SOU	SOUTH DAKOTA		PAGE NUMBER
DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE		300-25	1 OF 10
		DISTRIBUTION:	Public
		SUBJECT:	Mother - Infant Program
RELATED	None	EFFECTIVE DATE:	December 01, 2024
STANDARDS:		SUPERSESSION:	12/01/2023
DESCRIPTION: Facilities - Security & November Management		KELLIE WASKO SECRETARY OF CORRECTIONS	

I. POLICY

The policy of the South Dakota Department of Corrections (DOC) is to provide the Mother - Infant Program for eligible offenders at the South Dakota Women's Prison (SDWP). The DOC shall have provisions in place to ensure the safety, security, custody, control, and care of offenders participating in the program.

II. PURPOSE

The purpose of this policy is to provide staff members with procedural guidelines for the South Dakota Women's Prison Mother - Infant Program. Participation in the program provides offenders an opportunity to perpetuate the bonding of a mother/child relationship. The program allows the mother/child relationship to develop and continue during the mother's incarceration. The program supports the goal of agencies to keep the mother and child together.

III. DEFINITIONS:

Mother Infant Committee:

The Mother Infant Committee will be composed of the following members: major, housing captain, health services administrator, behavioral health supervisor, and Mother - Infant coordinator. The committee will confer with other staff members as the need arises. The committee will meet monthly to review new applications, discuss program development, and assess progress of participants.

IV. PROCEDURES

1. Offender Eligibility:

- A. An offender is eligible to participate in the Mother Infant program if her initial parole eligibility Date (INPD) or next review date (NRD) is within thirty (30) months of the birth of her baby. Mothers requesting to participate in the Mother Infant Program for any time exceeding thirty (30) months must receive a positive recommendation from the Mother-Infant Committee and receive final approval from the warden and director of prisons. Generally, participation does not exceed a maximum of thirty (30) months. Length of the program may be reduced as outlined in this policy.
- B. Offenders assigned to a transition program or assigned to protective custody will be considered on a case-by case-basis only.
- C. Offenders and secondary caregivers with the following offenses within their criminal history, are not eligible:
 - 1. Kidnapping (All).

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- 2. Manslaughter 1st and 2nd.
- 3. Murder 1st and 2nd.
- 4. Rape All.
- 5. Robbery (All).
- 6. Arson (All).
- 7. Burglary 1st.
- 8. Commission of a Felony While Armed with Firearm (All).
- 9. Possession of a Weapon by Offender.
- 10. Criminal Pedophilia.
- 11. Possession of Weapon in Jail.
- 12. Aggravated Assault Baby (includes subsequent offense).
- 13. Aggravated Assault Against Law Enforcement.
- 14. Child Abuse (All).
- 15. Sexual Contact (All).
- 16. Vehicular Homicide.
- 17. Vehicular Battery.
- 18. Removal of a Child from State.
- 19. Stalking (includes 1st felony offense, subsequent offense and child 12 or younger).
- 20. Discharging a Firearm at an Occupied Structure or Motor Vehicle (with bodily injury).
- 21. Photographing Child in Obscene Act.
- 22. Possession of a Firearm by a Felon.
- 23. Sliming (felony).
- 24. Indecent Exposure (All).
- 25. Simple Assault (All).
- 26. Possession of Child Pornography.
- 27. Incest (All).
- 28. Discharging a Firearm from a Moving Vehicle.
- 29. Sexual Exploitation of a Child (includes subsequent offense).
- 30. Threatening to Commit a Sexual Offense.
- 31. Solicitation of a Minor (includes subsequent offense).
- 32. Riot (All).
- 33. Enticing Away a Child.
- 34. Violation of Drug Free Zone (reviewed on a case-by-case basis).
- 35. Distribution of Drugs/Controlled Substance/Flunitrazepam to a Minor.
- 36. Permitted Physical or Sexual Abuse of a Child.
- 37. Indecent Exposure Involving a Child under 13.
- D. Included are attempts, conspiracy, or solicitation to commit these offenses, as delineated in statute and documented in the comprehensive offender management system (COMS). Includes accessory to any of the above listed crimes. Child abuse will be determined on crime, past history, inquiry to, and response received by Department of Social Services (DSS) Child Protection Services (CPS). NCIC criminal history shall be used to confirm legal history. Pending charges and outstanding warrants may be considered.
- E. Exceptions may be made at the discretion of the director of prisons.
- F. Selection of the offenders eligible to participate in the Mother Infant program will be through majority recommendation of the Mother Infant Committee.
- G. The Mother Infant program coordinator will review the mother's application folder for completeness and make written recommendation with the policy-related reason of approval or denial to the warden. The warden may approve or deny the request to participate.

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H. An offender may appeal the decision of the warden by completing an *Informal Resolution Request* form (attachment in DOC policy 500-04 – *Grievance Procedure*), which shall follow the process outlined in the policy.

2. Application and Admission of Pregnant Offender:

- A. Information will be given to all pregnant offenders regarding the Mother Infant Program upon admission to SDWP.
- B. The facility health services administrator (HSA) will notify the Mother Infant coordinator when a pregnancy is confirmed.
- C. The Mother Infant coordinator will add the alert notification in COMS, including the expected delivery date as provided by clinical services. This will serve as the end date of the alert and may be adjusted as deemed necessary based on changes in the actual delivery date. A complete and current list of all offenders currently incarcerated, who are pregnant shall be maintained by clinical services. The list shall include the expected delivery date.
- D. Pregnant offenders requesting the program will complete the *Mother Infant Program Application* (attachment #1).
- E. The application must be completed and sent to the Mother Infant coordinator. Applicants will be considered based upon the applicant's current offense(s), prior criminal history, psychological and medical background, substantiated drug use during pregnancy, length of sentence, and overall suitability for the program.
- F. Eligible offenders who apply to the Mother Infant Program, and are accepted, will be oriented to the requirements of the program. The requirements of the program shall be included within the Mother Infant posted operational rules.
- G. Offenders within four (4) weeks prior to their delivery date who have been accepted into the program, will receive an orientation inside the unit and identify the room where they will be assigned upon return to the facility (post-delivery). Offenders may be moved into the house up to four (4) weeks before their anticipated delivery date. The Mother Infant coordinator shall coordinate the move with the housing captain.
- H. Upon entering the Mother Infant Program, each mother will designate a pre-approved community caregiver for her infant. The *Community Caregiver Agreement* (attachment #2) must be completed and signed by the mother and designated community caregiver.
- I. The offender must affirm she will be the primary caregiver of the infant upon release. Exceptions will be given to mothers going to inpatient substance use treatment centers.

3. Participation:

- A. The mother and secondary caretakers must participate in the following classes or programs:
 - 1. Common Sense Parenting (SDWP Education Department).
 - 2. Healthy Start.
 - 3. Understanding Me (Right Turn).
 - 4. Responsive Parenting (Right-Turn/DSS).
 - 5. Infant / Child CPR (Right-Turn).
 - 6. Lactation Counseling (Avera) (Optional).
 - 7. Other programming as determined by the Mother Infant Program coordinator.

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- B. All mothers and secondary caretakers are required to attend workshops, guest speakers, seminars, webinars, etc. as directed by the Mother Infant Program coordinator or committee.
- C. The mother must remain in compliance with her individual program directive (IPD).
- D. Satisfactory overall institutional performance must be maintained by all Mother Infant participants and secondary caretakers, and shall include the following:
 - 1. Must cooperate within the Mother Infant house, substantially follow the posted operational rules of the Mother Infant unit and appropriately collaborate with the staff and other offenders.
 - 2. Must fulfill work assignment(s), consistent with DOC policy pertaining to offender work assignments and as permitted by medical and mental health eligibility coding. Post partum recovery is at least six (6) weeks unless the offender requests to return to work sooner.
- E. Participants must continue to receive medical and mental health clearance to participate in the program. Participants will receive at least two (2) visits per week from behavioral health staff.
- F. The mother will be responsible for the primary care of their infant. The mother must consistently first provide for the daily needs of their child, including feeding, bathing, and laundry. The secondary caregiver's role is to support the mother in ensuring the infants needs are met when the mother is temporarily unavailable, i.e., at work, programming, appointments.
- G. The Mother Infant coordinator shall maintain records for the Mother Infant Program. The records will consist of the following:
 - 1. Completed application form for program participation.
 - 2. Notification of acceptance or rejection.
 - 3. Completed program agreement.
 - 4. Weekly or as needed case notes in COMS, to be entered by the Mother Infant coordinator.
 - 5. Evaluation of offender's course/class performance will be completed by the facilitator.
 - 6. Community caregiver agreement.
 - 7. Record of immunizations for the child.
 - 8. Copy of child's birth certificate.
 - 9. Copy of child's social security card or number.
 - 10. Child allergy notations or other notable medical needs or issues.
 - 11. Public assistance credentials (such as Women, Infants, & Children (WIC)) for each eligible member (baby).
- H. Participants may be searched at any time, to include children, property, and room.

4. Removal from the Program:

- A. Removal from the Mother Infant Program may be voluntary or involuntary.
- B. Voluntary requests for removal from the Mother Infant Program will be in writing and submitted to the Mother Infant coordinator.
- C. Involuntary removal from the program may be pursued in response to any of the following:
 - 1. Suspicion of physical, sexual, emotional, or mental abuse or neglect of the child, or substantiated child abuse, as defined by DSS policy.
 - 2. Physical altercations of any kind involving the mother and other mothers, or staff.
 - 3. Failure to comply with the IPD.
 - 4. Major disruption in physical plant capabilities of essential needs, such as HVAC, water, or sewer capabilities or structural concerns that disrupt the residential status of the house.
 - 5. Serious infectious or communicable disease, where an exposure control plan is warranted, as determined by the HSA.

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- Medical/mental health needs or medical/mental health concerns of the participant (includes the child).
- D. The Mother-Infant Committee will have five (5) days to respond after receipt of a recommendation by the referring authority for voluntary or involuntary removal. A written recommendation by the committee will be forwarded to the warden.
- E. Upon receipt of the recommendation from the Mother-Infant Committee, the warden will make a decision regarding removal from the Mother-Infant program and notify the director of prisons.
- F. The warden will notify the Mother-Infant coordinator, in writing, of the decision. The Mother-Infant Program coordinator will notify the committee of the final approved action.
- G. The Mother-Infant coordinator will notify the mother of the decision and offer assistance in making the necessary arrangements for the child to release to the custody of a designated individual, as indicated in the packet. Appropriate placement and/or transportation to placement must be confirmed prior to removal of the child. The child will be transferred to the designed individual's custody upon arrival at the facility. The mother will be removed from the house and placed in appropriate housing. If the mother is removed prior to the child being transferred to the designated individual, the child will be cared for by the approved secondary caregiver, or designee, as determined by the Mother Infant coordinator.

5. Care of the Child:

- A. Care of the child is the primary responsibility of the mother.
- B. Feeding.
 - 1. Mothers may breast feed their infant.
 - Lactation consultants may be provided at the request of any mother who chooses to breast feed her infant.
 - 3. Each mother is responsible for her infant's bottle preparations, including formula, milk, water, sanitation of equipment, and proper storage of all supplies.
 - 4. Formula, milk, food, and water will be provided by approved entities, or in the form of donations, which must be unopened and in intact tamper-proof, sealed containers.
- C. When the mother is unavailable, the approved secondary caregiver will provide essential care for the infant. The secondary caregiver shall follow any instructions or schedules provided by the mother, in her absence.
- D. When the mother is planning to be unavailable due to work or institutional appointments, the mother is responsible for scheduling care for the infant through one of the following avenues: secondary caregivers or another mother residing in the unit. Schedules will be approved the week prior by the Mother Infant coordinator and posted weekly.
- E. Prospective Mother-Infant secondary caregivers shall meet the following criteria:
 - 1. Successfully complete an interview with the mother and Mother Infant Program coordinator.
 - 2. Have a high school diploma, GED, or attending GED classes.
 - 3. Complete all required training, programming, classes. etc.
 - 4. Maintain full compliance with their IPD.
- F. The mother shall decide whether to accept a secondary caregiver. The Mother Infant Program coordinator may be consulted in the decision-making process.
- G. Secondary caregivers may care for no more than two (2) infants at once.

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- H. In the event the mother may be temporarily off site, i.e., court hearing, medical appointment, admitted to the hospital, the child may be placed with a pre-approved secondary caregiver. The mother should provide advance consent and instructions regarding the temporary placement, time permitting. If this is not possible, the Mother Infant coordinator shall make decisions based on the best interest of the child, taking into consideration the probable duration of the mother's absence.
- I. If the mother will be gone from SDWP or out of the Mother Infant Program unit for an extended period of time, the infant may be placed with a pre-approved community caregiver.

6. Child Access:

- A. Children may accompany the mother to appropriate parenting activities, as approved by the Mother Infant coordinator.
- B. Children are not permitted to accompany mothers or care givers into other units of SDWP, unless for approved, legitimate, reasons as directed by the housing captain or above. When children are inside the facility, all protocols regarding movement of children shall be followed by staff.
 - Haircuts will be offered and provided to children within the house by the mother or approved offender.
- C. Visiting guidelines are as follows:
 - 1. Mothers and their infant may participate in general population visiting. All offender movement will be temporarily stopped with no offenders in the hallways until the mother and child are secured in the visit room.
 - 2. A mother and her infant are subject to the same visiting rules and regulations that apply to general population including what is allowed in the visit room for infants.
 - 3. If a mother in the Mother Infant Program is in a program that requires the infant to attend, the infant shall participate as approved by the Mother-Infant coordinator.
- D. Infants are not allowed in the general population recreation area. Infants with mother or secondary caregiver supervision are allowed outside the Mother Infant unit. No one is allowed to be closer than ten (10) feet of the perimeter fence, Gate 5, fence connecting to Gate 5, the generator fencing, or chiller fencing.
 - 1. Mothers or secondary caregivers may take the infants to this designated area with permission of the child's mother during approved or scheduled times.
 - 2. No infants are allowed outside the unit when work is being completed on the grounds around the unit which may include maintenance, lawn care, or snow removal.
- E. The Mother Infant coordinator shall approve requests to host special celebrations within the house, i.e., recognized holidays and children's birthdays. Such celebrations should be requested and planned at least a week in advance of the designated day.
- F. Requests for religious or cultural ceremonies or events shall be made to the SDWP cultural activities coordinator (CAC).

7. Photo Procedures:

- A. Pictures will be made available at least monthly to mothers by the CAC.
- B. Pictures may include either mother and/or child only. Children must be fully clothed in each picture. All rules pertaining to offender photos shall apply.

8. General Rules:

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- A. Participants residing in the unit, or otherwise occupying the unit, are subject to the same disciplinary procedures as general population.
- B. Each mother and secondary caregiver shall show consideration toward others in the unit, including staff, mothers, caregivers, and all children.
 - 1. No arguing, quarreling, fighting, harassing, making inappropriate comments toward others.
 - 2. No swearing or cursing. Appropriate language only.
 - 3. No horseplay.
- C. Participants shall not leave the unit without approval. Staff will notify main control room or E unit when a participant is coming inside and must pass through the gate or door.
- D. Participants are responsible for their child's personal property. Property must be secured and stored in assigned locations. State provided property shall be made available for all participants to access and use.
- E. All participants shall contribute to providing a safe, secure, and nurturing environment for children. Physical, mental, or verbal punishment, abuse, or harassment will not be tolerated. Participants may be required to participate in and complete programming or classes that address such interactions and responses.
- F. Ear, nose, or body piercing of children is not permitted.
- G. Tattooing of children is not permitted.
- H. Children are not permitted to wear jewelry.

9. Child Property Inventory:

- A. An infant must be clothed in proper, seasonally appropriate clothing.
 - 1. Care of clothing is the responsibility of each mother.
 - 2. Clothing shall be provided by the state, donations, or sent in by family directly from an outside vendor (must be pre-approved by the Mother Infant coordinator).

B. The infant's in-room inventory shall not exceed the following:

(8) Sleepers	(2) Sleep sacks	(4) Bibs	(2) Pacifiers
(8) Onesies	(2) Hats	(4) Burp cloths	(1) Brush/comb set
(4) Receiving blankets	(8) Pairs of socks	(2) Pair of mittens	(1) Nose syringe
(3) Heavy blankets)	(2) Pairs of shoes	(1) Mobile	(1) Nail clipper
(1) Snowsuit (seasonal)	(8) Pairs of pants	(1) Lotion	(4) Personal books
(2) Jackets/coat/sweaters (seasonal)	(8) Outfit tops	(1) Diaper bag	(4) Personal toys
(3) Changing pad sheets	(1) Diaper rash cream	(2) Packs of diapers	(2) Packs of wipes
(3) Crib sheets	(1) Shampoo/body wash	(1) Breast pump	

- C. Basic child hygiene items shall be made available to mothers. The items and supplies shall be assigned to the mother and remain the responsibility of the mother.
- D. Each offender mother is responsible for the sanitation and proper care of her infant's items.
- E. All clothing must be machine washable and dryable. Laundry will be completed in the unit by the mother, during scheduled times and days. Infant detergent is only for use on infant clothing. Participants shall not launder their clothing in the unit. All clothing belonging to the mother shall be laundered through the facility laundry department.

10. Medical Care for Mother and Infant:

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- A. Mothers shall receive medical care through clinical services or specialty care as indicated.
- B. Well-baby pediatric checks and other appointments, as recommended by outside medical providers, will be scheduled by the Mother Infant coordinator, with input from the mother, based on scheduling. The mother shall accompany the child to all appointments. The Mother Infant coordinator shall arrange for transportation to be provided. All children shall be transported in age-appropriate child seats.
- C. Children who require immediate outside medical care may be transported to outside medical providers by the Mother Infant coordinator, if time and the situation permits. In the case of a medical emergency involving a child, local emergency responders shall be contacted immediately (911). The duty officer (DO) shall be notified when a child is taken to an outside medical provider for emergency/immediate medical care.
- D. Mothers of the infants have sole medical decision-making authority of the recommended care from hospital providers for their infant.
- E. In the event the child is hospitalized, the mother may accompany the child, if permitted by hospital policy. The DO must be notified of all hospital admits involving a child (and mother).
 - 1. The Mother Infant coordinator will check on the child's status daily (Monday-Sunday). The DO will check on the infant in the hospital, if hospitalized locally.
 - 2. Necessary child property may be brought to the hospital for extended hospital stays by the Mother Infant coordinator.
- F. Mothers are required to follow all regularly recommended well-baby and child checkups.
 - 1. Medical costs will be covered by Medicaid.
 - 2. Children's prescribed medication(s), as prescribed by a licensed medical provider, will be picked up from the pharmacy and taken to the Mother Infant unit by the Mother Infant coordinator. All directions on the medication shall be followed.
 - 3. OTC medications such as Infant Tylenol, Ibuprofen (only for children over twelve (12) months old), or simethicone drops for gas may be given to infants.
- G. When medication is needed:
 - 1. Medication times, doses, and amounts for all medications, whether prescribed or over the counter, will be documented on the *Medication Tracking for Infants* form (attachment #3), by a staff member.
 - 2. All medication shall be secured and issued by the Mother Infant coordinator, or correctional staff after hours and on weekends, to the mother when needed. Mothers shall administer/apply all medications, or provide instructions to the care giver, if the medication must be administered in the mother's absence.
 - 3. Under no circumstances will one infant's medications, lotions, or hygiene products be used by another infant, child, or offender.
 - 4. Unused or expired medications shall be disposed of properly.
 - 5. Medications must be properly secured and controlled by staff and not accessible by children.
- H. Child immunizations are required.
 - 1. Records of immunizations will be kept on file with the community medical provider. Any copies or duplicates provided to the mother shall be kept in the mother/infant's file and released to the mother upon departure from the program.

11. Offender Mother Job Duties:

A. Each mother will have an assigned job duty (institutional job). Regular or repeated non-compliance with work requirements is grounds for termination from the program.

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B. Each mother residing in the Mother - Infant unit will be scheduled for specific cleaning details in the unit. A weekly cleaning schedule shall be posted and kept current. All participants shall assist in completing daily cleaning duties.

12. Release Process:

- A. Mothers releasing to community supervision or discharging their sentence(s) will release at the same time as their child. All processes regarding the release of an offender from custody shall apply to mothers releasing to the community from the Mother Infant Program. Transportation must be appropriate for transport of a child.
- B. Mothers shall be provided all child-related documents, including medical information in the possession of DOC, social security cards, birth certificates, Medicaid cards, WIC information, etc.
- C. The child's property list will be checked by the Mother Infant coordinator to ensure all personal property of the child/mother is sent with them upon release.

(2) Unopened packages of diapers	(3) Sleepers	(3) Bottles/sippy cups	(1) Tube diaper rash ointment
(2) Large cans of formula	(3) Outfits	(2) Bibs	(1) Body lotion
(1) Box of cereal	(1) Coat or jacket	(1) Brush/comb set	(1) Bottle body wash
(2) Unopened packages of wipes	(1) Pair of shoes	(1) Nail clippers	Any medication child is taking
(2) Pacifiers (if still being used)	(4) Pair of socks	(2) Receiving blankets	Boppy (if still being used)
(12) Containers of baby food	(4) Undershirts or onesies	(2) Heavy blankets	

- D. All hygiene products and medications assigned to the child will be sent with the mother.
- E. Items gifted to the child from donations, or other approved sources, shall stay with the program when the mother is released. Excess personal inventory must be mailed out as directed. Mothers may donate property to other mothers upon departure or release from the program. Such donations must be pre-approved by the Mother Infant coordinator, inventoried, and documented as donated by the releasing mother.

13. Infant Released Separately From the Mother:

- A. Mothers releasing to a half-way house, jail hold, or another law enforcement agency must arrange proper pickup and transport of their child prior to the mother's release. The child must be picked up at least twenty-four (24) hours prior to the mother's scheduled release.
 - 1. In the event of involuntary withdrawal of the mother from the program, the child must be placed with the preapproved community caregiver until transportation arrives to pick up the child.
 - 2. If all attempts to arrange release to an approved party fail or pick up and transport of the child is not within a reasonable time of when required, the Mother Infant coordinator shall contact the Department of Social Services.

V. RESPONSIBILITY

The director of Prisons and the Mother – Infant Committee are responsible for the annual review and maintenance of this policy.

VI. AUTHORITY

None.

VII. HISTORY

December 2024 November 2023

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July 2022 – New policy

ATTACHMENTS

- 1. Mother - Infant Program Application
- Community Caregiver Agreement Medication Tracking for Infants MIP Checklist 2.
- 3.
- 4.
- 5. DOC Policy Implementation / Adjustments

Distribution: Public Mother

MOTHER - INFANT PROGRAM APPLICATION

I,		hereby wi					
Program and assume full liability for my newborn							
Prison and agree to hold the South Dakota Departm	nent of Correction	ns' employed					
or legal actions arising out of or in any way conne	cted with my inf	ant(s).					
		D.					
Offender's Signature:		Dat	te:				
Expected Due Date:							
Expected Due Date.	_						
Requested Babysitter:							
1							
Alternate child Placement:							
Name:	_ Relationship: _						
Address:							
Phone Number(s):						-	
Number of Live Births/ Cesareans:							
Number of Miscarriages:							
Ages of Live Children:							
REQUIREMENTS							
1.00							
MOTHER							
Custody Level:Crime(s):							
Crime(s):							
Classes. I AREIVIIVO COMI ELIED.							
BABYSITTER							
Custody Level:							
Crime(s):							
Have you ever had an ongoing time wh	ere you were	the sole	care	provider	of	your	children?
II I 9							
How Long?							
Mother-Infant Committee Review Date:		Approved:	Yes	No			
			1 00	110			

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COMMUNITY CAREGIVER AGREEMENT TEMPORARY GUARDIANSHIP APPOINTMENT

I,		_ (name), of	(address),
			, State of South Dakota, commit and
Dispose custody, supp	ort, and education of		(Child's name), date of
birth	, my	(Son/Daughter), to	(Temporary
Guardian), the guardia	n of the person and esta	ate of the above name child.	
			ority of the above-named child. The ointee of his/her resignation of this
In witness whereof, I h 20	ave executed the instru	ment at Pierre, South Dakota this	day of,
	Parent's N	Name:	
	Parent's S	Signature:	
Subscribed and sworn	to before me this	day of	
	Notary Pu	ıblic:	
	My Com	mission Expires:	
		me temporary guardianship over aditions of this agreement.	
	Guardian	's Name:	
	Guardian	's Signature:	
Subscribed and sworn	to before me this	day of	, 20
	Notary Pu	ublic:	
	My Comr	mission Expires:	

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Distribution: Public

SOUTH DAKOTA WOMEN'S PRISON MOTHER - INFANT UNIT

MEDICATION TRACKING FOR INFANTS

Date	Infant	Mother Name and ID#	Tylenol INFANT	Simethicone Drops	Tylenol CHILDRENS	Motrin CHILDRENS	Rx	Time Given	Dose Given	DOC Staff Initials	Mother Initials

Revised: 11/20/2024 Effective: 12/01/2024

South Dakota Department of Corrections	Attachment 4: MIP Checklist
	Please refer to DOC policy 300-25
Distribution: Public	Mother – Infant Program

MIP Checklist

Offender Name						
DOC Number						
Estimated Delivery Date						
INPD/NRD						
Legal History Does the offender have offense ☐ Yes ☐ No	es within their criminal history that makes them ineligible? Explanation					
Medical History						
	al concerns that cannot be adequately addressed within the MIP?					
☐ Yes ☐ No	Explanation					
Has the offender been complia ☐ Yes ☐ No	nt with medical services? Explanation					
Behavioral Health History						
Is the offender diagnosed with	· ·					
☐ Yes ☐ No	Explanation					
Is the offender SMI?	Frankricking					
☐ Yes ☐ No	Explanation					
Is the offender currently prescr	ibed psychotropic medications? If so, what is their compliance rate?					
□ Yes □ No	Explanation					
Is the offender currently on the	awareness list?					
□ Yes □ No	Explanation					
Does the offender have behaviorally Yes □ No	oral health concerns that cannot be adequately addressed within the MIP? Explanation					
Date of the initial MIP Committee Meeting:						
MIP Committee Meeting Out	tcome:					
☐ Admitted						
☐ Denied	Explanation					
Date of subsequent MIP Committee Meeting, if requested/required:						
MIP Committee Meeting Out	tcome					
☐ Denied	Explanation					

Created: 11/06/2024 Effective: 12/01/2024