



## COMMUNITY CORRECTIONS FACILITIES AND PROGRAMS BUREAU FACILITY OPERATIONAL REQUIREMENT

Requirement:	<b>PFB 6.2.466 INMATE WORKERS</b>
Effective Date:	10/03/2022 <span style="float: right;">Page 1 of 4</span>
Revision Date(s):	04/01/2025
Signature/Title:	/s/ Scott Eychner, Rehabilitation and Programs Chief

This requirement is referenced as **ACCD 4.5.202 Inmate Worker Healthcare** in Section 3.J. Offender Management; Healthcare, in the following contracts: Alternatives, Inc., Butte Prerelease, Gallatin County Reentry Program, Helena Prerelease, Passages, Elkhorn, Nexus, and START.

This requirement is referenced as **PPD 5.1.101 Inmate Workers** in the following contracts: Connections Corrections Program (CCP) East and West and WATCh West.

### I. PURPOSE

FPB contract facilities will use this requirement in the placement and supervision of inmate workers.

### II. DEFINITIONS (see Glossary)

### III. REQUIREMENTS

#### A. GENERAL REQUIREMENTS FOR PROGRAM

1. An inmate worker is an offender who is placed in an FPB program for a work assignment in a manner consistent with Bureau procedures.
2. Facilities provide room and board exempt from the service charges applicable to traditional program participants. A facility may charge the Department the daily per diem rates for inmate workers as outlined in the facility's contract and will pay the inmate worker an amount ranging from \$6 to \$12 per day for their work.
3. A facility will require an inmate worker to complete the program prior to being placed as a resident at the facility or being moved to the next location.
4. The inmate worker's length of stay at a facility is 180 days.
  - a. If it is known prior to placement that the inmate worker's stay will be longer than 180 days, *PFB 6.2.437 (D) Preauthorized Extended Stay Request* is completed and submitted to corlos@mt.gov. Email subject line must read as follows: Facility, Offender Last Name, First Name, DOC #, LOS.
  - b. If during the inmate worker's stay it is determined a longer stay is necessary, justification will be provided on the applicable *Progress/Summary Report* following the guidelines of *PFB 6.2.409 (A) Email Subject Lines for Contractor Report Submissions*.
5. Inmate workers are subject to all rules and regulations of the placement facility and work position agreement and to the same disciplinary procedures as traditional program participants.
6. An inmate worker who fails to report to the facility will be charged with escape pursuant to 45-7-306, MCA.
7. Inmate worker refusal to submit to a drug test will result in the inmate worker's removal from the program and disciplinary action.
8. Inmate workers may not operate motor vehicles for any reason.

9. Inmate workers may be assigned to perform duties including but not limited to food preparation, maintenance, and housekeeping as specified in the *PFB 6.2.466 (C) Work Position Agreement*.
10. Inmate workers referred to the Culinary Arts Program will meet eligibility and screening requirements.

## **B. INMATE WORKER ELIGIBILITY REQUIREMENTS**

1. If a prospective inmate worker is under the jurisdiction of the Board of Pardons and Parole (BOPP), the offender must have an institutional screening determination or a parole hearing disposition that authorizes placement of the offender in a program as an inmate worker or program placement.
2. If the offender is under the jurisdiction of the Department, the offender must be identified as an appropriate candidate by referral sources and/or facility screening committees.
3. Additional eligibility requirements for inmate workers include:
  - a. having clear conduct as determined by BOPP, assessment centers, and/or facility screening committees;
  - b. having demonstrated a commitment to change;
  - c. within the last 3 years, having incurred no felony convictions while incarcerated;
  - d. having no prison escape conviction history within the past 10 years, and no escape conviction from prerelease, work release, or any monitoring programs within the last 3 years;
  - e. being able to perform the essential job functions of the inmate worker position with or without an accommodation; and
  - f. having no history of trafficking in dangerous contraband while incarcerated.
4. Staff making referral of a sexual offender must consider a sexual offender's progress toward completing required or recommended sexual offender programming.
5. Staff making the referral must verify that any known felony warrants, detainers, or pending felony matters are communicated clearly to the facility in the application. Referring staff and screening facility must confirm that the severity and timeframe of the warrant, detainer, or pending felony matters do not preclude placement.

## **C. APPLICATION PROCESS AND RESPONSIBILITY**

1. A prospective inmate worker is referred to the inmate worker program by the offender's case manager or Department staff. If offender has escape conviction history, *PFB 6.1.201 (D) Approval of Offender Placement with Escape Conviction(s)* must be submitted to the FPB Chief for approval before screening.
2. When applicable, the referring Department staff will make notification to registered victims providing the following information and will document that notification was made:
  - a. approximate dates of offender's work assignment;
  - b. facility and community in which the offender will reside; and
  - c. the name and contact information of the Department staff to whom the victim should respond.
    - 1) Note: The victim should be given at least 10 calendar days to respond with written or oral input.
3. Referral is forwarded to the local screening committee for review and approval or denial in accordance with *PFB 6.1.201 Placement Determination, Referral, and Screening*.
4. Upon approval, Department staff completes the applicable sections of *PFB 6.2.466 (B) Inmate Worker Medical Information (Medical Information)*, prints form, and gives it to offender to self-report and sign.

- a. Offender returns *Medical Information* to Department staff when completed.
  - b. Department staff provides *Medical Information* to the sending facility's nurse, who completes the nurse's section and signs and returns the form to Department staff.
  - c. Department staff adds any additional comments and signs *Medical Information*.
5. Department staff completes *PFB 6.2.466 (A) Inmate Worker Request (Request)*, except for the "Inmate Worker Replacing" section. Using an electronic file transfer system to maintain confidentiality, Department staff forwards *Request* and *Medical Information* to receiving facility.
  6. The receiving facility's medical staff reviews the *Request* and offender's *Medical Information* and marks the "Yes" box on the *Request* indicating the form was reviewed.
  7. Receiving facility staff makes a determination about placement eligibility, and if approved:
    - a. completes the "Inmate Worker Replacing" section of *Request*, signs, and dates;
    - b. completes *PFB 6.2.466 (C) Work Position Agreement* (the *Work Position Agreement* describes the work assignment, compensation, length of assignment, and counseling, treatment, and/or recreational services to be provided); and
    - c. returns completed *Request*, offender's *Medical Information*, and *Work Position Agreement* to Department staff using an electronic file transfer system for confidentiality.
  8. The Department staff prints *Work Position Agreement*, reviews with offender, has offender sign, then sends it to receiving facility.
  9. Receiving facility submits *Request*, *Medical Information*, and *Work Position Agreement* to the Contract Manager at [correquests@mt.gov](mailto:correquests@mt.gov) for approval at least 2 weeks prior to work assignment. Email subject line must read as follows: Facility, Offender last name, first name, DOC#, Inmate Worker.
    - a. Department staff who send the above information can encrypt it by sending an email with the word "!Encrypt!" in the subject line.
  10. Contract Manager:
    - a. submits *Medical Information* to [cormedical@mt.gov](mailto:cormedical@mt.gov) for review for clearance;
    - b. informs Department staff once clearance is received;
    - c. signs the *Request* and emails it to the sending Department staff and to the receiving facility; and
    - d. documents the approval in the offender management system.
  11. Upon approval and prior to transfer, the sending Department staff will:
    - a. determine date offender will depart to receiving facility, taking into account the 10-day notification requirement for sexual/violent offender registration, if applicable; and
    - b. complete appropriate paperwork for *DOC 1.5.13 DNA Testing/Collection of Biological Samples* and/or *PPD 1.5.1000 Sexual and Violent Offender Registration and Level Designation*, when applicable.

#### **D. HEALTHCARE NEEDS**

1. If possible, inmate workers will arrive at the facility with a 30-day supply and a 6-month refill order for current medications.
2. The facility/contractor is responsible for daily routine medical supplies (to include, but not limited to, Snellen chart, glucometer, thermometer, blood pressure cuff, and stethoscope), over-the-counter medications, and day-to-day healthcare needs. The Department is responsible for the necessary medical, dental, vision, and mental health expenses if approved through the Department's medical preauthorization process.
3. For urgent and emergent health care needs, the facility must contact [cormedical@mt.gov](mailto:cormedical@mt.gov) and provide information regarding the inmate worker's urgent/emergent needs. Emergency treatment may be provided without prior authorization; however, the Department's medical staff and Contract Manager will be contacted as soon as possible and provided information on

the nature of the illness, the type of treatment to be provided, and the estimated length of treatment. The Department's medical staff will review each case individually and inmate worker may be subject to return to MSP or MWP if needs indicate transfer is warranted.

#### **E. TRAVEL**

1. Inmate workers will not be allowed any pass time except as provided below.
2. When leaving the facility, offender must be supervised or escorted by facility staff or a person authorized and approved by the Facility Administrator or designee. Acceptable reasons for leaving the facility must be limited to approved medical or dental appointments, funerals, shopping for personal items, religious services, self-help meetings, libraries, and staff-approved recreational activities; however, other reasons may be considered on a case-by-case basis.
3. All travel outside of the local community must be escorted by facility staff and requires travel requests be submitted to, and approved by, the Contract Manager at [corerequests@mt.gov](mailto:corerequests@mt.gov) pursuant to *PFB 6.2.433 Facility Offender Travel Request*.

#### **F. REPORTS**

1. Inmate Worker Report: Each facility will submit:
  - a. A monthly inmate worker report to [coraccdreports@mt.gov](mailto:coraccdreports@mt.gov) by the 10<sup>th</sup> of each month covering all information about inmate workers for the previous month. The report will contain offender name, DOC ID#, worker position, date of entry, projected date of completion, and actual date of transfer to resident status or removal as an inmate worker in the program, if applicable. When submitting the report, the email subject line must read as follows: Facility: Offender Last Name, First Name, DOC#, Inmate Worker Report.
  - b. An annual report submitted by January 15 describing the inmate worker program and providing work descriptions for inmate worker duties, offender wage information, and all non-Department forms inmate workers are required to review and/or sign as part of the program. If the information submitted in the most recent annual report has not changed, a new annual report is not required; however, the facility must provide notice to the Contract Manager that the information has not changed.
2. The applicable *PFB 6.2.437 (G-I) Progress/Summary Report* should be completed at offender's 180-day completion or upon other transition and submitted to [coraccdreports@mt.gov](mailto:coraccdreports@mt.gov) within 5 business days of the 180<sup>th</sup> day or other transition.

#### **IV. CLOSING**

Questions about this requirement should be directed to the FPB Chief.

#### **V. FORMS**

*PFB 6.1.201 (D) Approval of Offender Placement with Escape Conviction(s)*  
*PFB 6.2.409 (A) Email Subject Lines for Contractor Report Submissions.*  
*PFB 6.2.433 (A) Facility Offender Travel Request*  
*PFB 6.2.437 (D) Preauthorized Extended Stay Request*  
*PFB 6.2.437 (G) Progress/Summary Report - Assessment Centers*  
*PFB 6.2.437 (H) Progress/Summary Report - Treatment Centers*  
*PFB 6.2.437 (I) Progress/Summary Report - Prerelease Centers*  
*PFB 6.2.466 (A) Inmate Worker Request*  
*PFB 6.2.466 (B) Inmate Worker Medical Information*  
*PFB 6.2.466 (C) Work Position Agreement*

#### **VI. REFERENCES**

- A. 45-7-306, MCA
- B. DOC 1.5.13; *PFB 6.1.201*; *PFB 6.2.433*; *PPD 1.5.1000*