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# **POLICY UNIT STANDARD OPERATIONS PROCEDURE GUIDE**

## **APPLICABILITY**

All divisions, facilities, and programs of the Department of Corrections.

**POLICY UNIT STANDARD OPERATIONS PROCEDURE GUIDE**

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### Attachments:

[Annual Policy Review Flowchart](#)

[Glossary of Terms](#)

[Management Team Policy Revision Flowchart](#)

[Notice of Rescission](#)

[Policy/Procedure Legal Review Flowchart](#)

[Policy Review Guidelines](#)

[Policy Directive Format](#)

[Policy Unit Memorandum](#)

[Procedure Format](#)

[Work Group Policy Revision Flowchart](#)

## **I. INTRODUCTION TO DEPARTMENT OF CORRECTIONS POLICY**

### **A. Department Policy at a Glance**

The Department of Corrections (Department) develops and manages policy to meet statutory obligations, promote professionalism, and ensure operational compliance and consistency in fulfilling the purpose and mission of the Department. Department policy is designed to adhere to federal and state law, guidelines outlined in the Montana Operations Manual, and follow the best practices established by national correctional entities.

The purpose of Department policy is to create an overarching guide that empowers the divisions, facilities, and programs in creating specific procedures custom-made for unique complexities and needs. Divisions, facilities, and programs will write procedures in accordance with Department policy to provide legal protection, comply with state and federal mandates and national correctional association practices, and to ensure the Department is operating with a cohesive mission.

### **B. Department Policy Unit**

The Department Policy Unit is a designated policy manager located within the Department's Quality Assurance Office.

Responsibilities of the Department Policy Unit include, but are not limited to:

- a. develop policy to meet the Department director's goals and objectives and fulfill statutory requirements;
- b. coordinate, track, and record the annual policy review;
- c. serve as the primary resource for questions, concerns, and issues regarding policy;
- d. provide training and assistance to staff assigned to review policy and develop procedures;
- e. act as the central repository for all Department policy;
- f. maintain a Policy Unit Standard Operations Procedure Guide;
- g. respond to employee and public requests related to Department policy; and
- h. aid the Department in ensuring consistency with local procedures and policy directives.

## **II. OVERVIEW OF DEPARTMENT POLICY**

### **A. Access**

#### **1. Unrestricted**

Department policies will be accessible to the public in accordance with *Montana Code Annotated Title 2, Section 6. Public Records*, unless public access to policies creates a direct security threat to personnel or the safe operation of a facility/program.

Unrestricted policies are available to the public and published on the Montana Department of Corrections Internet page ([cor.mt.gov](http://cor.mt.gov)) immediately upon revision.

Unrestricted policies are available to Department employees on the Department Intranet page (cor.mine.mt.gov), in addition to the public access Internet page.

## **2. Restricted**

Department policies may be restricted from the public based on a legitimate penological interest. The Department must be able to articulate exactly how public knowledge of a policy may compromise the safety, security, good order, or administration of a facility or program. Restricted policies are designated as such after a legal review and consensus from Subject Matter Experts (SME's).

Restricted policies are designated as restricted by "Restricted Distribution" watermarks in the body of the policy and the acronym "RD" placed in red font next to the title. These policies are available to Department employees on the Department Intranet but not published on the Internet.

Procedures and policy attachments may be restricted from public access when a Department policy is designated as unrestricted; procedures and attachments often contain specific information that may pose a greater threat than the general information provided in a policy.

## **B. Organization**

### **1. Chapters**

Policies are organized within five chapters based on content. The five chapters include:

1. Administration and Management
2. Physical Plant
3. Facility/Program Operations
4. Facility/Program Services
5. Offender Programs

Each of the five policy chapters are broken into subsections organized by policy content. All policy chapters are listed with subsections on the Department website.

## **III. POLICY AND PROCEDURE FORMAT GUIDELINES**

### **A. Introduction**

Format guidelines bring uniformity in appearance to all Department policies and local procedures.

Procedures will be written according to the [Operational Procedure Format](#). Procedures will reflect a titling and numbering system consistent with Department policy. The policy unit must approve any deviation from standard formats, titles, or numbering prior to publication.

The Department [Policy Template](#) provides a sample format for staff to follow while offering revisions or suggesting a Department policy. Use of this format ensures consistency on style, margins, and spacing and assures that text revisions can be made

interchangeably and efficiently. The following specifications for a standard policy outline will be used for all policies:

## **B. Basic Formatting**

Department policies and procedures will follow a standard outline format including the following rules:

- a. Upon revision, a policy will reflect the revision date on the first page heading of the policy.
- b. Text will be Times New Roman or Calibri font, size 12.
- c. Organization will be labeled by icons included in the Department Policy Template such as: I., A., 1., a., 1), i., etc.
- d. Major headings will follow Roman numerals in bold, capital letters.
- e. Secondary headings will follow capital letters in bold.
- f. Paragraph body will be single-spaced.
- g. A double space will be inserted between each paragraph, font size 8.
- h. Terms itemized under DEFINITIONS will be formatted according to the following:
  - i. bolded followed by a space and dash prior to definition;
  - ii. language will be specific, clear, and concise;
  - iii. standard definitions listed in the Department's Glossary of Terms will be used to the extent possible; and
  - iv. definitions will be listed alphabetically.
- i. References will be italicized.

## **C. Organization and Content**

The policy body outline is organized by sections with specific purpose and content. Guidelines pertaining to each section include:

### **I. POLICY**

Each Department policy will contain an introductory statement of philosophy and purpose. Examples of policy statements may be found in the *American Correctional Association Manual: Guidelines for the Development of Policies & Procedures (1991)*.

### **II. APPLICABILITY**

This section provides guidance as to which divisions, facilities, programs, or combination thereof will be required to adhere to the policy.

### **III. DEFINITIONS**

Standard definitions will be used whenever possible. A Glossary of Terms provides guidance for Department adopted terms to be used in procedures. The Glossary of Terms will be available on the Intranet and upon request at all times.

### **IV. DEPARTMENT DIRECTIVES**

The guiding standards provided by the policy will be stated within this section. Directives will be written in outline style to provide clear and concise communication of standards.

Directives will be written in an “active voice” providing guidance and delineating authority between administrators, designated individuals, and staff.

Requirements outlined by a policy will be written using terms such as: will, must, and may. Terms “will,” “will not,” “must,” or “must not,” communicate that requirements are mandatory. “May” is a permissive term that allows for discretion.

## **V. CLOSING**

The standard closing statement will begin, “Questions concerning this policy should be directed to” followed by an administrator, or designee, ultimately responsible for the content of the policy.

## **VI. REFERENCES**

References will include citation for content that provided guidance in the development of a policy.

Policies designed to adhere to Montana Code Annotated, Federal law, case law, or the Montana Operations Manual will cite the applicable statutes or policies in the References section.

When a policy has been designed to comply with the American Correctional Association, National Commission on Correctional Health Care, or other identified best practices, they will be cited.

## **VII. ATTACHMENTS**

The Attachments section is designated for forms, additional information, or flowcharts relevant to a policy; content will be hyperlinked into the body of the policy and available on the Policy/Forms Page.

The policy unit is not responsible for maintaining division specific forms.

## **IV. POLICY DEVELOPMENT PROCESS**

### **A. Developing Policies**

There are four basic reasons for development of policies:

1. Operational Needs – policies and procedures ensure fundamental processes are consistent.
2. Risk Management – policies and procedures are a control and oversight tool to manage risk.
3. Continuous improvement – policies and procedures improve current practices through annual reviews and important internal communication practices.
4. Compliance – well-defined and documented processes demonstrate an effective internal control system that complies with regulations and standards.

## **B. Development of New Additions**

The development process begins with research and consultation with SMEs and administrative staff and ends with a concise addition to the Department policy system.

### **1. Research**

Preliminary research includes inquiries and requests to state correctional agencies within the northwest region, research may be expanded to include all other states. Research often includes identifying effective processes used in other states, using national agency standards archetypes, and identifying similar processes within the private industry. State correctional agencies publish many policies through public Internet pages in accordance with the [Freedom of Information Act](#).

### **2. Draft**

When preliminary research concludes, a policy is drafted by the Policy Unit for review by SMEs representing divisions, facilities, or programs that may be directly affected by the policy.

Input from SMEs often results in a revised draft of the new policy. When a final draft is complete, the new policy will be submitted for a general review.

### **3. General Review**

The general review will be sent via email to the general review distribution list. Recipients will be provided a minimum of 10 business days to review the material and submit suggestions.

When a 10 business day period concludes and significant and necessary suggestions have been submitted, a draft representing the recommended changes will be made. The Policy Unit may re-submit the draft in the next month's General Review or move forward with the Legal Review at the Unit's discretion on a case-by-case basis based on the significance of the revision from the previously submitted draft.

### **4. Legal Review**

At the conclusion of the General Review, the Unit will submit the new policy via email to [CORLegalMailbox@mt.gov](mailto:CORLegalMailbox@mt.gov) for legal review; a minimum of 10 business days will be provided to present feedback.

### **5. Director Review and Signature**

Once a legal review has been completed the final draft will be summarized in a [Policy Unit Memorandum](#) and submitted to the director for appraisal and signature.

New policy additions will be published upon signature and approval by the director. Policies may be published on the Department Policies Index and Policy News Pages on the Internet and Intranet.

## **C. Review Processes**

## 1. Annual Review Process

The Department of Corrections completes an annual review of policies in accordance with national best practices and American Correctional Association recommendations. A SME review and input from employees throughout the Department allow for flexible policies that meet the individual needs of each division, facility, and program while providing necessary guidance.

Each year the Department Policy Unit creates an annual review schedule outlining the months in which policies will be reviewed. The annual review schedule may be obtained from the Policy Unit. Department policy reviews subsequently result in division, facility, or program procedure reviews. The [Annual Policy Review Flowchart](#) illustrates the following process.

Department administrators and staff may utilize the [Policy Review Guidelines](#) as a resource for guidance to ensure the efficient execution of the annual review.

### a. Policy Unit manages monthly scheduled reviews

Each month the Policy Unit notifies the annual review distribution list of the policies under review for the current month. A minimum of 10 business days is provided for the annual review. The individuals included in the annual review distribution list are responsible for disseminating the policy review information to SMEs and other applicable staff at the local division, facility, or program.

### b. SMEs provide feedback within ten days

SMEs are responsible for providing feedback or requesting an extension to the Policy Unit within the period provided. The Policy Unit will grant an extension period to those individuals who have been unable to provide revision suggestions upon request.

Feedback and language suggestions are maintained in order to ensure that all recommendations are considered.

### c. Draft necessary changes

After the 10 business day period has concluded, if no extension has been requested for a policy and no feedback was received, the policy will be scheduled for review in 12 months and no changes will be made. When no changes are required, the annual review schedule will be updated to reflect the most current review date.

If the policy requires unsubstantial formatting, grammar, or reference updates, the policy will be published without general or legal review and may or may not require the director's signature depending on whether the acting director's signature is on the policy being revised. After publication, the annual review schedule will be updated to reflect the most current review date.

When a 10 business day period concludes and significant and necessary suggestions have been submitted, a draft with the recommended changes will be created and prepared for general review. When necessary, the Policy Unit will confer with the SME requesting changes to ensure that the draft reflects recommendations accurately.

**d. Completed draft is submitted for General Review**

The Policy Unit will submit significant policy changes to the general review distribution list for a minimum of 10 business days for General Review.

The General Review notification email will include:

- a. a list of the revised policies with a summary of changes for each policy;
- b. drafts will be attached with tracked changes, unless changes are so numerous that a clean draft will ensure better review;
- c. if a clean draft is attached, a draft with tracked changes will be offered upon request; and
- d. revised attachments will be included as needed, as determined by the Policy Unit.

When a 10 business day period concludes and significant and necessary suggestions have been submitted, a draft representing the recommended changes will be made. The Policy Unit may re-submit the draft in the next month's General Review or move forward with the Legal Review at the Policy Unit's discretion on a case-by-case basis based upon the significance of changes reflected in the most recent draft.

**e. Legal Review process**

In order to ensure that the Department's resources are used efficiently, the Policy Unit will use the [Policy/Procedure Legal Review Flowchart](#) to determine whether a policy requires a Legal Review before submission to the director for review and signature. If a Legal Review is clearly unnecessary, the Policy Unit may move directly to subsection (f) below. A Legal Review will be required for policies containing criteria including, but not limited to, the following elements:

- a. The policy is a new implementation;
- b. The policy draft includes substantive changes resulting in a change of meaning or intent;
- c. The policy is likely to result in an employee termination or discipline;
- d. The policy is likely to result in offender grievances; or
- e. The policy may require defense in court or implicates constitutional rights such as speech, religion, or due process.

When the Policy Unit determines that a policy requires a Legal Review, the reviewing attorney will be provided a 10 business day review period in which to express concerns or provide feedback. At the expiration of the review period, any received suggestions will be incorporated into the current draft.

**f. Director's Review**

The policy draft that has completed Annual Review, General Review, and Legal Review, will be submitted to the director for review and signature. The Policy Unit will complete a [Policy Unit Memorandum](#) prior to submission to the director.

The [Policy Unit Memorandum](#) will list each policy submitted for the director's review and signature including a summary of the changes that have occurred.

Any suggestions or recommendations from the director will be immediately implemented and the policy will be resubmitted for approval.

**g. Finalize and Publish**

Upon receipt of the director's signature, a policy will be published on the Department Policies Index Pages on the Internet and Intranet.

Corresponding procedures should be drafted and prepared for necessary reviews within thirty (30) business days following the publishing of a revised Department policy.

**2. Leadership Team Review Process**

Policy revisions will be made at the discretion of the Leadership Team, when necessary, without an opportunity for input by staff.

**a. Drafts**

When a request for policy change is submitted to the Policy Unit, revisions will be drafted in consultation from the requesting Leadership Team members.

**b. Revisions**

Once a draft is agreed upon by the requesting team members, the draft will be submitted to the Legal Unit for review.. When significant revisions are made during a policy change, a General Review may be utilized at the discretion of the Leadership Team prior to the Legal Review.

**c. Signature and Publication**

When a policy is revised with current definitions, formatting, or unsubstantial changes, the director's signature is not required unless the current director's signature is not on the policy that is being revised.

After a Leadership Team Review and Legal Review, when necessary, have been completed, the draft will be submitted to the director for signature and approval. Upon receipt of the director's signature, the Policy Unit will publish the policy on the Department Policies Index and may publish on the Policy News Pages on the Internet and Intranet.

Corresponding procedures should be drafted and prepared for a necessary reviews within thirty (30) days of publishing a revised Department policy.

### **3. Changes Elicited from a Work Group**

Significant policy-related issues sometimes arise outside of the annual review schedule. If the Leadership Team has not requested an immediate change, but a policy requires significant changes prior to the annual review date, a work group may be formed by the Policy Unit. The [Work Group Policy Revision Flowchart](#) illustrates the following process.

#### **a. Notice of formation**

Facilities and programs whose operations may be affected by the requested policy change will be contacted with an opportunity to join the work group.

#### **b. Work Group process**

The Work Group Process will allow for input from all work group members. Meetings in person or via video conferencing, online collaboration tools, or communication via email may be utilized in order to facilitate necessary discussions. Final revisions will be decided upon by a decision-making authority such as an administrator or member of the Management Team.

A General Review is not required for the Work Group Process but may be administered when deemed appropriate by the work group. The Policy Unit will submit the revised policy to Legal Review according to established criteria.

#### **c. Legal Review process**

In order to ensure that the Department's resources are used efficiently, the Policy Unit will use the [Policy/Procedure Legal Review Flowchart](#) to determine whether a policy requires a Legal Review before submission to the director for review and signature.

#### **d. Director Review and Signature**

The final draft, once a legal review has been completed, will be summarized in a Department [Policy Unit Memorandum](#) and submitted to the director for appraisal and signature.

New policy additions will be published upon receiving signature and approval by the director. Upon receipt of the director's signature, a policy will be published on the Department Policies Index and may be published on the Policy News Pages on the Internet and Intranet.

### **4. Clinical Review Process**

All policies and procedures related to clinical services will be reviewed by the clinical services policy team during development and prior to implementation. The clinical services policy team may consist of the Department Clinical Services Division administrator, medical director, dental director, managed care RN, facility or program designated health authority, mental health or psychiatric representative, and facility or program administrator.

In accordance with National Commission on Correctional Health Care (NCCHC) standards, Department clinical services policies will be signed by the Department director, Department medical director and Clinical Services Division administrator.

Procedures will include review and input from the clinical services policy team and will be signed by the administrator, facility or program responsible physician, and Clinical Services Division Administrator.

The members of the clinical services policy team will review each policy and procedure as part of the Department's annual policy and procedure review process to assure compliance with all local, state, and national requirements.

## **5. Union Review Process**

Department policies designated as Chapter 1, Section 3: Human Resources, upon significant revision, will be submitted via email or mail to union review.

## **V. REVISION AND RECISSION PROPOSALS**

### **A. Department Employees Requesting Revisions**

A Department employee may request a revision of any policy at any time throughout the year. The Policy Unit will consider each request and may take immediate action, begin a Work Group Review Process, or file and store the information until the policy is due for annual review.

Revision requests may be submitted by sending a message to the Policy Unit via email, phone, or mail.

Policy revision requests may receive a notice of receipt and a message from the Policy Unit explaining how the information will be used, i.e. immediate revision or pending revision. If the Policy Unit is unsure of the serious nature of the revision request, additional SMEs may be contacted for insight.

### **B. Recission Process**

Due to changes in legislation, ARM or other policy and/or legal requirements, existing policy may require rescission. Typically, policy rescission will be done at the request of the department director. When the suggestion for revision begins outside of the director's office the policy unit manager will create a work group if needed and will ultimately submit the rescission for leadership team discussion. If the Leadership Team agrees with the needed rescission they will work with the policy manager to submit the reason for rescission to the director for consideration.

The policy manager will send notice to the COR Policy Distribution email list with the justification and policy number being rescinded.

Procedure writers will have 30 days to effect required procedural rescission in accordance with the policy rescission.

The policy unit will retain a record of the rescission to include, date of rescission, justification for rescission, and the final copy of the rescinded policy.

## **VI. RECORD-KEEPING**

### **A. Physical Documentation**

The Policy Unit will carefully monitor, track, and record department policy changes with physical documentation.

#### **1. DOC Master Policy Manual**

Upon publication of a new policy on the Intranet and Internet, the Policy Unit will maintain the original version signed by the Department director in the DOC Master Policy Manual. The Policy Unit will add new policies to the annual review schedule for the upcoming year 12 months after implementation.

When a revised policy has been published on the Internet and Intranet, the Policy Unit will maintain the current revised version in the DOC Master Policy Manual. When unsubstantial changes have resulted due to a revision, the Policy Unit will place the policy copy with an electronic signature into the DOC Master Policy Manual. When substantial changes have resulted in a Department director signature, or the current director's signature is needed, the Policy Unit will place the original signed policy into the DOC Master Policy Manual.

#### **2. DOC Archived Policy Manual**

When the Policy Unit replaces outdated policies in the DOC Master Policy Manual, the outdated policies will be placed in the DOC Archived Policy Manual. Policies will be maintained in order of chapter and subsection, followed by newest to oldest version.

The Policy Unit will complete a [Notice of Rescission](#) for each rescinded policy including policy number, title, date of rescission, and reason for rescission. The Policy Unit will submit the [Notice of Rescission](#) to the Department director for approval and signature and store the notice in the DOC Archived Policy Manual.

## **VII. IMPLEMENTATION PROCESS**

### **A. Internet**

The Policy Unit will publish new policy additions and policy revisions immediately upon completion of a review cycle or receipt of the director's signature on the Department's Departmental Policies Internet page.

It is the responsibility of Department administrators and employees to ensure regular review of the Department Policy News page for information regarding policy changes. Division, facility, and program procedures must be updated promptly following the publishing date of a Department policy, when necessary, to comply with updated Department requirements.

## **VIII. STANDARD OPERATIONS PROCEDURES**

Standard operations procedures are written when all divisions, facilities and programs within the Department must follow the same guidelines regardless of offender population, location, etc. Standard operations procedures are developed, revised and published in accordance with this procedure and *DOC Policy 1.1.2 Policy Management System*.