I. DIVISION DIRECTIVE:

The Adult Community Corrections Division programs/facilities will follow established procedures when transferring an offender from a program/facility to the Montana State Hospital for a mental health evaluation.

II. DEFINITIONS:

Administrative Transfer – A management decision to move an offender from one correctional facility to another of equal or greater level of custody for non-disciplinary or behavioral reasons.

ACCD Administrator – Responsible for the overall administrative functions of the ACCD programs/facilities. The Administrator reports directly to the Department Director.

ACCD-Adult Community Corrections Division Program/Facility – The Division includes the Adult Interstate Bureau; the Probation and Parole Bureau which provides the Day Reporting Programs (DRP), Intensive Supervision Programs (ISP), and Enhanced Supervision Program (ESP); the Missoula Assessment and Sanction Center (MASC); and the Facilities Program Bureau which includes Treasure State Correctional Training Center (TSCTC), and the contracted facilities of Prerelease Centers (PRC), Sanction Treatment Assessment Revocation & Transition (START), Warm Springs Addiction Treatment and Change Program (WATCH), Connections Corrections Program (CCP), Passages Alcohol and Drug Treatment (Passages ADT), Passages Assessment Sanction & Revocation Center (Passages ASRC), NEXUS Correctional Treatment Center (NEXUS), and Elkhorn Treatment Center (Elkhorn).

Department – The Montana Department of Corrections.

III. PROCEDURES:

Pursuant to §53-21-130(2), MCA, a person in the custody of the Department may be transferred to the Montana State Hospital (MSH), upon its approval, for a period of up to ten (10) days for mental health evaluation/stabilization.

PROCEDURE:  RESPONSIBILITY:

A. Transfer from ACCD Facility:

1. If transfer to MSH is deemed necessary, contact Facility Administrator, ACCD Administrator and MSH for verbal approvals of transfer.  Facility Staff

2. Once approvals are received, arrange transportation of offender.  Facility Staff
Subject: OFFENDER TRANSFER TO MONTANA STATE HOSPITAL

3. The following forms will be completed and forwarded to Facility Administrator pursuant to this procedure and ACCD 4.6.200 Administrative Transfers/Overrides:
   a. ACCD 4.6.200(A) Request for Administrative Transfer - requires signature of Facility Administrator; and
   b. ACCD 4.6.201(A) Transfer Request to Montana State Hospital.

4. Both forms are submitted electronically for review and signature to the ACCD Administrative Officer, CRamsey@mt.gov, and ACCD Administrator, pbunke@mt.gov.

5. Both forms are returned to sending IPPO/PRC Liaison and John Glueckert, MSH Administrator, jglueckert@mt.gov, or fax 406-693-7069.

6. Once Transfer Request is submitted, follow up with phone call to hospital administrator or designee.

7. After ten (10) days at MSH, offender may:
   a. be discharged back into custody using ACCD 4.6.200(B) Authorization to Return Offender;
   b. voluntarily agree to continue treatment at MSH; or
   c. be involuntarily committed to MSH for continued treatment.

B. Transfer from Probation & Parole

1. Discuss transfer of offender to MSH with supervisor.

2. If approved, contact ACCD Administrator and MSH for verbal approvals.

3. Upon approval, arrange transportation of offender.

4. The following forms will completed and forwarded to supervisor pursuant to this procedure and ACCD 4.6.200 Administrative Transfers/Overrides:
   a. ACCD 4.6.200(A) Request for Administrative Transfer - requires signature of supervisor; and
   b. ACCD 4.6.201(A) Transfer Request to Montana State Hospital.

5. Both forms are submitted electronically for review and signature to the ACCD Administrative Officer, CRamsey@mt.gov, and ACCD Administrator, pbunke@mt.gov.

6. Both forms are returned to RA/POII and John Glueckert, MSH Administrator, jglueckert@mt.gov, or fax 406-693-7069.

7. Once Transfer Request is submitted, follow up with phone call to hospital administrator or designee.
8. After ten (10) days at MSH, offender may:
   a. be discharged back to P&P supervision using ACCD 4.6.200(B) Authorization to Return Offender; P&P Officer
   b. voluntarily agree to continue treatment at MSH; or MSH
   c. be involuntarily committed to MSH for continued treatment. MSH

IV. CLOSING:

Questions regarding this procedure should be directed to Facility Administrator, RA, or ACCD Administrator.

V. FORMS:

ACCD 4.6.201 (A) Transfer Request to Montana State Hospital
ACCD 4.6.200 (A) Request for Administrative Transfer
ACCD 4.6.200 (B) Authorization to Return Offender