facility transfer that did not involve approval by the Classification Bureau, within one working day of the transfer. This notification must include the date of the transfer, the reasons for the transfer, and, if applicable, the dates of the inmate’s scheduled Classification Committee review.

Approve or deny initial family visit referral.

- a. It is the responsibility of the Classification Committee Chairperson to obtain an updated (within 90 days) NCIC Wants and Warrants printout as well as an updated photo on the inmate prior to making a referral recommendation for reduction in custody from Level III or higher to a Level I or Level II security facility. This will ensure that the inmate who was reviewed for either Level I or Level II custody does not have any outstanding warrants or detainers.
- b. Make referrals to the Deputy Director of Adult Prisons regarding interstate transfers.
- c. Make referrals to the Warden regarding work/school release approval.
- d. Make referrals to the Deputy Director of Adult Prisons or Classification Bureau Chief/Deputy regarding the placement of inmates in Special Management status.

- e. Make recommendations to the appropriate administrators regarding Termination, Reinstatement, Forfeiture, or Restoration of forfeited good time and Lump Sum Awards in accordance with the provisions outlined in the good time/meritorious deductions policies and the Lump Sum Awards policy.

5. **Procedural Requirements for Classification Committee: [5-5B-4297]**

- a. Classification Supervisor/Unit Manager/Program Manager:

The Classification Supervisor/Unit Manager/Program Manger is responsible for developing a written agenda, utilizing the CMIS, indicating the names of the inmates to be reviewed at least forty-eight (48) hours prior to the Classification Committee hearings. The Classification Supervisor/Unit Manager/Program Manger shall distribute the agenda to the medical, behavioral health and education staff as well as the institutional Security Threat Intelligence Unit Coordinator as determined by policy.

- b. Unless precluded for security or other substantial reasons, all inmates shall be allowed to appear at their classification hearing and shall be given notice at least forty-eight (48) hours prior to the hearing; such notice may be waived by the inmate in writing on the **Classification Committee Hearing Notice** form (*CD-080102.9*). The inmate may waive notice on this form. **[5-5B-4302]**

**G. Health Services Transfers:**

1. **Medical Transfers to and from the Long-Term Care Unit (LTCU):**

- a. Once it has been determined by medical staff that an inmate is appropriate for placement at the LTCU, the medical staff shall contact the Classification Bureau who will arrange for the transport of the inmate to the LTCU.
- b. After hours transports to the LTCU due to medical emergencies do not require that the Classification Bureau make the transport arrangements. However, the Classification Bureau should be notified of the transfer within a working day by the CNMCF Classification Supervisor/Unit Manager/Program Manager.
- c. Following an inmate's medical discharge from the LTCU, it is the responsibility of the CNMCF facility's Classification Supervisor/Unit Manager/Program Manager to make a determination regarding whether the inmate can be returned from the LTCU to the sending facility or must be transferred to another facility due to medical or security concerns.
- d. If there are no security or medical concerns (as determined by the CNMCF Classification Supervisor/Unit Manager/Program Manager), he or she shall

notify the Classification Bureau to arrange for the inmate's return to the sending facility.

- e. If there are security and/or medical concerns preventing the inmate's return to the sending facility, the inmate shall be referred for transfer by the Classification Committee to the Classification Bureau for placement in an alternate facility.
- f. When male and female inmates are housed in the same facility, separate sleeping quarters but equal access to all available services and programs shall be provided. Neither sex shall be denied opportunities solely on the basis of their smaller number in the population. [4-4278]

2. Mental Health Transfer To and From Mental Health Treatment Center (MHTC):

- a. Once it has been determined by mental health staff that an inmate is appropriate for placement at the MHTC, the Mental Health Director shall contact the Classification Bureau who will arrange for the transport of the inmate to the appropriate MHTC.
- b. After hours transports to the appropriate MHTC due to mental health emergencies do not require that the Classification Bureau make the transport arrangements. However, the CNMCF Classification Supervisor/Unit Manager shall notify the Classification Bureau of the transfer within one working day.
- c. Upon notification of an inmate's discharge from the appropriate MHTC by the Behavioral Health Director, it shall be the responsibility of the Classification Supervisor/Unit Manager/Program Manager at CNMCF or PNM VI to obtain the necessary information from appropriate mental health staff regarding whether the inmate can be returned to the sending facility or must be transferred to another facility due to mental health or security concerns.
- d. The Classification Supervisor/Unit Manager/Program Manager shall make an appropriate referral to the Classification Bureau regarding each inmate's placement. All discharged inmates must be reviewed by the Classification Committee.
- e. The Classification Bureau will arrange for the transport of the inmate from the appropriate MHTC based on the information provided by the Classification Supervisor/Unit Manager/Program Manager.

3. Transfers Based on Medical Restrictions:

(Note: These transfers are not to be considered as emergency transfers)

- a. Appropriate medical staff from the sending facility must contact the sending facility Classification Supervisor/Unit Manager/Program Manager regarding an inmate's documented medical restriction and need for transfer to another facility's general population.

- b. It is the responsibility of the sending facility's Classification Supervisor/Unit Manager/Program Manager to arrange for an appropriate referral by the Classification Committee to the Classification Bureau regarding the inmate's transfer based on the inmate's medical restriction.
  - c. It is the responsibility of the Classification Bureau to review and make a decision on the referral for transfer based on information provided by the sending facility's Classification Committee.
4. Extended Care Unit (ECU):
- a. Eligibility Criteria:
    - 1) Classified as custody Level III.
    - 2) Considered by medical staff to have severe limitations on physical performance and capacity to exercise.
    - 3) No history of known management/behavior problems and/or predatory behavior.
    - 4) No history of extensive institutional violence/disruptive behavior/escape history.
    - 5) No extensive history of gang/STG involvement.
    - 6) No extensive history of segregation placement.
    - 7) Additional factors to be considered on a case-by-case basis include the following:
      - 65 years of age or older;
      - Need for 24-hour medical care;
      - Chronic illness;
      - Insulin dependence;
      - Wheelchair bound.
    - 8) The Classification Bureau Chief or Deputy Classification Bureau Chief has the discretion to determine the placement of any other inmate in the Extended Care Unit (ECU).
  - b. Procedures for Placement:
    - 1) Medical Director:

The Medical Director will provide names of inmates who meet the Extended Care medical criteria to the Warden and Classification Supervisor/Unit Manager/Program Manager of the facility where the inmates are located with copies provided to the Classification Bureau Chief.
    - 2) Classification Reviews:

- The Classification Supervisor/Unit Manager/ Program Manager shall review all identified inmates to determine whether they meet the eligibility criteria for assignment to the Extended Care Unit.
- Inmates who meet the eligibility criteria shall be referred by the Classification Committee to the Central Office Classification Bureau.
- The Central Office Classification Bureau will make final decisions on the assignment of inmates to the Extended Care Unit.
- The Central Office Classification will coordinate the transports of inmates to the Extended Care Unit.

c. Removal from Extended Care Unit:

- 1) Any inmate who no longer meets the eligibility criteria for the Extended Care Unit shall be referred to the Classification Bureau Chief for placement in another facility by the Classification Committee.

#### H. Removal from General Population:

If housing of an inmate in the general population would be inconsistent with the safety of the inmate, staff or the security of the institution, the Shift Supervisor or Unit Manager may order the placement of an inmate in Temporary Restrictive Housing status. The Shift Supervisor shall complete the **Restrictive Housing/PHD Placement Form/Temporary Restrictive Housing** form (CD-141500.1) and forward a copy of the document to the inmate within one working day.

#### I. Placement in Special Management:

An inmate may be classified to Special Management status based on the criteria outlined in CD policy chapter 14 *Special Management Inmates*.

#### J. Special Management Reviews:

1. Any inmate who has been placed in Special Management shall meet the criteria established under CD policy chapter 14 *Special Management Inmates*.

#### K. Placement in Protective Custody:

1. Former New Mexico Law Enforcement Officers, Correctional Officers and Public Officials in high profile positions shall be separated from the general population upon their arrival at the Reception and Diagnostic Center. They shall be reviewed for placement at OCPF or LCCF GP-1.
2. Any inmate who requires protective custody shall be separated from the general population and processed in accordance with the procedures outlined in policy CD-141100.

**L. Release from Protective Custody:**

Inmates who are released from protective custody shall be processed in accordance with the procedures outlined in policy *CD-141100*.

**M. Emergency Transfers to a Special Management:**

Any emergency transfer to Special Management shall be initiated by the warden of the sending facility; approved by the Director of Adult Prisons and processed in accordance with the procedures outlined in CD policy chapter 14 *Special Management Inmates*.

**N. Interstate Corrections Compact Transfers:**

Inmates who require an interstate corrections compact transfer shall meet the eligibility criteria and shall be processed in accordance with the procedures outlined in policy.

**O. International Transfers of Foreign Nationals:**

The United States Department of Justice Criminal Division, Office of Enforcement Operations oversees the International Prisoner Transfer Program. This program maintains prisoner transfer treaties between the U. S. and other identified countries. This program allows inmates who are foreign nationals to complete serving sentences in their country of citizenship. It is the responsibility of the facility classification staff to ensure that foreign nationals have been given the opportunity to request international transfer. This notification shall be provided to foreign nationals during their orientation at the facility. At any time thereafter foreign nationals may request an international transfer. (See the **International Prisoner Transfer Program Synopsis Attachment (CD- 080102.A)** and the **International Prisoner Transfer Treaty Partners of the United States Attachment (CD-080102.B)**).

**1. General Criteria:**

- a. **Inmate must consent to the transfer:** Inmate must indicate in writing whether or not he or she is interested in International Transfer.
- b. **Inmate must have no pending charges:** Inmate must have no felony or misdemeanor detainers.
- c. **Inmate must have no pending legal proceedings:** This includes any direct appeals in any courts or any pending writs of habeas corpus.
- d. **Inmate must have no life sentence or indeterminate sentence:** Inmate must have a projected date for release on parole.
- e. **Inmate must have a minimum of eighteen months until projected release;**



2. Institutional Procedure:

- a. **Interview Inmate:** Eligible foreign nationals will be interviewed by the classification officer and shall sign the **International Prisoner Transfer Notification and Acknowledgement** form (*CD-080102.13*) indicating whether or not the inmate is interested in completing his or her sentence in the country of citizenship.
- b. **International Transfer Packet:** For those inmates who are interested, an International Transfer Packet needs to be completed. This packet contains the following:
  - 1) International Prisoner Transfer Notification and Acknowledgement form (*CD-080102.13*);
  - 2) International Prisoner Transfer Application Questionnaire form (*CD-080102.14*);
  - 3) Certified Case Summary for State Inmate form (*CD-080102.15*) see the Instructions for Completing the Certified Case Summary for State Inmate Attachment (*CD-080102.C*);
  - 4) Birth Certificate or copy of passport (if available);
  - 5) Judgment and Sentence;
  - 6) Pre-sentence Report or other document summarizing the offense;
  - 7) Sentence Calculation;
  - 8) Prison progress report (including security level, disciplinary reports, prison jobs, program participation, psychological evaluation and current medical condition).
  - 9) Immigration status (i.e. ICE detainer); and
  - 10) Family and Residence Information.
- c. Following completion, the International Transfer Packet is to be forwarded to the Classification Bureau Chief.

3. Required Levels of Approval:

Requests for International Transfer require the approval of the New Mexico Governor and the U. S. Department of Justice, International Prisoner Transfer Unit which considers the following:

- a. Number of years the inmate has resided in the United States.
- b. Likelihood of Social Rehabilitation with consideration of inmate's criminal history; seriousness of the offense; criminal ties to the sending and receiving countries; law enforcement concerns or needs and number of previous deportations and illegal reentries.

4. If approved by the Department of Justice, a Consent Verification Hearing must be arranged before a federal magistrate judge. At the hearing, once the inmate gives consent, the inmate's decision is irrevocable.

**P. Institutional Classification Appeals: [5-5B-4301] [2-CO-4B-03]**

1. An inmate who disagrees with an institutional classification decision has the right to appeal the action through established channels. The inmate may appeal the decision to the facility Warden and the Warden's decision will be the final authority. (**NOTE:** Classification Appeals for inmates in Special Management shall be handled in accordance with procedures in CD policy chapter 14 *Special Management Inmates*.) The Warden will assign a staff member to serve as the Institutional Classification Appeals Officer.

- a. A classification decision made by the Classification Supervisor, Unit Manager, or Program Manager through the Supervisory Review process or Classification Committee is subject to appeal. Classification issues which may be appealed to the Warden include, but are not limited to: decisions involving custody classification; work or education program assignments; inter/intra-state facility transfers; family visits and good time decisions (except forfeiture and lump sum award of good time which are not subject to appeal);

**NOTE:** Forfeiture of Good Time is subject to appeal under the disciplinary policy. Classification decisions may be implemented during the appeal process.

- b. A written classification appeal should be filed using the **Inmate Classification Appeal** form (*CD-080102.10*) and submitted to the Institutional Classification Appeals Officer, who will log the appeal and assign an appeal number. The inmate must sign all classification appeals. Copies of classification appeals sent to persons other than the Institutional Classification Appeals Officers will be considered informational only and will not require a response.
- c. The appeal form will be used to briefly summarize the appeal. Additional information may be attached and given to the Institutional Classification Appeals Officer.
- d. The inmate must complete a separate appeal form for each issue appealed. The inmate must file an individual appeal.
- e. The inmate must file a classification appeal within fifteen (15) calendar days of the decision.
- f. The inmate must state the specific reasons he or she disagrees with the classification decision. Failure to do so may result in the classification appeal being returned to the inmate for completion.

- g. The Institutional Classification Appeals Officer will note the date that the classification appeal was received and review the appeal for proper time limits and necessary information. An appeal that is untimely, incomplete or otherwise improperly submitted will be returned to the inmate with an explanation as to why it is being returned.
- h. The Institutional Classification Appeals Officer will conduct an investigation and complete the Classification Appeals Officer's portion of the Classification Appeal form.
- i. The investigation by the Institutional Classification Appeals Officer and recommendation will be completed and delivered to the Warden for review within twenty (20) calendar days from receipt by the appeals officer of the inmate's classification appeal.
- j. The Warden will make a decision regarding the appeal within fifteen (15) calendar days of receipt by the Warden of the classification appeal. The Warden may remand a classification appeal to the Classification Committee based on procedural error made by the Classification Committee.
- k. The inmate shall be informed in writing of the Warden's decision on the classification appeal within 15 calendar days of the Warden's receipt of the appeal. Accompanying the Warden's decision shall be a brief and clear explanation of the reasons for the decision
- l. The decision of the Warden is final.

**Q. Work/School Release Approval:**

Any inmate who is approved by the Classification Committee for work or school release must be processed in accordance with the procedures outlined in policy *CD-100300*, Work/School Release.

**R. Re-entry Planning: [2-CO-4B-01]**

The Classification Supervisor/Unit Manager/Program Manager will coordinate and ensure that Classification Officers conduct re-entry planning, to include parole board scheduling, in accordance with the classification procedures and timelines outlined in policy (*CD-083000*), **Re-entry Planning and Transition Process for Inmates Releasing to the Community from Incarceration.**

**S. Responsibility of Administrators and Staff:**

- 1. Warden:

Each Warden shall be responsible for the following:

- a. Review and give final decision on classification appeals within his or her facility.
- b. Review and make decisions on classification committee recommendations for work or school release.
- c. The Warden shall be responsible for initiating Emergency Transfers to a Special Controls Unit.

2. Classification Supervisors, Unit Managers and Program Managers: [5-5B-4295]

Each Classification Supervisor, Unit Manager or Program Manager (at facilities without a Classification Supervisor) shall be responsible for the following:

- a. Supervise and evaluate the work performance of Classification Officers.
- b. Track and Schedule 90 day TAP Committee Reviews.
- c. Conduct Classification Committees and Supervisory Reviews of inmates for the purpose of making recommendations and decisions on inmate work and program assignments, inmate transfers and custody changes, and placement of inmates into Special Management.
- d. Review and quality control of all work produced by Classification Officers to include, but not limited to file information and CMIS information regarding override and custody recommendations, reclassification reviews, program assignments, good time reviews, quality assurance reports, victim identification, sex offender information and REI, reports.
- e. Monitor the custody levels of inmates using the CMIS to determine whether pending assessments are being followed up and whether mandatory and discretionary overrides still apply.
- f. Coordinate the exchange of progress reports for inmates who are under the Interstate Compact. These reports must be submitted to the Interstate Compact Coordinator on a semi-annual basis (January through June and July through December).
- g. Conduct quality assurance audits and assist the Central Office Internal Standards and Audits Compliance and Classification Bureau Administrators when formal audits are conducted.
- h. Provide training on new classification procedures as they are developed.

- i. Coordinate special projects from Central Office.
- j. Track and coordinate with the Central Office Classification Bureau all inmate referrals for transfer to other facilities.
- k. Ensure that Release Eligible Inmates reports are correct and submitted on a timely basis to the appropriate to the Deputy Director of Adult Prisons. At facilities without a Classification Supervisor, the Unit Managers or Program Mangers will submit the report to The Classification Supervisor or Unit Manager designated by the Warden for combining and submitting these reports to Central Office.
- l. Conduct weekly program areas inspection, ensuring inmates are in assigned program areas at scheduled times and assigned inmates are receiving programming consistent with curriculum and re-entry objectives.
- m. Conduct monthly self-audits to assure the classification department is meeting its goals and objectives.
- n. Ensure that Release Checklist Procedures are handled in accordance with Inmate Records policy *CD-040100* Inmate Records.
- o. Maintain Standardized-Tracking System for Monitoring Compliance with Goodtime Policies in accordance with policies *CD-080400*, *CD-080600* and *CD-080200*.
- p. Monitoring of CMIS Projected Release Dates: On the first working day of each month the Classification Supervisor/Unit Manager/Program Manager shall retrieve the designated report from CMIS that reflects inmates whose projected release date is prior to the date the report is pulled. The Classification Supervisor/Unit Manager/Program Manager shall immediately notify the Records Manager so that it can be determined whether there is a need to initiate a concurrent/consecutive sentence or if the inmate's legal status needs to be changed to in-house parole.
- q. Detainers: Detainers will be processed in accordance with the Release Check List procedures as well as Policy *CD-040500* Detainers and Policy *CD-040100* Inmate Records.
- r. Re-entry Planning: Each Classification Supervisor/Unit Manager/Program Manager shall be responsible for the re-entry planning and release of inmates in accordance with policy *CD-083000* *Re-entry Planning and Transition Process for Inmates releasing to the Community from Incarceration*.

- r. Parole Board Docket: Each Unit Manager/ Program Manager/ Classification Supervisor will be responsible for gathering, reviewing and submitting the Parole Board Docket. The Classification Supervisor or Unit Manager designated by the Warden for combining and submitting these reports to the Parole Board.

3. Classification Officer:

Each Classification Officer shall be responsible for the following:

- a. Within ten (10) working days following the assignment of an inmate to a classification officer's caseload, it shall be the responsibility of the classification officer to audit/ verify each file in accordance with policy *CD- 040100* Inmate Records and report any discrepancies to the Classification Supervisor, Unit Manager, or Programs Manager.
- b. At RDC Classification Officers shall complete and enter the criminal history information on each inmate into the COMPAS based on file information.
- c. During Orientation week, interview inmate regarding request for programming. Schedule for Initial TAP Committee.
- d. A PREA risk screening within seventy two (72) hours of inmates arrival and whenever and inmate is involved in a PREA incident.
- e. Schedule Re-entry TAP committee in accordance with OMP Policy *CD-105000*.
- f. Ensure that copies of the initial and reclassification documents as well as Supervisory Review and Classification Committee decisions are distributed to inmates within two working days.
- g. Preparation of all documentation and/or case materials for the purpose of presentation to the Classification Committee, Parole Board or Central Office in accordance with policy *CD-083000* Re-entry Panning and Transition Process for Inmates Releasing to the Community from Incarceration.
- h. Maintain daily office hours in order to ensure inmate contact.
- i. Ensure contact is made with inmates in Special Management by signing the standard Record of Staff Visit Sign-In Logs as well as documenting the inmates who were seen.
- j. Monitor and process good time credits in accordance with good time policies *CD-080200*, Good Time Deductions; *CD-080600*, Meritorious Deductions;

*CD-080400*, Earned Meritorious Deductions; and *CD-082800*, Lump Sum Awards.

- k. Process the re-entry and release of inmates in accordance with policy *CD-083000*, Re-entry Planning and Transition Process for Inmates Releasing to the Community.
- l. Process the parole of geriatric or permanently incapacitated or terminally ill inmates in accordance with policy *CD-050400*, Parole of Geriatric, Permanently Incapacitated, or Terminally Ill Inmates.
- m. Provide any requested documentation to PPD Interstate Compact Services as requested.
- n. Initiate and maintain a tracking log for all inmates on their caseload. Tracking items should include but not be limited to; custody level; points; next review date; PRD; date GT last updated; Detainer.
- o. Shall initiate the Release Checklist sixty (60) days prior to PRD by verifying the inmate's file in accordance with policy *CD-040100*, Inmate Records.
- p. Upon inmate Parole or Discharge, the inmate's enemy listing will be closed out in CMIS.

**NEW MEXICO CORRECTIONS DEPARTMENT  
INTAKE SCREENING FORM**

Name: \_\_\_\_\_ NMCD# \_\_\_\_\_ Date: \_\_\_\_\_

County: \_\_\_\_\_

Status: NC    Prob. Viol (\_\_\_\_\_) P/V (\_\_\_\_\_)    Re/Ad (\_\_\_\_\_)    D/E  
  Officer                  Officer                  When

Charges: \_\_\_\_\_

Sentence: \_\_\_\_\_

PSR:                      Yes \_\_\_\_\_ No \_\_\_\_\_

Pending: Yes \_\_\_\_\_ No \_\_\_\_\_ if yes, Where/What \_\_\_\_\_

Prison Term: \_\_\_\_\_

Veteran: \_\_\_\_\_

L.E.H. \_\_\_\_\_

Escape History: \_\_\_\_\_

Physical Disability: \_\_\_\_\_

Enemies: \_\_\_\_\_  
\_\_\_\_\_

Gang: \_\_\_\_\_

Protective Custody Requested or Required:              Yes \_\_\_\_\_ No \_\_\_\_\_

Special Circumstances Relevant to Inmate/Crime/Admission/High Risk:

\_\_\_\_\_

Is there anything else you need to tell us?

Inmate Reply: \_\_\_\_\_

\_\_\_\_\_

NOTIFY IN CASE OF EMERGENCY:

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

\_\_\_\_\_  
CLASSIFICATION OFFICER

\_\_\_\_\_  
INMATE SIGNATURE



**NEW MEXICO CORRECTIONS DEPARTMENT  
INITIAL CUSTODY SCORING FORM**

Inmate's Name: \_\_\_\_\_ NMCD# \_\_\_\_\_  
*Last First MI*  
 Classification Officer: \_\_\_\_\_ Classification Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**1. HISTORY OF INSTITUTIONAL ADJUSTMENT/VIOLENCE.** (Review individual's entire background for 10 years prior to classification date. to include jail and juvenile incidents). (Include date of incident; rate most severe.)

None \_\_\_\_\_ 0  
 Ten or more non-violent disciplinary reports \_\_\_\_\_ 2  
 Non-violent/serious Class A Level incidents \_\_\_\_\_ 2  
 Violent Incident with no weapon, serious injury or death \_\_\_\_\_ 4  
 Violent Incident involving a weapon, serious injury or death \_\_\_\_\_ 7

**2. SEVERITY OF CURRENT CONVICTION.** (Score the most serious conviction, list offense and date)

Low \_\_\_\_\_ 1  
 Moderate \_\_\_\_\_ 3  
 High \_\_\_\_\_ 5  
 Highest \_\_\_\_\_ 7

**3. ESCAPE HISTORY.** (Last 10 years from this rating date. List date of escape.)

None \_\_\_\_\_ 0  
 Escape/attempted escape from Level I or II, County Jail, Juvenile Facility, or Peace Officer (no violence) \_\_\_\_\_ 4  
 Escape/attempted escape from Level III facility or above (no violence) \_\_\_\_\_ 6  
 Escape/attempted escape with violence \_\_\_\_\_ 7

**SUB-TOTAL SCORE FOR ITEMS 1-3** (If points equal 10 or more, classify as Level IV)

**4. PRIOR FELONY CONVICTIONS** (Do not include current conviction; list offenses and dates.)

None...0      One...1      Two...2      Three or more...3  
 \_\_\_\_\_  
 \_\_\_\_\_

**5. SEVERITY OF PRIOR CONVICTIONS** (Score the most serious offense; list offense and date.)

None, Low...0      Moderate...1      High...2      Highest...3  
 \_\_\_\_\_

**6. ALCOHOL/DRUG ABUSE** (Last 10 years from this rating date; list most severe and date.)

None \_\_\_\_\_ 0  
 Trafficking or Distribution of Alcohol/Drugs \_\_\_\_\_ 1

**7. CURRENT AGE**

21 and under...2      22 to 25...1      26 to 34...0      35 to 44...-1      45 and above...-2

**8. GANG MEMBERSHIP/ACTIVITIES IN THE PAST 10 YEARS**

Yes...2      No...0  
 \_\_\_\_\_

**TOTAL SCORE** (Add 1 through 8)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Supervisory Review**

Inmates Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Institution: \_\_\_\_\_ Unit: \_\_\_\_\_

Custody: \_\_\_\_\_ Points: \_\_\_\_\_ Override Justification: \_\_\_\_\_

Reason: \_\_\_\_\_

Action: \_\_\_\_\_

Justification: \_\_\_\_\_

Next Review Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_ / \_\_\_\_\_  
(Print) (Signature)

Classification Officer: \_\_\_\_\_ / \_\_\_\_\_  
(Print) (Signature)

I have the right to appeal the above decision through the classification appeals procedure. \_\_\_\_\_ (mark the line)

Inmate Signature: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Date: \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Committee Hearing**

Inmates Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Institution: \_\_\_\_\_ Unit: \_\_\_\_\_

Custody: \_\_\_\_\_ Points: \_\_\_\_\_ Override Justification: \_\_\_\_\_

Reason for Appearance: \_\_\_\_\_

Committee Action: \_\_\_\_\_

Justification: \_\_\_\_\_

Next Review Date: \_\_\_\_\_

Chairperson: \_\_\_\_\_ / \_\_\_\_\_  
(Print) (Signature)

\*Security Representative: \_\_\_\_\_ / \_\_\_\_\_  
(Print) (Signature)

( ) Inmate Appeared ( ) Inmate Waived Appearance

I have the right to appeal the above decision through the classification appeals procedure. \_\_\_\_\_ (Mark the line)

Inmate Signature: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Date: \_\_\_\_\_

\*Not Applicable for iTAP/TAP reviews

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Committee Hearing Notice**

Inmate Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Unit: \_\_\_\_\_

This is your notice to appear before the Classification Committee on \_\_\_\_\_. Your signature below is an acknowledgement of this scheduled hearing. (Date)

Purpose of Committee Hearing:

Transfer / Custody Review

Mandatory 6 month/12 month Review

iTAP / TAP Review\*

Discretionary Review

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I **do** wish to appear at the above scheduled hearing. \_\_\_\_\_  
(Inmate's initials)

I **do not** wish to appear at the above scheduled hearing. \_\_\_\_\_  
(Inmate's initials)

\*I understand that if the purpose of my scheduled committee hearing is iTAP or TAP review, I may not waive my appearance unless precluded for security reasons. \_\_\_\_\_  
(Inmate's initials)

Inmate Signature: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Date: \_\_\_\_\_



**Waiver of 48-Hour Notification**

I understand that I am to receive a 48-hour notification for my classification hearing and I hereby waive my right to that 48-hour notification of the above scheduled hearing as acknowledged by my signature below.

Inmate Signature: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
(Print) (Signature)

**NEW MEXICO CORRECTIONS DEPARTMENT  
INMATE CLASSIFICATION APPEAL FORM**

INMATE'S NAME: \_\_\_\_\_ NMCD#: \_\_\_\_\_

INSTITUTION: \_\_\_\_\_ HOUSING UNIT: \_\_\_\_\_

DATE OF CLASSIFICATION DECISION OR RECOMMENDATION THAT IS BEING  
APPEALED: \_\_\_\_\_

DATE RECEIVED BY INSTITUTIONAL CLASSIFICATION APPEALS  
OFFICER: \_\_\_\_\_ LOG#: \_\_\_\_\_

NOTE: This form must be submitted to the Institutional Classification Appeals Officer within 15 calendar days of the classification recommendation/decision. For further information on filing a classification appeal, see Policy CD-080100 in the Law Library.

STATE APPEAL: \_\_\_\_\_ Include documentation and specific reasons for your appeal. Use additional pages, if necessary.

Inmate's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TO BE COMPLETED BY THE CLASSIFICATION APPEALS OFFICER

- A. \_\_\_\_\_ Your classification appeal is accepted for consideration
- B. Your appeal is being returned to you for the following reasons(s):
- \_\_\_\_\_ 1. The appeal is currently under review.
  - \_\_\_\_\_ 2. The appeal does not involve a classification decision.
  - \_\_\_\_\_ 3. The appeal is a group appeal or petition.
  - \_\_\_\_\_ 4. The appeal is not timely.
  - \_\_\_\_\_ 5. Other: Specify \_\_\_\_\_

\_\_\_\_\_  
Classification Appeals Officer      Date Received

CLASSIFICATION APPEALS OFFICER'S INVESTIGATION AND RECOMMENDATION:

\_\_\_\_\_  
CLASSIFICATION APPEALS OFFICER      DATE

DECISION OF WARDEN

APPEAL GRANTED \_\_\_\_\_      APPEAL DENIED \_\_\_\_\_

REASONS: \_\_\_\_\_

SIGNATURE \_\_\_\_\_      DATE: \_\_\_\_\_

DATE RETURNED TO INMATE: \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Contact Chrono**

Inmate Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Location: \_\_\_\_\_

Custody: \_\_\_\_\_ Nature of Contact: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Date: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Staff Member: \_\_\_\_\_ / \_\_\_\_\_

(Print)

(Sign)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Contact Chrono**

Inmate Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Location: \_\_\_\_\_

Custody: \_\_\_\_\_ Nature of Contact: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Date: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Staff Member: \_\_\_\_\_ / \_\_\_\_\_

(Print)

(Sign)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Contact Chrono**

Inmate Name: \_\_\_\_\_ NMCD #: \_\_\_\_\_ Location: \_\_\_\_\_

Custody: \_\_\_\_\_ Nature of Contact: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Date: \_\_\_\_\_

Agency: \_\_\_\_\_ Phone: \_\_\_\_\_

Staff Member: \_\_\_\_\_ / \_\_\_\_\_

(Print)

(Sign)

NEW MEXICO CORRECTIONS DEPARTMENT  
**PENDING CHARGES**

Inmate Name: \_\_\_\_\_ NMCD# \_\_\_\_\_ Date: \_\_\_\_\_

Facility: \_\_\_\_\_ Unit: \_\_\_\_\_

Agency Contacted: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Pending Charges: Yes or No

Charges: \_\_\_\_\_

Cause Number: \_\_\_\_\_ Pending Court date: \_\_\_\_\_

Status: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Staff Member:

\_\_\_\_\_/\_\_\_\_\_  
(Print) (Sign)

.....

NEW MEXICO CORRECTIONS DEPARTMENT  
**PENDING CHARGES**

Inmate Name: \_\_\_\_\_ NMCD# \_\_\_\_\_ Date: \_\_\_\_\_

Facility: \_\_\_\_\_ Unit: \_\_\_\_\_

Agency Contacted: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Pending Charges: Yes or No

Charges: \_\_\_\_\_

Cause Number: \_\_\_\_\_ Pending Court date: \_\_\_\_\_

Status: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Staff Member:

\_\_\_\_\_/\_\_\_\_\_  
(Print) (Sign)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Notification and Acknowledgement**

The United State has entered into international treaties with many countries which may permit a foreign national prisoner from one of the treaty countries to transfer to his /her home country to serve the remainder of his or her sentence. The State of New Mexico has enacted legislation which allows it to participate in the international prisoner transfer program. The transfer program is a discretionary and not everyone who applies will be qualified or will be approved for transfer. To transfer your application must first be approved by the State. The United States and your home country must also approve your application before a transfer can occur. If you are unsure whether your country participates in this program, please contact your case manager or your nearest consulate for more information. You may also need to contact your consulate to assist you and to determine if your home country has any additional requirements.

1. Name	2. Prisoner Number
3. Date of Birth	4. Place of Birth
5. Citizenship	6. Institution/Prison
7. Offense(s)	8. Sentence
9. Projected Release Date	10. Language Preference

I am interested in being transferred to continue serving the sentence imposed by the State of New Mexico to the country of citizenship indicated above. I understand that this is just an inquiry to obtain data before the actual request for transfer and is not binding upon either the government or me. If I apply for transfer, I authorize the State of New Mexico to disclose to the United States and my home country any personal health information in my prison file which is necessary for the consideration of my transfer request, my transfer and the future administration of my sentence. I understand that upon approval for transfer, I will be required to attend a verification hearing before a United States Magistrate Judge. I have indicated above the language preference for my verification hearing and understand an interpreter will be available if necessary.

Signature	Date
-----------	------

I hereby indicate that I am NOT interested in being transferred to continue serving the sentence imposed by the State of New Mexico to the country of the citizenship indicated above.

Signature	Date
-----------	------

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Application Questionnaire**

**Instructions:** Please answer each question completely. You should type or print your answers.

1. Name:		
_____	_____	_____
Last Name	First Name	Middle Name
Birth Name (if different):		
Other names used:		
2. Prison where incarcerated:		3. Prisoner Number:
4. Social Security Number:		5. Alien/ICE number:
6. True date of birth:		7. Place of Birth:
_____ / _____ / _____ Month Day Year		_____ / _____ City Country
8. Country(s) of Citizenship:		
9. Sentencing Information:		
<b>Date of Sentencing:</b>	<b>Sentence Length:</b>	<b>Projected Release Date:</b>
_____ / _____ / _____ Month Day Year	_____ (Months, Years, Life, etc)	_____ / _____ / _____ Month Day Year
10. Date of Arrest:		
11. Type of Offense:		
12. Do you have an appeal or other legal challenge pending? (Please mark with an "X"):		
[ ] Yes [ ] No		
13. Languages spoken (please mark with an "X"): [ ] English, [ ] Espanol, [ ] Francais, [ ] Portugues, [ ] Dutch, [ ] German, [ ] Other_____.		



**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Application Questionnaire**  
(Continued)

14. How long have you lived abroad and in what countries have you lived?

15. Have you contacted your consulate regarding your application? (Please mark with an "X"):

Yes       No      **Note:** You must notify your consulate of your interest in transfer.

16. What is your current marital status? (Please read all and mark the most appropriate):

- |   |  |
|---|--|
| <input type="checkbox"/> Single                 | <input type="checkbox"/> Divorced                        |
| <input type="checkbox"/> Married                | <input type="checkbox"/> Divorced and Remarried          |
| <input type="checkbox"/> Common law marriage    | <input type="checkbox"/> Long-term Personal Relationship |
| <input type="checkbox"/> Separated or Estranged |  |

17. What is the name and complete address of your spouse?  Not applicable-no spouse

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_  
Country: \_\_\_\_\_  
Telephone: \_\_\_\_\_

18. Do you have any children?       Yes       No

19. What are the names, ages and complete addresses of your children? (If more than four, use back)

Not applicable-no children

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Address: \_\_\_\_\_

City: \_\_\_\_\_  
State: \_\_\_\_\_  
Country: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Address: \_\_\_\_\_

City: \_\_\_\_\_  
State: \_\_\_\_\_  
Country: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Address: \_\_\_\_\_

City: \_\_\_\_\_  
State: \_\_\_\_\_  
Country: \_\_\_\_\_

Name: \_\_\_\_\_  
Age: \_\_\_\_\_  
Address: \_\_\_\_\_

City: \_\_\_\_\_  
State: \_\_\_\_\_  
Country: \_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Application Questionnaire**  
(Continued)

20. Who are your parents and closet relatives and where do they live?

**Mother:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

**Father:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

**Other close relatives:**

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

21. Educational level and name and location of schools attended:

22. Occupation:

23. Work history for 10 year period prior to incarceration. Please provide name of employer, place of employment, dates of employment and type of work performed:

24. Have you previously received an international prisoner transfer?     Yes     No

If yes, when and from which country were you transferred?

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Application Questionnaire**  
(Continued)

25. Have you ever been deported from a country?                     Yes             No

If yes, when and from which country were you deported?

26. Current health concerns. Please list any current health concerns that would be important to know if you are transferred such as whether you need a wheelchair, require special medication, are diabetic etc.:

27. Please provide any additional information you believe is pertinent to your application to transfer?

I hereby request a transfer to my country of nationality to complete my sentence and I authorize the disclosure and release of information necessary to process my request to transfer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Certified Case Summary for State Inmate**

Submitting State: \_\_\_\_\_

Date: \_\_\_\_\_

**Personal Data:**

1. Committed Name and Known Aliases: \_\_\_\_\_  
\_\_\_\_\_

2. Prisoner Identification Number: \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_

4. Marital Status/Children: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Place of Birth: \_\_\_\_\_

6. Nationality: \_\_\_\_\_

7. Employment Prior to Incarceration: \_\_\_\_\_

8. Current Place of Incarceration: \_\_\_\_\_

**Sentence Data and Criminal History Information:**

1. Sentence Imposed: \_\_\_\_\_  
\_\_\_\_\_

2. Date Sentence Imposed: \_\_\_\_\_

3. Sentencing Court: \_\_\_\_\_

4. Criminal Docket Number: \_\_\_\_\_

5. Current Offense: \_\_\_\_\_  
\_\_\_\_\_

6. Description and Date of Offense: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Certified Case Summary for State Inmate**  
**(Continued)**

7. Fines/Assessments/Restitutions: \_\_\_\_\_

\_\_\_\_\_

8. Prior Record: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Detainers/Pending Charges/Pending Appeals: \_\_\_\_\_

\_\_\_\_\_

10. Good Conduct Time, Statutory Good Conduct Time or Other Beneficial Credits that Serve to Advance the Prisoner's Release from the Full Term: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Parole Eligibility Date: \_\_\_\_\_

\_\_\_\_\_

12. Projected Release Date and Calculation Method: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Full Term Date of Sentence: \_\_\_\_\_

14. Time Served to Date: \_\_\_\_\_

\_\_\_\_\_

15. Credit Received for Time in Custody Prior to Service of Sentence: \_\_\_\_\_

\_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Certified Case Summary for State Inmate**  
**(Continued)**

**Social Data:**

1. Psychological Evaluation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Security Level: \_\_\_\_\_

3. Educational Background: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. History of Alcohol/Drug Abuse: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Current Medical Condition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Prison Work Experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Incidents of Institutional Misconduct: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Special Program Participation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Pertinent Information:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Certified Case Summary for State Inmate**  
**(Continued)**

**Prepared By:**

\_\_\_\_\_

Name:

\_\_\_\_\_

Title/Phone Number:

\_\_\_\_\_

Date

**Reviewed By:**

\_\_\_\_\_

Name:

\_\_\_\_\_

Title/Phone Number:

\_\_\_\_\_

Date

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**International Prisoner Transfer Program Synopsis**

The United States has entered into international treaties with many countries which may permit a foreign national prisoner from one of the treaty countries to transfer to his home country to serve the remainder of his sentence. The State of New Mexico has enacted legislation which allows it to participate in the international prisoner transfer program. The transfer program is discretionary and not everyone who applies will be qualified or will be approved for transfer. To transfer your application must first be approved by the State of New Mexico. The United States and your home country must also approve your application before a transfer can occur. If you are a foreign national from one of the countries listed below and are interested in further information about the program or would like to apply for transfer, please contact your case manager and your nearest consulate for additional information.

Albania	Guatemala	Nicaragua
Andorra	Herzegovina	Norway
Armenia	Honduras	Palau, Republic of
Australia	Hong Kong	Panama
Austria	Hungary	Paraguay
Azerbaijan	Iceland	Peru
Bahamas	Ireland	Poland
Belgium	Israel	Portugal
Belize	Italy	Romania
Bolivia	Japan	Russia
Bosnia	Korea	San Marino
Brazil	Latvia	Saudi Arabia
Bulgaria	Liechtenstein	Serbia
Canada	Lithuania	Slovakia
Chile	Luxembourg	Slovenia
Costa Rica	Madedonia, The Former	Spain
Croatia	Republic of Yugoslav	Sweden
Cyprus	Malta	Switzerland
Czech Republic	Marshall Islands	Thailand
Denmark	Mauritius	Tonga
Ecuador	Mexico	Trinidad & Tobago
El Salvador	Micronesia, Federated States of	Ukraine
Estonia	Moldova	United Kingdom (including
Finland	Montenegro	Many UK territories)
France	Netherlands (including NL	Uruguay
Georgia	Antilles/Aruba)	Venezuela
Germany		
Greece		



## NEW MEXICO CORRECTIONS DEPARTMENT

### International Prisoner Transfer Treaty Partners of the United States

#### **I. Bilateral Treaties and Transfer Agreements\*:**

Bolivia	Hong Kong	Federated States	Panama	Thailand
Canada	Marshall Islands	Of Micronesia	Peru	Turkey
France	Mexico	Republic of Palau		

#### **II. Participants in the Council of Europe Convention on the Transfer of Sentenced Persons (COE Convention)**

Albania	Chile	Honduras	Macedonia	San Marino
Andorra	Costa Rica	Hundary	Malta	Serbia
Armenia	Croatia	Iceland	Mauritius	Slovakia
Australia	Cyprus	Ireland	Moldova	Slovenia
Austria	Czech Republic	Israel	México	Spain
Azerbaijan	Denmark	Italy	Montenegro	Sweden
Bahamas	Ecuador	Japan	Netherlands **	Switzerland
Belgium	Estonia	Korea	Norway	Tonga
Bolivia	Finland	Latvia	Panamá	Trinidad/Tobago
Bosnia and Herzegovina	France	Liechtenstein	Poland	Turkey
Bulgaria	Georgia	Lithuania	Portugal	Ukraine
Canada	Germany	Lusembourg	Romania	United Kingdom***
	Greece		Russia	Venezuela

#### **III. Participants in the Inter-American Convention on Serving Criminal Sentences Abroad (OAS Convention)**

Belize	Chile	El Salvador	Nicaragua	Saudi Arabia
Brazil	Costa Rica	Guatemala	Panama	Uruguay
Canada	Ecuador	Mexico	Paraguay	Venezuela

\* / Some of these countries are also parties to multilateral prisoner transfer conventions to which the United States is a signatory. For example, Mexico, France, Canada, Bolivia, Panama, and Turkey are signatories to the COE Convention. Mexico, France and Bolivia prefer proceeding under the bilateral treaty; Panama prefers proceeding under the COE Convention; and the United States prefers proceeding with Turkey under the COE Convention. Canada, Mexico, and Panama are also signatories to the OAS Convention. Mexico prefers proceeding under the bilateral treaty. Costa Rica is signatory to the COE Convention and the OAS Convention. Although Costa Rica does not have a treaty preference, the United States processes its prisoner transfer requests pursuant to the COE Convention unless Costa Rica or the prisoner requests otherwise.

\*\*/ Includes the Netherlands Antilles (Bonaire, Curacao, Sint Eustatius, Saba and Saint Maarten) and Aruba.

\*\*\*/ Includes British territories of Anguilla, Bermuda, British Indian Ocean Territory, British Virgin Islands, Cayman Islands, Ducie and Oeno Islands, Falkland Islands, Gibraltar, Henderson Island, Isle of Man, Montserrat, Pitcairn, Sovereign Base Areas of Akrotiri and Dhekelia in the Island of Cyprus, and St. Helena, Ascension and Tristan da Cunha (formerly St. Helena Dependencies)

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Instructions for Completing the Certified State Case Summary Forms**

**Personal Data:**

1. Please provide the complete name by which the prisoner has been committed in your prison system. It is important to include all known aliases used by the prisoner since sometimes the foreign country will only know him/her by an alias (which may, in fact, be his true name). In addition, when multiple aliases are used, it is possible that the prisoner may also have criminal records under these names.
2. This question seeks the identification number that your state prison system has given the prisoner.
3. Asks for the birth date of the prisoner. Please write out the date (e.g. April 24, 1960) in order to avoid confusion since most countries do not follow the American convention of month/day/year. If your records indicate more than one birth date, especially when aliases have been used, please provide all such dates.
4. Question 4 seeks information about the inmate's immediate family. Significant common law spousal relationships should also be included in this response. If known, please include information about the location of these individuals. Such information may be available from visitor lists or emergency contact information.
5. This question requests the city and country of birth.
6. Question 6 asks for the claimed nationality of the prisoner. The foreign government is responsible for making the final determination of nationality.
7. Please include pertinent information about the work history of the prisoner including positions held, name and location of employer and duration of employment. This information assists the receiving country in rehabilitative and release planning.
8. Please provide the name and location of the current prison where the prisoner is incarcerated.

**Sentence Data:**

1. Question 1 seeks information about the sentence that the state has imposed on the prisoner. Please include the duration of the sentence and any other terms or conditions that have been imposed. If more than one sentence has imposed please specify the offense for which the sentence was imposed. If more than one sentence has been imposed please specify the offense for which the sentence was imposed and whether the sentence is to run consecutively or concurrently.
2. This question asks for the date that the sentence was imposed. Again, please write the date in words to avoid confusion.
3. Please identify the sentencing court and its location.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Instructions for Completing the Certified State Case Summary Forms**  
**(Continued)**

4. This question seeks the docket number of the criminal case for which the prisoner was sentenced.
5. Question 5 requests the name of the statutory offense(s) for which the prisoner was convicted and for which he or she is seeking transfer. If it was a drug offense please include the type and quantity of drugs the court considered in imposing the sentence. Please use words rather than numerals to describe the quantity of drugs involved to avoid any confusion that may result from the differing numeric conventions used by some countries (most countries use comas where Americans use decimals).
6. Please provide a brief description of the offense. Although this description should be brief – in most cases one or two paragraphs – please be careful to include all pertinent details of the crime including: the date and location of the crime; the nature of the crime; the role of the inmate in the crime; the existence and role of other participants in the crime; the impact of the crime; and any aggravating or mitigating circumstances. This description assists the receiving country in administering the sentence and determining the appropriate security level for the prisoner. In addition, please note that the date of the offense is extremely important because different sentence calculation and good conduct laws may apply depending on when the offense was committed. Finally, if the prisoner seeking transfer is Mexican, Mexico requires a statement about the circumstances of the arrests, the presence of weapons and any credible information linking the prisoner to organized crime. All of this information will be translated into the language of the receiving country and used for law enforcement purposes.
7. This question seeks information about any fines, restitution or other monetary penalties that have been imposed. Please include all information that may be available including the type of financial obligation, the amount owed and the amount already paid. It is important to recognize that the receiving country will not ordinarily collect outstanding financial obligations after the transfer. Some states may require the prisoner to satisfy some or all of his financial obligations prior to approving the transfer. States may also wish to consult with the prisoner's consular official to determine what, if any, mechanism may be available in the receiving country to collect financial obligations after the transfer.
8. Please include all available information about the prior arrests and convictions of the prisoner that would assist the receiving country in evaluating, monitoring or supervising him, such as disposition of any charges including any sentence or fine that was imposed.
9. In responding to this question, please set forth: any known detainers and include the issuing authority, the date and status of the detainer and the offense for which the offense was lodged; any pending charges including the date of the offense and the charging authority; and any pending appeals filed by the prisoner. If the detainer is from the ICE and you have the prisoner's ICE number, please include it as this information will help the United States in obtaining a removal order.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Instructions for Completing the Certified State Case Summary Forms**  
**(Continued)**

10. This question seeks detailed information about all credits that the prisoner has received while in your custody or to which he is entitled to receive by statute. Such information, which includes good time credits and work credits, is extremely important for the receiving country to obtain in determining how to administer the transferred sentence(s). It is difficult to predict with certainty how the receiving country will administer the sentence of the transferred prisoner and what credits they will accept in determining the length of time the prisoner will remain incarcerated.
11. If parole is unavailable on the sentence the prisoner is serving, please indicate its unavailability. When parole is available on the sentence please indicate the projected parole eligibility date. If parole has been denied, indicate the date of denial. When a presumptive parole date has been set, indicate that date. However, it should be realized that if the prisoner transfers, he may not be released on the presumptive parole date set by the state since the laws of the receiving state apply to the continued execution of the sentence and may result in a different release date.
12. Asks for the projected date that the state would release the prisoner if he were to remain in state custody and for an explanation as to how this date was calculated. If a projected release date cannot be determined indicate the date of the earliest possible release date and the release method and specify any qualifications or conditions that may apply to this date.
13. The “full term date” is a term of art that signifies the maximum length of the sentence. Generally, it is computed by starting at the sentencing date, adding the period of incarceration imposed by the court and then subtracting any applicable credit for time spent in custody prior to sentencing. The full term date will represent the maximum period of time for which the prisoner could be under criminal justice supervision following transfer.
14. Responding to this question please provide the date that the prisoner began serving his or her sentence in prison. This information assists the receiving country in calculating the sentence after transfer. Again, please write the date in words.
15. Asks for information concerning any credits that the prisoner has received for “Jail time” or being in custody prior to commencing the service of his or her sentence. This would include, for example, periods of time for pretrial detention or for detention pending sentence or appeal. If the prisoner was released on bond, please clearly indicate the dates when the prisoner was released and subsequently returned to custody.

**NEW MEXICO CORRECTIONS DEPARTMENT**  
**Instructions for Completing the Certified State Case Summary Forms**  
(Continued)

**Social Data:**

1. If the prisoner was or is experiencing significant psychiatric problems or if he or she is taking any psychiatric medications, this information should be summarized or a psychiatric evaluation should be attached that explains the condition.
2. Requests the most recent security level assigned to the prisoner. Please use “maximum,” “high,” “medium,” “low,” or “community placement,” to describe the custody level. This information assists the receiving country in evaluating the prisoner the prisoner and determining the appropriate facility in which to house the inmate.
3. Educational information assists the receiving country in making programming plans for the transferred prisoner. Information provided should include; the number of years of schooling, any degrees or certificates obtained and any specialized courses of study.
4. Information concerning alcohol or drug abuse by the prisoner is important for the receiving state to receive since it is used to make programming decisions as well as to determine the applicability of special conditions of release. Please include details about illegal drug and alcohol use, the type of drugs used, the duration of the use and any treatment received.
5. Please include all important medical information about the prisoner or attach a recent medical report that can be translated for the receiving country.
6. Please include all jobs that the prisoner held while in prison, the time period during which they were held and any work evaluations that were received.
7. Describe all incidents of prison misconduct especially those involving assaultive or escape behavior. Please include the date of the incident, the nature of the incident and any punishment received especially if it resulted in the loss of good conduct time credit.
8. List all significant prison programs in which the prisoner is participating or has participated during his incarceration. Such programs include for example, educational programs, drug education and rehabilitation programs and language programs. Please include any evaluation of the prisoner’s performance in these programs.

**Other Pertinent Information:**

Please provide any additional information that you believe pertinent to the future treatment and rehabilitation of this prisoner.



# NEW MEXICO CORRECTIONS DEPARTMENT

Secretary  
Alisha Tafoya Lucero

CD-080104 Central Office Classification	Issued: 2/1/01 Effective: 2/1/01	Reviewed: 11/30/20 Revised: 8/24/16
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

## AUTHORITY:

Policy *CD-080100*

## PROCEDURE :

### A. Initial Classification and Facility Transfers:

1. Initial Classification: The Classification Bureau will determine the initial facility assignment considering the initial custody level as well as programming and special needs of the inmates to include STG information based on recommendations from the Classification staff and Classification Committees at the facilities including the Reception and Diagnostic Center.
2. Facility Transfers: Facility transfer approvals will be made by the Classification Bureau based on classification committee recommendations and shall take into account the level of progress, the program needs of the inmate, scored custody levels, override requests, STG information and special needs.
  - a. These transfers include Classification Bureau decisions on movement of inmates between facilities as well as decisions on intra-facility transfers between units (e.g. Southern Level III Facility to Southern Level II Facility). The facility staff is authorized to transfer an inmate between units on “holding” status until a classification decision is made; however, the Classification Bureau must be notified via e-mail of all intra-facility transfers.
  - b. The Classification Bureau Administrators who are assigned to a particular facility shall be responsible for conducting a thorough evaluation of all the information submitted to the Bureau and requesting additional information, if necessary, to ensure that an appropriate decision is made.
3. If the Classification Bureau’s decision on an inmate’s custody level is different from that which was recommended by either a Classification Committee or the RDC Classification Supervisor, it shall be the responsibility of the Classification Bureau Administrator to note the reason(s) in the CMIS for the difference in the decision.

- a. In such cases, it shall be the responsibility of the Classification Supervisor at the sending facility to ensure that the Classification Bureau's decision is placed in the

inmate's file and that the custody scoring form is updated to reflect the decision of the Classification Bureau prior to the transport of the inmate.

4. The Classification Bureau may deny a classification committee transfer recommendation and direct the classification committee to re-evaluate their recommendation and consider the inmate for alternative housing.
5. The Classification Bureau's approval of an inmate's placement in a New Mexico facility at a designated custody level is indicated in the CMIS Offender Search Screen and the inmate's name appears on the Central Office Transport Order showing authorization to transport the inmate.
6. Lateral Transfers: Lateral transfers of inmates may be made any time to serve the interests of the NMCD. The Classification Bureau must approve a lateral transfer.

**B. Emergency Transfers:**

1. If continued housing of an inmate at his or her presently assigned facility would pose significant risk of injury to the inmate, another inmate(s), or constitute an extreme risk or threat to the security of the institution or risk to the general public, the inmate shall be reviewed for emergency transfer to a Special Controls Unit using the procedures outlined in policy chapter 14 *Special Management Inmates*.
2. The Cabinet Secretary of Corrections may authorize the emergency transfer of New Mexico inmates to other jurisdictions based on a determination that the transfer of the inmate is warranted.

**C. Health Service Transfers:**

1. The Classification Bureau arranges for the transport of inmates to the Long Term Care Unit (LTCU) based on information provided by Medical staff at the sending facility.
2. The Classification Bureau arranges for the transport of inmates from the Long Term Care Unit based on information provided by the CNMCF Classification Supervisor/Unit Manager.
3. The Classification Bureau arranges for the transport of inmates to the appropriate Mental Health Treatment Center (MHTC) based on information provided by the NMCD Mental Health Director.
4. The Classification Bureau arranges for the transport of inmates from the appropriate Mental Health Treatment Center (MHTC) based on information provided by the CNMCF Classification Committee.



5. The Classification Bureau reviews and makes decisions on recommendation for transfer of inmates from one facility to another due to medical restrictions based on information provided by the sending facility's Classification Supervisor/Unit Manager.

#### **D. Interstate Corrections Compact Transfers**

Transfers of inmate supervision to and from out-of-state jurisdictions shall be in accordance with interstate Corrections compacts and other interstate agreements and interstate contracts. The Interstate Compact Office within the Classification Bureau will manage all interstate corrections caseloads. Interstate Transfer decisions are not subject to appeal by inmates.

1. Processing Interstate Corrections Compact Inmates [2-CO-4B-02]:
  - a. Inmates will be reviewed for Interstate Corrections Compact transfers in accordance with the criteria and procedures outlined in policy *CHAPTER 14 SPECIAL MANAGEMENT INMATES*.
  - b. The Interstate Corrections Compact Administrator for Institutions shall review and make a referral to the Deputy Director of Adult Prisons regarding whether the New Mexico inmate's transfer to another state is appropriate. The Classification Bureau Chief and the STIU Administrator at Central Office will also review the recommendations.
  - c. The Interstate Corrections Compact Administrator for Institutions shall review and summarize all Interstate Compact Referral packets received from other states and make a recommendation to the Deputy Director of Adult Prisons regarding whether to accept an out-of-state inmate for housing in the New Mexico prison system. The Classification Bureau Chief and the STIU Administrator will also review the recommendations.

For inmates approved for placement in NMCD, the Central Office Interstate Corrections Compact Administrator for Institutions will notify the sending state that the inmate may be transported to the Reception and Diagnostic Center and will forward all case material regarding the inmate to the RDC Warden.
  - d. Transportation arrangements for New Mexico inmates approved for placement in other states and those New Mexico inmates returned from other states will be made by the Interstate Corrections Compact Administrator for Institutions.
  - e. The NMCD facilities, as well as the out-of-state agencies, will be notified in writing by the Interstate Corrections Compact Administrator for Institutions of the transportation arrangements for interstate compact inmates. This notification includes the authorized transport agency and the specific facilities where the inmates are approved to be released and received.

- f. For any inmate who is returned to the New Mexico Corrections Department and placed in Special Management status, it shall be the responsibility of the Interstate Corrections Compact Administrator for Institutions to provide a Special Management placement memorandum to the receiving facility that justifies the inmate's placement.
  - g. The Interstate Corrections Compact Administrator for Institutions will be responsible for updating the files of New Mexico inmates who are housed in other states to include good time, parole releases and discharges. This information shall be entered/updated in the CMIS.
  - h. The Interstate Corrections Compact Administrator for Institutions will coordinate the exchange of information with other states regarding interstate compact inmates to include progress reports, disciplinary reports and any other information on gang activity or other intelligence.
  - i. The Interstate Corrections Compact Administrator for Institutions will maintain information on file indicating the reasons that New Mexico inmates have been transferred to other states under the Interstate Compact, including inmates who have been transferred on an emergency basis.
2. Processing Legal Documents for Interstate Compact Inmates:
- a. The Interstate Corrections Compact Administrator for Institutions shall be responsible for ensuring the accuracy of inmate files for New Mexico inmates who are housed in other states under the Interstate Compact Agreements.
  - b. The Interstate Corrections Compact Administrator for Institutions is responsible for making quarterly inquiries with the NMCD Legal Division regarding the following matters concerning New Mexico Interstate Compact Inmates:
    - 1) Whether any new legal actions have been filed on behalf of the inmates
    - 2) Whether there have been any changes or resolution to these inmates' legal case (s).
  - c. The Interstate Corrections Compact Administrator for Institutions shall maintain a tracking system for any legal action that has been filed by a New Mexico inmate who is housed in another state under an Interstate Compact Agreement.
  - d. The Interstate Corrections Compact Administrator is responsible for advising the Classification Bureau Chief of any court decisions that are made relevant to these cases.

- e. The Interstate Corrections Compact Administrator is responsible for distributing the legal documents pertaining to the court decisions to the Classification Bureau Chief.
  - f. The Interstate Corrections Compact Administrator shall submit a quarterly report to the Classification Bureau Chief showing the updated status on any new or pending cases.
3. Deputy Director of Adult Prisons:

Shall have final authority to approve or deny the Interstate Compact transfer of any inmate either to or from the jurisdiction of the New Mexico Corrections Department .

**E. International Transfers of Foreign Nationals:**

1. The Central Office Classification Bureau shall be responsible for coordinating the requests for international transfer of inmates.
2. The Classification Bureau shall receive international transfer packets from the facilities ensuring that each packet is complete and that inmate meets the eligibility criteria.
3. The Classification Bureau shall track the status of international transfer packets and forward the packets to the Governor's office as well as to the U. S. Department of Justice, International Prisoner Transfer Unit.

**F. Parole of Geriatric or Permanently Incapacitated or Terminally Ill Inmates:**

Parole of Geriatric or Permanently Incapacitated or Terminally-Ill inmates who are housed outside of New Mexico under the Interstate Corrections Compact: Inmates will be processed in accordance with policy *CD-050400*. With respect to out-of-state inmates, the following shall apply:

- 1 Inmates should request a Parole Consideration Application by writing directly to the NMCD Classification Bureau Interstate Compact Coordinator and then submitting the application to the Coordinator following its completion.
2. The Classification Bureau Interstate Compact Administrator will review the completed application, make his or her recommendation, attach appropriate documents, forward the application to appropriate staff and coordinate the inmate's review by the Adult Parole Board.
3. The NMCD Medical Director will request and evaluate information regarding the inmate's medical and mental health status from the medical/mental health officials in the receiving state; consult with necessary staff and make a recommendation regarding the inmate's suitability for parole consideration.

**G. Monitoring**

1. The Central Office Classification Bureau in conjunction with the Inspector General's office shall conduct quality assurance audits of the Classification Departments at the facilities.
  - a. The auditors will make a determination on the facility's level of compliance with the classification policies.
  - b. The audits will be conducted on an annual basis and the schedule will be determined by the Classification Bureau Chief.
  - c. The findings of the audits shall be submitted to the Director of Adult Prisons.
2. The Director of Adult Prisons or designee shall review the findings of each audit and determine whether any changes in the classification policy should be considered.
3. The Central Office Classification Bureau shall conduct periodic audits of the TAP process in conjunction with the Inspector General's office.

**H. Responsibility:**

1. Director of Adult Prisons or designee:
  - a. Provides a final decision when an inmate is transferred under the provisions of the Emergency Transfer section of policy *CHAPTER 14 SPECIAL MANAGEMENT INMATES*.
  - b. Reviews the findings of the Classification Audits conducted by the Classification Bureau and recommends classification policy changes.
2. Deputy Director of Adult Prisons:
  - a. Provides a final decision on the interstate compact transfer recommendation of inmates both to and from a New Mexico jurisdiction.
  - b. Provides final decision when an inmate is recommended for release from Special Management.
3. Central Office Classification Bureau:
  - a. The overall administration of the Classification process. This includes oversight of institutional compliance with NMCD Classification policies.

- b. Provides training as scheduled for all Classification staff in conjunction with the Training Academy.
- c. Annual review and update of the classification policy.
- d. Reviews and renders final action on all intra-state transfers, including transfers between units at any facility (e.g. Southern Level III Facility to Southern Level II Facility).
- e. Coordinates with the Security Threat Intelligence Unit Administrator all transfer considerations as they relate to inmates' affiliation and/or activity with security threat groups.
- f. The Central Office Classification Bureau may request information from the facilities in order to compile statistical information or obtain any other analysis regarding the profile of the inmate population. The Classification Bureau may request this information by contacting either the facility Warden, Deputy Warden, Unit Manager or any other facility administrator including the Classification Supervisor.
- g. Reviews Release Check Lists from the facilities to ensure that audits have been completed at the facility level and obtains updated NCIC Wants and Warrants printout to determine any possible Wants or Warrants for each inmate. Following review of the NCIC information, each Release Check List is returned to the facility, via fax, indicating whether there are any wants or warrants.