



**DEPARTMENT OF CORRECTIONS  
MONTANA STATE PRISON  
OPERATIONAL PROCEDURE**

Procedure No.: MSP 5.1.104	Subject: <b>INMATE WORKER &amp; STUDENT APPRECIATION DAY</b>	
Reference: 53-30-132, MCE Inmate participation and status in prison work programs		Page 1 of 3
Effective Date: April 18, 2006	Revision Date:	
Signature/Title: /s/ Mike Mahoney / Warden		
Signature/Title: /s/ Gayle M. Lambert / MCE Administrator		

**I. PURPOSE:**

To establish procedures for an annual appreciation day for inmate work crews or inmates involved with educational programming.

**II. DEFINITIONS:**

Appreciation Day - for the purpose of this policy means a special activity to recognize MSP/MCE inmate work crews or student inmates.

**III. PROCEDURES:**

The appropriate work or education supervisor may request an Appreciation Day for the area(s) under their supervision. All appreciation day requests must first be approved by the Department Head and submitted using an *Appreciation Day Request form* (attachment A). Requests must be approved by the MCE Director or appropriate Associate Warden prior to any event occurring. Designated staff from the department(s) requesting an Appreciation Day will be responsible for overseeing and coordinating all aspects of the event.

A. General Criteria:

1. Each department may hold one appreciation day for all inmate work crews and/or students, except where security compounds prohibit. The appreciation day for several interrelated departments may be combined. For example the appreciation day for Habilitative Services may include the school students and crews from the gym, hobby, library, RAC, etc.
2. Appreciation day will be limited to:
  - a. One per year, per department.
  - b. Scheduled between July 1<sup>st</sup> and September 30<sup>th</sup>.
  - c. Monday through Friday.
  - d. Less than three hours in duration.
3. Appreciation day activities must be scheduled and conducted to minimize disruptions to other programs and activities.
4. Food served will be limited to a hot dog and hamburger combination, salads, ice cream, and beverages.
  - a. For MSP departments, food items and beverages will be provided by the MSP Food Service and ordered through the MSP Warehouse.
  - b. For MCE programs, food items and beverages will be provided by the MSP Food Service or ordered through MCE Administration.
5. No outside vendor prepared items (such as pizzas, sub-sandwiches) will be allowed.

6. All food and beverages left over from the appreciation day must be removed from the work area at the end of the day. Food or beverages will not be taken back to the housing units.
7. No movies of any type will be allowed.
8. Inmates from crews or classes not listed on the approved Appreciation Day Request form will not be allowed to attend.
9. Inmates attending the event must remain in the designated appreciation day area until released by their supervisor.
10. Inmates attending the appreciation day activity will not be allowed to go to the dining hall for regular meals scheduled during the time of the activity.
11. All supervisors or teachers in the department holding the appreciation day are encouraged to attend and participate.

**B. Request Procedure:**

The following appreciation day request procedures will be utilized:

1. The department initiating the appreciation day request will contact MSP Food Service to see if the request for food is possible within their work timeframe. MSP Food Service and the initiating department will determine the appropriate amount of food necessary for the appreciation day based on the number of estimated participants.
2. Based on information discussed with MSP Food Service the initiating department will prepare a written proposal for the appreciation day. At a minimum the proposal will include:
  - a. The proposed date, and starting and ending times.
  - b. Location.
  - c. Work crew inmates and/or students involved in the appreciation day, with estimated number of inmates and staff.
  - d. Equipment to be used, and control there-of.
  - e. Type and quantity of food items/supplies.
  - f. Name(s) of supervisors and/or teachers who are responsible for overseeing the activity.
  - g. Other pertinent information.
3. All requests will be prepared and submitted by the appropriate work supervisor or Department Head. No inmates will be involved with any stage of an appreciation day request process. The requesting supervisor and Department Head must both sign and approve the initiating request.
4. All requests must be submitted by May 31<sup>st</sup> and will be approved accordingly. Requests not meeting this timeframe will be denied.
5. The appropriate MSP Associate Warden and Security Major must approve the request prior to any items being ordered from Food Service or the Warehouse. For MCE programs, the MCE Administrator or designee will approve requests prior to any items being ordered.

**C. Supervisor and Inmate Responsibilities:**

1. Designated MSP/MCE supervisors must be present at all times for the appreciation day and are responsible for overseeing all activities of the appreciation day. This includes set up and clean up. Inmate crews must be monitored at all times.
2. Inmates will stay in the designated appreciation day location during the entire duration.
3. Inappropriate conduct by inmates will result in a disciplinary write-up and may cause

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- 4. cancellation of future appreciation days.  
Inmates will perform cleanup.

**IV. CLOSING:**

Questions concerning this policy shall be directed to the MCE Administrator or MSP Security Major.

**V. ATTACHMENTS:**

Appreciation Day Request Form (attachment A)

# APPRECIATION DAY REQUEST FORM

DEPARTMENT INITIATING REQUEST: \_\_\_\_\_

DATE OF REQUEST: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

DATE OF EVENT: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ START TIME: \_\_\_\_\_ hrs. END TIME: \_\_\_\_\_ hrs.

LOCATION/SITE OF ACTIVITY: \_\_\_\_\_

WORK CREWS OR STUDENTS INVOLVED (list out):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ESTIMATED NUMBER OF INMATES AND SUPERVISORS: \_\_\_\_\_

SUPERVISOR(S) RESPONSIBLE FOR APPRECIATION DAY OVERSIGHT:

\_\_\_\_\_

TYPE AND QUANTITY OF FOOD ITEMS AND SUPPLIES: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EQUIPMENT REQUESTED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SPECIAL NOTATIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Staff Initiating Request: \_\_\_\_\_

NAME

\_\_\_\_\_  
SIGNATURE

Department Head Approval: \_\_\_\_\_

NAME

\_\_\_\_\_  
SIGNATURE

MCE Administrator/Associate Warden Approval: \_\_\_\_\_

SIGNATURE

Security Major Approval: \_\_\_\_\_

SIGNATURE

NOTES OR ADDITIONAL REQUIREMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Copies to:

Warden  
Command Post  
Other: \_\_\_\_\_

Deputy Warden  
Main Control  
Other: \_\_\_\_\_

Associate Wardens  
Lobby Officer  
Other: \_\_\_\_\_

Security Major  
Housing Units  
Other: \_\_\_\_\_