

## 1.4.G.7 Extension of Confinement

### I Policy Index:



**Date Signed:** 05/30/2017  
**Distribution:** Public  
**Replaces Policy:** None  
**Supersedes Policy Dated:** None  
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**Revision Number:** 0  
**Office of Primary Responsibility:** DOC Administration

### II Policy:

Inmates may be placed in the community under “extension of confinement”, as provided in SDCL §§ 24-15-14, 24-2-25 and 24-2-27. Inmates may be placed in a facility (for example, a halfway house or nursing home) or in a private residence (home based). Inmates who meet the set criteria may be released to extension of confinement as a services release or pre-release.

### III Definitions:

#### Escape:

An inmate’s departure without lawful authority or failure to return to designated residential facility or private residence as required.

#### Global Position System (GPS):

The Global Positioning System is a worldwide radio-navigation system that uses satellites and ground stations as reference points to calculate positions accurate to a matter of meters.

#### Home Based:

A private residence.

#### Parole Agent:

For the purposes of this policy, a parole agent is an employee of the Department of Corrections responsible for the direct supervision of parolees (see SDCL § 24-15-14) and inmates housed in the community on extension of confinement.

#### Pre-Release:

An extension of confinement release that allows inmates to serve a portion of their sentence in the community. Inmates may be placed at an approved private residence (home based), or an approved residential facility.

#### Residential Facility:

A structured facility that provides services and supervision of its residents, such as a halfway house or nursing home. Such facilities may be operated by a unit of local government, private individual, partnership, corporation or an association.

**Services Release:**

An extension of confinement release that allows inmates to serve a portion of their sentence in the community to accommodate the treatment and service needs resulting from a medical and/or mental health condition. Inmates may be placed at an approved private residence (home based) or a residential facility equipped to provide necessary treatment and services.

**IV Procedures:****1. Authority:**

- A. The Warden may recommend to the Secretary of Corrections an inmate be released from custody and placed in the community to serve a portion of their sentence (See SDCL §§ [24-2-25](#) and [24-2-27](#)).
- B. Inmates may be considered for release to extension of confinement upon meeting criteria for pre-release or services release.
- C. Services releases are decided on an individual, case by case basis.
- D. Inmates placed on extension of confinement shall reside at either a private residence (home based) or a residential facility.
- E. No inmate has any implied right or expectation to be housed in any particular facility, participate in any specific program, or receive any specific service, and each inmate is subject to transfer from one facility, program or service at the discretion of the DOC (See SDCL § [24-2-27](#)).

**2. Eligibility Requirements for Pre-Release:**

- A. Inmates must meet the following requirements/criteria to be considered for pre-release:
  1. Minimum custody.
  2. Within six (6) months of Initial Parole Date and compliant.
  3. Currently serving time for non-violent offense.
  4. Not currently serving time for Hit and Run with Injury, Vehicular Homicide, or Vehicular Battery.
  5. Have an approved release plan (plan must be to remain in South Dakota).
  6. Must agree to program participation and conditions and sign Extended Confinement and GPS agreement.
  7. Agree to the terms of the Escape Acknowledgment form.
  8. No more than 3 felonies.
  9. Must have a current NCIC III search to verify there are no unresolved holds, detainers or warrants.
- B. Inmates will be identified for possible release to pre-release extension of confinement through the following processes:
  1. Generation of a list of inmates each month who have been identified as meeting the set criteria; or
  2. By the Admission and Orientation (A&O) case manager, after Central Records staff has completed the initial date calculation worksheets (See DOC policy 1.1.E.2 [Date Computation](#)) and the case manager has determined the inmate meets the set criteria.
    - a. The Warden and Secretary will review any inmate identified for possible release to extension of confinement.

- b. If the Warden or Secretary denies an inmate identified for possible release to extension of confinement, designated staff will generate a case note noting the denial.
- C. Eligible inmates will be contacted by unit staff. The inmate must indicate whether they wish to be considered for release to extension of confinement. Inmate participation in the extension of confinement eligibility process is strictly voluntary. Neither this policy nor its application may be the basis for establishing a constitutionally protected liberty, property, or due process interest in any inmate.
- D. Health Services and Behavioral Health Services staff will be notified of inmates identified as eligible for release to extension of confinement.
- E. Health Services and Behavioral Health Services staff will review the inmate's medical and treatment needs; including substance abuse, MRT, community mental health services. Health Services and Behavioral Health Services staff will develop treatment plans for referral, provision of necessary medical services, medication(s) and/or medication management, access to providers, etc. for inmates approved for release to extension of confinement (See DOH policy PE-13 [Discharge Planning](#)).
  1. Inmates released to extension of confinement as a pre-release are responsible for all costs of healthcare, treatment and medications, including co-pays.
- F. Inmates approved for release to extension of confinement will be added to the Initial Release List (See DOC policy 1.4.G.2 [Inmate Release Procedure](#)).
- G. Institutional case managers are responsible for reviewing the release plan for all inmates considered for possible release to extension of confinement. Case managers will initiate review of the inmate's release plan and other transition components six (6) months prior to the inmate's possible release. Approval of the inmate's release plan approval will follow the same processes applied to approval of release plans for inmates releasing to parole supervision (See DOC policy 1.4.G.1 [Inmate Release Plan and Transition Programming](#)).
- H. New system compliance reports or initial compliance reports will be completed by the institutional case manager and forwarded to the supervising parole agent for review with the inmate.
  1. Female inmates released to extension of confinement status on pre-release will be placed on the Pierre Community Work Center case manager's workload.

### 3. Supervision:

- A. All inmates releasing to extension of confinement will be supervised by a parole agent. Inmates agreeing to the provisions of release to extension of confinement also agree to be supervised by parole services staff and shall be subject to established and approved parole driven responses and sanctions.
- B. Inmates released to extension of confinement on pre-release will be supervised at an intensive supervision level for a minimum of two (2) months following release (See DOC policy 1.5.G.4 [Parole Services-Community Risk Assessment and Supervision of Inmates](#)).
  1. Inmates released to extension of confinement will not be required to pay parole supervision fees (See DOC policy 1.5.G.1 [Parole Services Supervision Fees](#)).
- C. Inmates are assigned community risk on a case by case basis, depending on medical/behavioral health issues, special needs, mobility, service setting, and other factors relevant to the inmate and

circumstances. Typically, assessed community risk can be adjusted upon recommendation by the parole agent and with approval from the agent's supervisor.

- D. Inmates released to extension of confinement on pre-release are required to submit a general parole monthly report to their agent.
- E. Inmates on Intensive level supervision may be eligible for movement to maximum supervision after two months, provided they have not received any formal sanction for a violation(s) of their Extended Confinement Agreement (See [Attachment 1](#)). Eligibility for placement on maximum supervision shall be determined by the supervising parole agent.
- F. All inmates released to extension of confinement must agree to abide by the conditions set forth in their Extended Confinement Agreement.
  - 1. All inmates released to extension of confinement are required to submit to a minimum of one urinalysis (UA) test per month. Parole agents will conduct the UA in accordance with DOC policy 1.3.A.8. [Inmate Drug Testing, Sanctions & Treatment](#). Inmates testing positive will receive an approved sanction/response.
- G. The supervising parole agent will complete a monthly Extended Confinement Monthly Report, which is an IWP in the Comprehensive Inmate Management System (COMS), the first day of each month, for each extension of confinement inmate included in their caseload the last day of the reporting month. The IWP will be forwarded to the agent's supervisor, who will combine all reports received into one report and email this to the Deputy Secretary, Director of Parole Services and the inmate's case manager. The information reported will be used to determine inmate compliance.
- H. The supervising parole agent has authority to issue a violation report for any inmate who fails to abide by the Extended Confinement Agreement, and/or order the detainment or return of the inmate to DOC custody consistent with the Extended Confinement Violation Severity Scale (See [Attachment 3](#)).
- I. Inmates released to extension of confinement, who will discharge their sentence while on extension of confinement, will be added to the Release Schedule the month they are scheduled to discharge their sentence and are subject to existing pre-release procedures and requirements, i.e. current warrants check, re-calculation of release date, etc. (See DOC Policy 1.4.G.2 [Inmate Release Procedure](#)).
- J. Inmates released to extension of confinement are not eligible for earned discharge credits. The inmate's release date shall be determined in accordance with the procedures contained within DOC policy 1.1.E.2 [Date Computation](#).

#### 4. Placement on GPS:

- A. Pre-release inmates who are placed at a private residence (home based), must be on Global Position System (GPS) monitoring. The inmate is responsible for all corresponding GPS fees (See DOC policy 1.5.G.10 [Parole Services GPS and Electronic Monitoring](#)), unless an exemption is approved by the parole agent's supervisor and this is stated in the Extended Confinement Agreement (See [Attachment 1](#) and GPS Monitoring Agreement [Attachment 4](#)). Parole Services staff will track those inmates who submit GPS monitoring fees each month. Parole agents are responsible for ensuring all inmates released on extension of confinement submit the monthly fee, unless granted an exception.
  - 1. Inmates will pay the GPS fee by providing their parole agent with a money order, which shall be forwarded to the DOC Administration Office.

2. The money order must include a note stating it is for Extension of Confinement GPS fees and include the name of the facility from which the inmate was released.
- B. Inmates required to submit to GPS monitoring will have the GPS bracelet attached and activated by parole staff, or institutional staff trained to attach and activate the GPS unit, prior to release from custody. The supervising parole agent is responsible for activating the EC alert in COMS.
- C. The inmate is required to review and sign the Extended Confinement GPS Blue Agreement (See [Attachment 4](#)). Staff will explain the contents of the agreement and expectations to the inmate. Inmates are expected to know, understand and comply with the nature, limitations of GPS monitoring as well as possible consequences for violations.
- D. The GPS provider will promptly contact the Jameson Prison Annex (JPA) control room by telephone and email the supervising parole agent when there is a general GPS alert or Master Tamper alert.
- E. JPA staff will contact the agent by telephone. If contact is not made with the agent, JPA staff will contact the parole agent's supervisor and inform the supervisor of the alert. If neither the agent nor supervisor can be contacted, JPA staff will leave a voice mail for both concerning the alert.
- F. The inmate's supervising parole agent will respond to general GPS alerts (low battery, curfew violations) and Master Tamper alert (cut strap or no response from the unit) received from the GPS provider during regular work hours, or the next work day if the alert is received during non-work hours or a holiday or weekend.
- G. Agent's response to a Master Tamper alert:
  1. Attempt to contact the offender by telephone or personal contact or through dispatch of law enforcement to resolve the alert and/or discuss with the offender how to avoid future alerts;
  2. Go to the offender's residence to determine the cause of the alert, if necessary;
  3. Alert authorities, supervisors, if the alert is confirmed as a violation/escape; and
  4. Review the violations with their supervisor as necessary and write a violation or determine a response when appropriate.

## 5. Procedures to Determine Escape:

- A. Whenever it is suspected an inmate released to extension of confinement may have escaped, the supervising parole agent will attempt to establish contact with the inmate and/or establish the location of the inmate. Any of the following methods may be used to contact or locate an inmate:
  1. Telephone;
  2. Field contact at last known residence;
  3. GPS website verification of last unit contact; and/or
  4. Collateral contacts, to include:
    - a. Parents and/or other family members.
    - b. Last known employer.

- c. Local law enforcement.
  - d. Community resource providers.
- B. When the supervising parole agent's attempts to contact and/or locate the inmate have failed, or it is clear the inmate has escaped, the agent will contact their supervisor. The agent and supervisor will confirm at least two (2) of the criteria listed below, or one of the criteria listed in 5.D.7 have been met:
1. Inmate is not responding to phone calls or contact attempts.
  2. Inmate has moved out of the last known or reported residence.
  3. Inmate has quit, left, or otherwise been terminated from his/her last known/reported employment.
  4. Inmate has discontinued contact with family and friends.
  5. Inmate is no longer attending treatment, aftercare, or other programming/sanctioned activity (24/7).
  6. Inmate has missed a confirmed appointment with the supervising Parole Agent.
  7. Or **one** of the following occurs:
    - a. It has been confirmed the inmate has removed his/her GPS unit without authorization; or
    - b. It is confirmed and been reported to the agent that inmate has failed to return to his/her assigned residential facility as specified (date and time).

## 6. Response to Confirmed Escape:

- A. Upon determination by the parole agent and their supervisor the inmate has escaped, the supervisor will contact the Jameson Prison Annex (JPA) control room and inform the control room the inmate has escaped. JPA control room staff will notify the control room at the institution where the inmate is formally counted by telephone of the escape.
- B. JPA control room staff will initiate the Extended Confinement Escape Checklist (See [Attachment 5](#)) and begin notification of staff, in accordance with the institution's plan/checklist.
- C. Notice of the escape shall be provided to DOC Administration, in accordance with DOC policy 1.1.A.3 [Staff Reporting Information to DOC Administration](#).
- D. At the direction of the Secretary of Corrections or designee, the Communications and Information Manager may issue a media advisory and/or post information to the public through Nixle regarding the inmate's escape (See DOC policy 1.1.A.4 [Relationship with News Media, Public and Other Agencies](#)).
- E. The JPA control room staff will notify the Sheriff in the county where the escape occurred and request an escape warrant be issued. It is the responsibility of the Sheriff to request the State Case and to enter this into the NCIC. Venue for prosecution of escape by an inmate shall be in the county where the inmate who committed the acts constituting the escape resides (See SDCL § [24-2-27](#)).

1. Upon notice to the institution of the apprehension or return of the escaped inmate, the institutional control room will notify the Sheriff (if the inmate is not in the custody of the Sheriff who issued the escape warrant) of the apprehension or return of the inmate. The Sheriff is responsible to cancelling the State Case and NCIC request (Wanted Person file) and deciding whether to request charges against the inmate for felony escape.
  2. If the inmate is apprehended or turns their self in outside of South Dakota, it is the responsibility of the Sheriff and State's Attorney of the county where the escape occurred to arrange for the extradition of the inmate to South Dakota.
- F. Inmates must agree to abide by the conditions set forth in the Extended Confinement Escape Acknowledgement (See [Attachment 2](#)). Any inmate on extension of confinement that commits escape is in violation of SDCL § [22-11A-2.1](#).

## 7. Violation Sanction Scale:

- A. The supervising parole agent will address violations and/or prohibited behaviors noted in the Extension of Confinement Agreement through application of the Extended Confinement Violation Sanction Scale (See [Attachment 3](#)). If the parole agent intends to issue the inmate a sanction that is different (higher or lower) than the recommended sanction, or the behavior committed by the inmate is not listed on the severity scale, the agent will contact their supervisor.
1. The supervising parole agent will document violations committed by the inmate and the corresponding sanctions in the Comprehensive Inmate Management System (COMS).
- B. The supervising parole agent has authority to issue a violation report for an inmate's failure to abide by certain conditions of extension of confinement, including all applicable agreements which apply to the inmate and/or after determining the inmate's behavior(s) may constitute a threat or danger to the inmate or public.
1. In the event the inmate's violation(s) results in the inmate being returned to DOC custody, the parole agent will submit a violation report to the Warden of the institution. The parole agent will notify the institutions control room prior to an inmate being brought back to DOC custody.
  2. Upon return of the inmate to the institution, staff will write the inmate for a disciplinary violation, as deemed appropriate (See DOC policy 1.3.C.2 [Inmate Discipline System](#)).

## 8. Accounts, Financial Accountability and Gate Money:

- A. Inmates approved for release to extension of confinement will be provided suitable clothing, not to exceed one hundred dollars in actual cost, and travel expenses not to exceed fifty dollars in accordance with SDCL § [24-5-3](#) and DOC policy 1.4.G.3 [Inmate Release Procedure](#). Transportation arrangements shall be approved by the inmate's unit staff.
- B. Inmates placed on pre-release will have all sub accounts within the DOC Inmate Banking System (IBS) closed (See DOC policy 1.1.B.2 [Inmate Accounts and Financial Responsibility](#)). Inmates are responsible for managing their own finances.
- C. Inmates remain responsible for all fixed obligations, restitution, court-ordered costs etc. when on pre-release.

**9. Count:**

- A. Inmates released on extension of confinement will be placed on TAP/Off Count (See DOC policy 1.3.A.2 *Inmate Counts*).
- B. Upon release, the community booking will be opened as an Extended Confinement Release. The inmate will be assigned to a parole agent's caseload and included in the parole count.

**V Related Directives:**

SDCL §§ 22-11A-2.1, 24-2-25, 24-2-27, 24-5-3 and 24-15-14,  
ARSD § 17:61:02:18 and 17:61:02:08.

- DOC policy 1.5.G.10 -- *Parole Services GPS and Electronic Monitoring*
- DOC policy 1.1.A.3 -- *Staff Reporting Information to DOC Administration*
- DOC policy 1.1.A.4 -- *Relationship with News Media, Public and Other Agencies*
- DOC policy 1.1.B.2 -- *Inmate Accounts and Financial Responsibility*
- DOC policy 1.1.E.2 -- *Date Computation*
- DOC policy 1.3.A.8. -- *Inmate Drug Testing, Sanctions & Treatment*
- DOC policy 1.3.C.2 -- *Inmate Discipline System*
- DOC policy 1.4.G.1 -- *Inmate Release Plan and Transition Programming*
- DOC Policy 1.4.G.2 -- *Inmate Release Procedure*
- DOC policy 1.5.G.1 -- *Parole Services Supervision Fees*
- DOC policy 1.5.G.4 -- *Parole Services-Community Risk Assessment and Supervision of Inmates*
- DOH policy PE-13 -- *Discharge Planning*

**VI Revision Log:**

**May 2017:** New Policy

<i>Denny Kaemingk (original signature on file)</i>	<i>05/30/2017</i>
Denny Kaemingk, Secretary of Corrections	Date

## Attachment 1: Extended Confinement Agreement

The **Extended Confinement Agreement** form is located on the state's WAN.

A copy may be printed using **Microsoft Word 97** as follows:

1. Click [here](#) to access the **Extended Confinement Agreement** by:
  - a. Placing mouse on the word "here" above
  - b. Press and hold the "Ctrl" key on the keyboard
  - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Extended Confinement Agreement**.

The gray areas indicate the information that is to be entered.

The image shows two pages of a document titled "EXTENDED CONFINEMENT AGREEMENT".

**Page 1:** Contains a header with the South Dakota Department of Corrections logo. Below it are fields for NAME, DOC ID, and BOOKING ID. There are checkboxes for "EXTENDED CONFINEMENT RELEASE TYPE" (Pre-Release, Services) and "PLACEMENT TYPE" (Home Based, Residential Facility). A section titled "Reason if placed as a Services Extended Confinement:" is followed by a paragraph: "In Consideration of Extended Confinement being granted me, I agree to the following: (Staff will have offender initial next to conditions that apply)". Below this are 11 numbered conditions (EA1-EA11) starting with "I will obey all Municipal, County, State, Tribal, and Federal Laws." and ending with "I will not travel outside of my assigned area or leave the State of South Dakota without". At the bottom left, it says "Revised: 05/24/2016" and "1".

**Page 2:** Continues with conditions EA12-EA23. EA12-EA20 are numbered conditions starting with "I will allow my supervising agent to visit me in my home, my employment site, or elsewhere and promptly respond to contact attempts by my agent." EA21-EA23 are numbered conditions starting with "I understand that I will be supervised at a no less restrictive level than maximum supervision as defined in administrative rules section 17.51.02.03." EA23 is "Additional Conditions:". Below the conditions is a paragraph: "I have read or have had read to me, fully understand, and agree to abide by the conditions of this agreement. I understand and agree that my supervising agent and/or the DOC has the authority to place me in custody at any time and return me to the State Penitentiary." At the bottom, there are three lines for "Offender Signature", "Witness", and "Date". At the bottom left, it says "Revised: 05/24/2016" and "2".

## Attachment 2: Extended Confinement Escape Acknowledgement

The **Extended Confinement Escape Acknowledgement** form is located on the state's WAN.

A copy may be printed using **Microsoft Word 97** as follows:

1. Click [here](#) to access the **Extended Confinement Escape Acknowledgement** by:
  - a. Placing mouse on the word "here" above
  - b. Press and hold the "Ctrl" key on the keyboard
  - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Extended Confinement Escape Acknowledgement**.

The gray areas indicate the information that is to be entered.



### EXTENDED CONFINEMENT ESCAPE ACKNOWLEDGEMENT

NAME:

DOC ID:

BOOKING ID:

In Consideration of Extended Confinement being granted me, by signing this document, I understand that I remain an inmate under the jurisdiction of the SD Department of Corrections during my placement on Extended Confinement. I understand I have no implied right or expectation to be housed in any particular facility, participate in any specific program, or receive any specific service, and I understand I am subject to transfer from any facility, program, or service at the discretion of the DOC.

I understand that any escape from a facility, program, or service maintained outside the penitentiary is violation of 22-11A-2.1 or 22-11A-2. I understand that any unauthorized absence from my extended confinement placement is an escape, a felony punishable by an additional prison sentence.

**22-11A-2. First degree escape--Felony.** Any escape by a prisoner constitutes first degree escape if the prisoner effects the escape:

- (1) By means of the use or threat of violence;
- (2) From a secure correctional facility; or
- (3) From the immediate custody of a law enforcement officer or Department of Corrections employee.

First degree escape is a Class 4 felony.

**22-11A-2.1. Second degree escape--Felony.** Any escape by a prisoner constitutes second degree escape if the prisoner effects the escape by means of failure to return to custody following an assignment or temporary leave granted for a specific purpose or limited period or leaves a nonsecure correctional facility without authorization. Second degree escape is a Class 5 felony.

During your period of Extended Confinement, the following violations constitute escape:

- Failure to report to your supervising agent as directed
- Failure to report to a law enforcement agency as directed by your supervising agent
- Leaving your residence or facility of residence without the authorization of your supervising agent
- Failure to return, as directed by your supervising agent, to your residence or facility of residence following an assignment or approved leave.
- Failure to be present at a program or service as directed by your supervising agent.

I have read or have had read to me, fully understand, and agree to abide by the conditions of this agreement. I understand and agree that my supervising agent and/or the DOC has the authority to place me in custody at any time and returned to the custody of the DOC.

X \_\_\_\_\_

*Offender Signature*                      *Witness*                      *Date*

Revised 02/08/2017

### Attachment 3: Extended Confinement Violation Severity Scale

The **Extended Confinement Violation Severity Scale** form is located on the state's WAN.

A copy may be printed using **Microsoft Word 97** as follows:

1. Click [here](#) to access the **Extended Confinement Violation Severity Scale** by:
  - a. Placing mouse on the word "here" above
  - b. Press and hold the "Ctrl" key on the keyboard
  - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Extended Confinement Violation Severity Scale**.

The gray areas indicate the information that is to be entered.

Extended Confinement VIOLATION SEVERITY SCALE

If the violation is not included in this table, the case should be handled by the area supervisor and institutional contacts to determine the appropriate Severity Level.

AGREEMENT CONDITION	BEHAVIOR	Severity Level	
		Pen Month	Service
1*1*00001	1*1*00001	X	X
1*1*00002	1*1*00002	X	X
1*1*00003	1*1*00003	X	X
1*1*00004	1*1*00004	X	X
1*1*00005	1*1*00005	X	X
1*1*00006	1*1*00006	X	X
1*1*00007	1*1*00007	X	X
1*1*00008	1*1*00008	X	X
1*1*00009	1*1*00009	X	X
1*1*00010	1*1*00010	X	X
1*1*00011	1*1*00011	X	X
1*1*00012	1*1*00012	X	X
1*1*00013	1*1*00013	X	X
1*1*00014	1*1*00014	X	X
1*1*00015	1*1*00015	X	X
1*1*00016	1*1*00016	X	X
1*1*00017	1*1*00017	X	X
1*1*00018	1*1*00018	X	X
1*1*00019	1*1*00019	X	X
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1*1*00082	1*1*00082	X	X
1*1*00083	1*1*00083	X	X
1*1*00084	1*1*00084	X	X
1*1*00085	1*1*00085	X	X
1*1*00086	1*1*00086	X	X
1*1*00087	1*1*00087	X	X
1*1*00088	1*1*00088	X	X
1*1*00089	1*1*00089	X	X
1*1*00090	1*1*00090	X	X
1*1*00091	1*1*00091	X	X
1*1*00092	1*1*00092	X	X
1*1*00093	1*1*00093	X	X
1*1*00094	1*1*00094	X	X
1*1*00095	1*1*00095	X	X
1*1*00096	1*1*00096	X	X
1*1*00097	1*1*00097	X	X
1*1*00098	1*1*00098	X	X
1*1*00099	1*1*00099	X	X
1*1*00100	1*1*00100	X	X

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Extended Confinement Violation Sanction Scale

If the violation is not included in this table, the case should be handled by the area supervisor and institutional contacts to determine the appropriate Severity Level.

AGREEMENT CONDITION	BEHAVIOR	Severity Level	
		Pen Month	Service
1*1*00001	1*1*00001	X	X
1*1*00002	1*1*00002	X	X
1*1*00003	1*1*00003	X	X
1*1*00004	1*1*00004	X	X
1*1*00005	1*1*00005	X	X
1*1*00006	1*1*00006	X	X
1*1*00007	1*1*00007	X	X
1*1*00008	1*1*00008	X	X
1*1*00009	1*1*00009	X	X
1*1*00010	1*1*00010	X	X
1*1*00011	1*1*00011	X	X
1*1*00012	1*1*00012	X	X
1*1*00013	1*1*00013	X	X
1*1*00014	1*1*00014	X	X
1*1*00015	1*1*00015	X	X
1*1*00016	1*1*00016	X	X
1*1*00017	1*1*00017	X	X
1*1*00018	1*1*00018	X	X
1*1*00019	1*1*00019	X	X
1*1*00020	1*1*00020	X	X
1*1*00021	1*1*00021	X	X
1*1*00022	1*1*00022	X	X
1*1*00023	1*1*00023	X	X
1*1*00024	1*1*00024	X	X
1*1*00025	1*1*00025	X	X
1*1*00026	1*1*00026	X	X
1*1*00027	1*1*00027	X	X
1*1*00028	1*1*00028	X	X
1*1*00029	1*1*00029	X	X
1*1*00030	1*1*00030	X	X
1*1*00031	1*1*00031	X	X
1*1*00032	1*1*00032	X	X
1*1*00033	1*1*00033	X	X
1*1*00034	1*1*00034	X	X
1*1*00035	1*1*00035	X	X
1*1*00036	1*1*00036	X	X
1*1*00037	1*1*00037	X	X
1*1*00038	1*1*00038	X	X
1*1*00039	1*1*00039	X	X
1*1*00040	1*1*00040	X	X
1*1*00041	1*1*00041	X	X
1*1*00042	1*1*00042	X	X
1*1*00043	1*1*00043	X	X
1*1*00044	1*1*00044	X	X
1*1*00045	1*1*00045	X	X
1*1*00046	1*1*00046	X	X
1*1*00047	1*1*00047	X	X
1*1*00048	1*1*00048	X	X
1*1*00049	1*1*00049	X	X
1*1*00050	1*1*00050	X	X
1*1*00051	1*1*00051	X	X
1*1*00052	1*1*00052	X	X
1*1*00053	1*1*00053	X	X
1*1*00054	1*1*00054	X	X
1*1*00055	1*1*00055	X	X
1*1*00056	1*1*00056	X	X
1*1*00057	1*1*00057	X	X
1*1*00058	1*1*00058	X	X
1*1*00059	1*1*00059	X	X
1*1*00060	1*1*00060	X	X
1*1*00061	1*1*00061	X	X
1*1*00062	1*1*00062	X	X
1*1*00063	1*1*00063	X	X
1*1*00064	1*1*00064	X	X
1*1*00065	1*1*00065	X	X
1*1*00066	1*1*00066	X	X
1*1*00067	1*1*00067	X	X
1*1*00068	1*1*00068	X	X
1*1*00069	1*1*00069	X	X
1*1*00070	1*1*00070	X	X
1*1*00071	1*1*00071	X	X
1*1*00072	1*1*00072	X	X
1*1*00073	1*1*00073	X	X
1*1*00074	1*1*00074	X	X
1*1*00075	1*1*00075	X	X
1*1*00076	1*1*00076	X	X
1*1*00077	1*1*00077	X	X
1*1*00078	1*1*00078	X	X
1*1*00079	1*1*00079	X	X
1*1*00080	1*1*00080	X	X
1*1*00081	1*1*00081	X	X
1*1*00082	1*1*00082	X	X
1*1*00083	1*1*00083	X	X
1*1*00084	1*1*00084	X	X
1*1*00085	1*1*00085	X	X
1*1*00086	1*1*00086	X	X
1*1*00087	1*1*00087	X	X
1*1*00088	1*1*000		

## Attachment 4: Extended Confinement GPS Blue Agreement

The **Extended Confinement GPS Blue Agreement** form is located on the state's WAN.

A copy may be printed using **Microsoft Word 97** as follows:

1. Click [here](#) to access the **Extended Confinement GPS Blue Agreement** by:
  - a. Placing mouse on the word "here" above
  - b. Press and hold the "Ctrl" key on the keyboard
  - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Extended Confinement GPS Blue Agreement**.

	<p><b>DEPARTMENT OF CORRECTIONS</b> <i>Parole Services</i> 408 S 2<sup>nd</sup> Ave, Suite 104 Sioux Falls, SD 57104-6919 Phone: (605) 367-5780 Fax: (605) 367-5785</p>
<p><b>GPS ELECTRONIC MONITORING AGREEMENT</b> <i>GPS – BLU SUPERVISION AGREEMENT</i></p>	
<p>I understand and agree to abide by the conditions of this agreement and to GPS electronic monitoring as a condition of my placement on Extended Confinement.</p>	
<p>I agree to wear a Global Position Satellite (GPS) monitoring device to continuously track my whereabouts in the community. I understand that I will be financially responsible for all or part of the cost associated with GPS monitoring (up to \$3.00 per day).</p>	
<p>I agree to properly maintain all the equipment, keeping it charged, in good working order, and to report any issues regarding the equipment to my supervising agent immediately.</p>	
<p>I understand and agree that if any of the equipment is damaged, lost, or not returned, I am liable for any and all costs associated with the repair, recovery, or replacement of such equipment.</p>	
<p>Start Date: _____ End Date: _____ _____ days X \$ _____ = \$\$ (total)</p>	
<p>_____ Parolee Name (Printed)</p>	
<p>_____ Parolee Signature</p>	<p>_____ Date</p>
<p>_____ Agent Name (Printed)</p>	
<p>_____ Agent Signature</p>	<p>_____ Date</p>

## Attachment 5: Extended Confinement Escape Checklist

The **Extended Confinement Escape Checklist** form is located on the state's WAN.

A copy may be printed using **Microsoft Word 97** as follows:

1. Click [here](#) to access the **Extended Confinement Escape Checklist** by:
  - a. Placing mouse on the word "here" above
  - b. Press and hold the "Ctrl" key on the keyboard
  - c. Click the left button of mouse.
2. Or Select **File/New** from the Menu Bar / Select the **DOC** tab / Select **Extended Confinement Escape Checklist**

ESCAPE CHECKLIST EXTENDED CONFINEMENT		ESCAPE CHECKLIST EXTENDED CONFINEMENT	
INMATE NAME: _____	NUMBER: _____	Central Office phone is 605-773-3478 from 8 am to 5 pm Monday through Friday. Notify Department Secretary, Deputy Secretary, Director of Prison Operations, and Public Information Officer in all cases.	
Description of Inmate: Height: _____ Weight: _____ Age: _____ Race: _____		_____ Department Secretary Denny Kaemigk	Cell: 605-220-6616
Hair Color: _____ Eye color: _____ Other distinguishing features (tattoo, scars, etc.): _____		_____ Deputy Secretary Laurie Feiler	Cell: 605-280-1626
Description of Incident: _____		_____ Warden Bob Dooley Home: 605-660-4443	Cell: 605-661-6699 (DO NOT LEAVE A MESSAGE)
		_____ Michael Winder, DOC Public Info.	Cell: 605-295-2494
		PRINT NAME SIGNATURE OF OFFICER COMPLETING CHECKLIST _____ DATE _____	
Check the following activities as they are completed and indicate the time of completion as accurately as possible. These items may not be done in the exact order listed, depending upon the circumstances of the escape. Submit to the Deputy Warden upon completion.			
_____ Jameson Central Control verifies the escape with the supervising parole agent.			
_____ Jameson Central Control notifies the OIC who shall notify appropriate Senior Staff. See list on next page.			
Name and phone number of OIC in charge of responding to incident: _____			
_____ Metro Communications (911) notified in the county or area offender was residing.			
_____ Email, scan or fax Escape Poster to Metro Communications at email address in the county or area offender was residing.			
NOTIFICATIONS: Notify law enforcement agencies, also keep a record of agency and name of person contacted and whenever possible provide an Escape Poster to law enforcement by email, scan or fax:			
_____ South Dakota Highway Patrol			
_____ Sheriff's Department covering the community where escape occurred (do not maximize names)			
_____ Sheriff's Dept. in county of conviction, if different county than where escape occurred			
All questions or inquiries from the media shall be directed to the DOC Public Information Office (listed below).			
Time this checklist was completed: _____			
_____ Copy of escape checklist sent to Special Security Office.			
Additional Information: _____			
_____			
If a male offender escapes contact:			
_____ Warden Darin Young	Home: 331-2112 Cell: 941-4741		
_____ Major Steve Baker	Home: 336-1385 Cell: 201-4192		
If a female offender escapes contact:			
_____ Warden Brent Fluke	Home: Cell: 280-8093		
_____ DW Darren Berg	Home: Cell: 280-1756		
ESCAPE CHECKLIST-EXTENDED CONFINEMENT Page 1 of 2 02/2017		ESCAPE CHECKLIST-EXTENDED CONFINEMENT Page 2 of 2 02/2017	