From: Chief of Naval Personnel

Subj: LIMITING THE USE OF RESTRICTIVE HOUSING WITHIN THE NAVY SHORE CORRECTIONS SYSTEM

Ref: (a) U.S. Department of Justice Report and Recommendations Concerning the Use of Restrictive Housing, Final Report, January 2016
(b) Presidential Memorandum (Limiting the Use of Restrictive Housing by the Federal Government), 1 March 2016
(c) SECNAV M-1640.1 Department of the Navy Corrections Manual

1. Purpose. To implement applicable recommendations contained in reference (a) concerning the use of restrictive housing (RH) within the Naval Shore Corrections System as directed per reference (b). Major updates to this instruction include defining RH as a status, vice a location, in military correctional facilities, defined RH status and guiding principles as utilized in Navy military confinement facilities (MCF), and removed guiding principles that were non-applicable to Navy MCFs. This instruction is a complete revision and should be reviewed in its entirety.


3. Scope and Applicability. This policy applies to all Navy MCFs.

4. Background
   a. Reference (c) uses the term “restrictive housing unit” (RHU) to describe the segregation living area within Navy MCFs. The vast majority of prisoners housed in the RHUs do not meet the definition for restricted housing contained in reference (a). Per reference (a), RH is indicative of a housing status in Navy MCFs, not a housing location or unit. This policy:

   (1) Establishes nomenclature for segregation housing units in Navy MCFs as “Special Quarters” (SQ) vice RHU,

   (2) Delineates requirements endemic to a prisoner housed in SQ on RH status, and

   (3) Provides RH status guiding principles as applicable to Navy MCFs.

   b. Reference (a) provides a definition of RH as any type of detention that involves three basic elements:
(1) Removal from the general prisoner population, whether voluntary or involuntary,

(2) Placement in a locked room or cell, whether alone or with another prisoner, and

(3) Inability to leave the room or cell for the vast majority of the day, typically 22 hours or more.

c. In Navy MCFs, RH status is administered in the SQ housing unit. The use of RH status will be administered as the exception. On a rare occasion, to safely administer the corrections mission, a prisoner may meet the definitional parameters expressed in paragraph 4b above.

d. For clarification of terminology, RH is in no way synonymous with SQ. SQ is a housing unit and RH status is a rarely administered management option assigned for use within the SQ housing unit.

e. Reference (b) amplifies the overuse of RH status in U.S. correctional systems, undermines public safety, and is contrary to our nation’s values.

f. National correctional reform efforts gave rise to the publication of reference (a) which set forth specific policy recommendations for the Department of Justice (DOJ) Federal Correctional System, as well as guiding principles for all U.S. correctional agencies.

g. Reference (b) directs implementation of the policy recommendations contained within reference (a) concerning the use of RH status within the Federal Government. Paragraph 6 of this instruction implements the DOJ “guiding principles” for RH (as applicable) within the Navy Shore Corrections System.

5. Responsibility and Action

a. Commander, Navy Installations Command (CNIC) is responsible for ensuring the provisions of this instruction are implemented within all CNIC pretrial confinement facilities.

b. Navy Personnel Command (NAVPERSCOM) Corrections and Programs Office (PERS-00D):

   (1) Ensures the provisions of this instruction are included within the next revision of reference (c).

   (2) Implements the provisions of this instruction within all Navy MCFs.

   (3) Provides technical assistance and oversight of RH status policies to all Navy commands responsible for shore MCFs.
6. **RH Guiding Principles Applicable in MCFs**

   a. **RH Status (General)**

      (1) Prisoners will be housed in the least restrictive setting necessary to ensure their own safety, as well as the safety of staff, other prisoners, and the public. Navy MCFs must strive to limit the use of RH status whenever possible, and to the extent used, to limit the length of a prisoner’s stay and to identify services, including group educational and therapeutic services that they can safely participate in while on RH status.

      (2) MCF commanders or authorized designees may authorize immediate placement of a prisoner on RH status for circumstances that pose a direct threat to the safety of persons or a clear threat to the safe and secure operations of the MCF. Only when legitimate safety and security factors render it a necessity will RH status be utilized. RH status must only be used to serve a specific correctional purpose. RH status will only be imposed in response to acute and clearly defined safety and security justifications. Placement of a prisoner on RH status must be reviewed within 24 hours by a higher authority who is not involved in the initial placement of the prisoner on RH status.

      (3) In each instance, MCFs must clearly articulate and document the specific reason(s) for a prisoner’s placement in, and retention on, RH status. The Corrections Management Information System (CORMIS) is the primary method for documenting all prisoner record entries. The reason(s) and duration for use of RH status must be supported by objective-based rationale and factual statements. Prisoners will remain on RH status for no longer than necessary to address the specific reason(s) for their placement on RH status. Any prisoner placed on RH status requires a CORMIS entry under “Activity Info” to document the prisoner’s placement in and removal from RH status.

      (4) A prisoner’s initial and ongoing placement on RH status will be reviewed regularly (i.e., no less than every 30 days) by the Classification and Assignment (C&A) Board, which will include, not only security and housing staff, but also medical and mental health professionals, and other specialized staff (as needed).

      (5) For every prisoner on RH status, correctional staff will immediately plan for returning the prisoner to a lesser status in SQ or to general population as soon as practically possible. For prisoners housed on RH status for longer than 30 days, MCFs will develop a written “step-down plan” as a supplement to a “special handing letter” for returning the prisoner to less restrictive conditions as promptly as possible. The contents of both documents will be shared with the prisoner, unless doing so would jeopardize the safety of the prisoner, staff, other prisoners, or the general public.

      (6) All correctional staff will be trained annually on RH status policies (inclusive of pre-service and in-service training). Correctional supervisors must ensure compliance with RH status policies and training per personnel qualification standards and reflected in staff training records.
(7) MCFs will formally establish an RH status committee, consisting of command and department-level correctional staff to regularly (i.e., not less than semi-annually) evaluate existing RH status policy, develop safe and effective alternatives to the use of RH status, and craft special handling letters and step-down-plan strategies.

b. End-of-Term Placement

(1) Absent a compelling reason, prisoners will not be released directly from RH status to the community.

(2) During the final 180 days of a prisoner’s projected release from confinement, MCFs must attempt to avoid placing the prisoner on RH status, if at all possible. If RH status becomes necessary during this timeframe, MCFs will provide targeted re-entry programming to prepare the prisoner for their return to the community.

c. Conditions of Confinement

(1) Prisoners on RH status will be provided living conditions and services that approximate those of general population or other SQ statuses, with the exception of being placed in their cell for periods of time 22 hours per day and greater.

(2) MCFs will seek ways to increase the minimum amount of time that prisoners on RH status spend outside their cells and to offer enhanced in-cell opportunities. Out-of-cell time must include opportunities for sunshine call, recreation, education, clinically appropriate treatment therapies, skill-building, and social interaction with staff and other prisoners. These authorized opportunities should be documented on the prisoner’s special handling letter.

(3) MCFs must provide out-of-cell, confidential psychological assessments and visits for prisoners whenever possible, to ensure patient privacy and to eliminate barriers to treatment.

(4) The denial of basic human needs such as food, water, and head calls must never be used as punishment, whether alone or in conjunction with the use of RH status.

d. Prisoners with Serious Mental Illness (SMI)

(1) A qualified mental health practitioner, in consult with correctional staff, will determine if a prisoner presents a SMI.

(2) A prisoner with SMI must not be placed on RH status unless:

(a) The prisoner presents such an immediate and serious danger that there is no reasonable alternative or

(b) A credentialed mental health practitioner determines:
1. That such placement is not contraindicated,

2. That the prisoner is not a suicide risk,

3. That the prisoner does not have active psychotic symptoms, and

4. In disciplinary circumstances, that lack of responsibility for the misconduct due to mental illness or mitigating factors related to the mental illness do not contraindicate disciplinary segregation.

(c) The MCF commander or designee will coordinate with qualified mental health authorities to advocate that prisoners with SMI who are diverted from an RH status will be placed in a clinically appropriate alternative form of housing, such as a secure mental health unit or other residential psychological treatment program provided by the nearest naval medical center or local hospital (per existing agreements) or transferred to a confinement facility capable of managing such prisoners. Certain prisoners requiring long-term psychiatric treatment may be transferred to a Federal psychiatric treatment facility, per section 7404.3 of reference (c).

(d) If a prisoner with SMI is placed on RH status:

1. MCF mental health staff will conduct a mental health consultation or evaluation at the time of the prisoner’s placement on RH status,

2. The prisoner will receive intensive, clinically appropriate mental health treatment for the entirety of the prisoner’s placement on RH status,

3. The prisoner will receive enhanced opportunities for both in-cell and out-of-cell therapeutic activities and additional unstructured out-of-cell time to the extent that such activities may be conducted while ensuring the safety of the prisoner, staff, other prisoners, and the general public,

4. At least once per week, a C&A board must review the prisoner’s placement on RH status,

5. At least once per week, a qualified mental health practitioner, assigned to supervise mental health treatment in SQ, must conduct face-to-face clinical contact with the prisoner to monitor the prisoner’s mental health status and identify signs of deterioration, and

6. After 30 days on RH status, the prisoner will be removed, unless the MCF commander or designee certifies that transferring the prisoner to an alternative housing is clearly unsuitable. In making this determination, the MCF commander or designee will consult with mental health staff who will conduct a psychological evaluation of the prisoner beforehand.

(e) Prisoners on RH status will be screened for signs of SMI. MCFs must implement policies, procedures, and practices to ensure that:
1. Prior to a prisoner’s placement on RH status (or, as soon as possible, but no later than 24 business hours of placement) medical staff, in collaboration with correctional staff, will promptly review available medical records to determine whether the prisoner has been previously designated as seriously mentally ill or at risk of developing SMI,

2. Multiple times per day, correctional staff, trained in identifying signs of mental health decompensation, must conduct rounds in SQ for prisoners housed on RH status,

3. At least once per day, medical staff will conduct medical rounds of SQ,

4. After 30 days on RH status, and every 30 days thereafter, all prisoners on RH status will receive a face-to-face psychological review by mental health staff, and

5. If at any point a prisoner shows signs of psychological deterioration while RH status, the prisoner must be immediately evaluated by mental health staff. At the conclusion of this review, mental health staff will recommend to the MCF commander or designee whether the prisoner requires immediate transfer to a medical treatment facility or other treatment center and whether the prisoner must receive enhanced mental health services and or referred to a clinically appropriate alternative form of housing.

e. **Juveniles (Under 18 at time of Confinement).** In the rare situation a military member under the age of 18 is confined, the following processes are applicable:

   (1) Juveniles will not be placed on RH status.

   (2) In very rare situations, a juvenile may be separated from others as a temporary response to behavior that poses a serious and immediate risk of physical harm to any person. Even in such cases, the placement must be brief, designed as a “cool down” period, and done only in consultation with a credentialed mental health professional.

f. **Young Adults (Age 18-24 at Time of Confinement)**

   (1) All correctional staff will receive initial and continual training on young adult brain development and appropriate de-escalation tactics. Training will incorporate reliable, evidence-based science.

   (2) MCFs will incorporate developmentally responsive procedures and practices for young adults, as resources allow.

g. **Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) and Gender Nonconforming Prisoners.** The Department of Justice Prison Rape Elimination Act national standards apply:

   (1) Prisoners who are LGBTI or whose appearance or manner does not conform to traditional gender expectations should not be placed on RH status solely based on such identification or status.
(2) When a prisoner who is LGBTQIA or non-binary prisoner faces a legitimate threat from other prisoners, correctional staff must seek alternative housing, with conditions comparable to those of general population to the extent possible.

(3) Correctional staff can sometimes avoid the unnecessary use of RH status for protective reasons by making different classification or housing assignments. In deciding whether to assign a transgender or intersex prisoner to a MCF or program for male or female prisoners, correctional staff leadership must consider on a case-by-case basis whether a placement would ensure the prisoner’s health and safety, giving serious consideration to the prisoner’s own personal views.

h. Pregnant and Post-Partum Prisoners

(1) Female prisoners who are pregnant, post-partum, recently had a miscarriage, or recently had a terminated pregnancy should not be placed on RH status. Medical authorities must be consulted (as applicable).

(2) In rare situations, a female prisoner who is pregnant, post-partum, recently had a miscarriage or recently had a terminated pregnancy may be placed on RH status as a temporary response to behavior that poses a serious and immediate risk of physical harm to self or others. Even in such cases, this decision must be approved by the agency’s senior official overseeing women’s programs and services (e.g., PERS-00D in consultation with senior officials in health services), and must be reviewed every 24 hours.

i. Prisoners with Medical Needs

(1) All prisoners on RH status must have unfettered access to appropriate medical care, including prescribed medications and emergency medical care.

(2) When an MCF lacks the capacity to provide appropriate medical care to a prisoner on RH, that prisoner will be transferred to an appropriate facility where necessary medical treatment may be received as soon as possible.

j. Data Collection and Transparency. MCFs will collect and input data about several aspects of their use of RH status via CORMIS, though specifically for facility and agency reporting purposes, the RH definition used in reference (a) and paragraph 4a of this instruction will be used.

(1) System-wide data - Data to be collected via CORMIS includes the incidence and prevalence of RH status, including the total number of prisoners who have been placed on RH status, RH status recidivism rates (i.e., intra-facility), and the average length of stay. This annual (calendar year) consolidated information will be publicly available on the NAVPERSCOM (PERS-00D) Corrections public Web site: https://www.mynav.yhr.navy.mil/Support-Services. It will include demographic information for prisoners, including race, national origin, religion, gender, gender identity, sexual orientation, disability status, and age to the extent that the collection and publication of such information complies with all applicable laws.
(2) Prisoner-level data - data that will allow MCFs to track individual prisoners throughout their confinement period. This will allow MCFs to determine whether, how often, and how long a particular prisoner has been placed on RH status, including the prisoner changes in status. This information will be made available to correctional staff, to the extent consistent with applicable law, as a way to identify correctional and rehabilitative strategies to treat disruptive prisoners, and must not be released publicly.

(3) Correctional officer data - CORMIS provides reports that facilitate implementation of an early intervention system, a management tool that promotes supervisory awareness and helps leadership identify trends, revise policy (as needed), and deploy additional staff training where necessary. This information must not be released publicly.

7. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned for the standard subject identification codes (SSIC) 1000 through 13000 series per the records disposition schedules located on the Department of the Navy/Assistant for Administration (DON/AA), Directives and Records Management Division (DRMD) portal page at: https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx.

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact your local records manager or the DON/AA DRMD program office.

8. Review and Effective Date. Per OPNAVINST 5215.17A, BUPERS-00D will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense, Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will be in effect for 10 years, unless revised or cancelled in the interim, and will be reissued by the 10-year anniversary date if it is still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

A. HOLSEY
Deputy Chief of Naval Personnel

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via BUPERS Web site: https://www.mynavyhr.navy.mil/References/Instructions/BUPERS-Instructions/.