I. DESCRIPTION: The New York State Department of Corrections and Community Supervision (DOCCS) is responsible for receiving inmates (new commitments, Return Parole Violators (RPV), and court returns) from all 62 counties in New York State. DOCCS is required to receive inmates that have been declared state ready by the county within ten business days, pursuant to Criminal Procedure Law (CPL) §430.20 (1) and Correction Law (CL) §601. Once accepted into DOCCS custody, each inmate must be fully classified prior to transfer into a general confinement facility.

A. Intake Centers: Responsible for receiving inmates from selected counties. Inmates are then transported to the assigned Reception/Classification Center.
   1. Auburn Correctional Facility, located in the City of Auburn in Cayuga County. (Male)
   2. Clinton Correctional Facility, located in the Town of Dannemora in Clinton County. (Male)
   3. Wende Correctional Facility, located in the Town of Alden in Erie County. (Male)
   4. Albion Correctional Facility, located in the Town of Albion in Orleans County. (Female)

B. Reception/Classification Centers
   1. Downstate Correctional Facility, located in the Town of Fishkill in Dutchess County. (Male)
   2. Elmira Correctional Facility, located in the City of Elmira in Chemung County. (Male)
   3. Ulster Correctional Facility, located in the Town of Wawarsing in Ulster County. (Male)
   4. Bedford Hills Correctional Facility, located in the Town of Bedford Hills in Westchester County. (Female)
   5. Hudson Correctional Facility, located in the City of Hudson in Columbia County. (Under Age 18; Male and Female)

II. PROCEDURE: The following activities must be completed at the respective center on the day the inmate is received into DOCCS custody.
A. **Intake Centers**

1. All required paperwork (as described in CL §601.a) is reviewed and the inmate is accepted into DOCCS custody.
2. Each inmate must clear Digiscan (fingerprint comparison) to confirm their identity.
3. A Department Identification Number (DIN) is assigned to each inmate who comes in with a new commitment. Inmates returning to custody as parole violators retain their previously issued DIN.

4. All inmates are required to receive a shower and delousing treatment. In addition, male inmates are required to receive a shave and a haircut. State issued clothing, along with personal care products, are provided to each inmate (see Directive #4914, “Inmate Grooming Standards”).

   NOTE: Male inmates are required to receive a shave and a haircut unless there is a medical/gender identity consideration, religious exemption, or a Court Order exists (see Directive #4914, “Inmate Grooming Standards”).

   NOTE: Female inmates will receive personal hygiene products as necessary.

5. Each inmate is photographed and issued a Department Identification card.

6. **Form #3610A**, “Custodial Transfer Information,” is reviewed and forwarded to the draft processing area Security Supervisor for review and any required action. (The mention of any mental health issues on **Form #3610A**, “Custodial Transfer Information,” requires that a copy be sent immediately to the Office of Mental Health (OMH).)

7. **Form #3611**, “Health Transfer Information,” is forwarded to the Health Care Unit for review and any required action.

8. Each inmate is to receive an initial phone call or a call will be made on the inmate's behalf to the inmate’s family.

9. Each inmate is to receive the gender-specific Prison Rape Elimination Act (PREA) pamphlet, “The Prevention of Sexual Abuse in Prison; What Inmates Need to Know,” **Form DC053**, for inmates assigned to a female classified facility, and **Form DC055** for inmates assigned to a male classified facility, upon arrival at the facility, and distribution shall be documented on **Form #4021A**, “Draft Receipt.”

10. Each inmate is to view the Suicide Prevention Video and shall receive **Form DC056**, “Suicide Prevention for People in Prison,” designed for inmates to keep in their possession. Distribution shall be documented on **Form #4021A**.

11. Inmates are screened by Health Services to determine any immediate health related issues.

12. Inmates are made available for staff from OMH to conduct a suicide screening. If OMH is not available to screen the inmate on the day of their arrival, DOCCS Health Services staff will be responsible for completing **Form #3152RC**, “Reception/Suicide Prevention Screening Guidelines.” In such cases, OMH is responsible for additionally screening the inmate for suicide risk within 48 hours of their arrival.
13. Each inmate shall be initially assessed by a Security Supervisor for their risk of being sexually abused by other inmates or sexually abusive toward other inmates using the gender-appropriate PREA Risk Screening Form #115.41M, “PREA Risk Screening Form – Male Facility” or Form #115.41F, “PREA Risk Screening Form – Female Facility,” in accordance with the facility-specific PREA Risk Screening Facility Operation Manual.

B. Reception/Classification Centers

1. All required paperwork (as described in CL §601.a) is reviewed and the inmate is accepted into DOCCS custody.

2. Each inmate must clear Digiscan (fingerprint comparison) to confirm their identity.

3. A Department Identification Number (DIN) is assigned to each inmate who comes with a new commitment. Inmates returning to custody as parole violators retain their previously issued DIN.

4. All inmates are required to receive a shower and delousing treatment. In addition, male inmates are required to receive a shave and a haircut. State issued clothing, along with personal care products, are provided to each inmate (see Directive #4914, “Inmate Grooming Standards”).

NOTE: Male inmates are required to receive a shave and a haircut unless there is a medical/gender identity consideration, religious exemption, or a Court Order exists (see Directive #4914, “Inmate Grooming Standards”).

NOTE: Female inmates will receive personal hygiene products as necessary.

5. Each inmate is fingerprinted, photographed on Livescan, and issued a Department Identification card.

6. Form #3610A, “Custodial Transfer Information,” is reviewed and forwarded to the draft processing area Security Supervisor for review and any required action. (The mention of any mental health issues on Form #3610A, “Custodial Transfer Information,” requires that a copy be sent immediately to OMH.)

7. Form #3611, “Health Transfer Information,” is forwarded to the Health Care Unit for review and any required action.

8. Each inmate is to receive an initial phone call or a call will be made on the inmate’s behalf to the inmate’s family.


10. Each inmate is to view the Orientation Video (communicable diseases, suicide prevention, and sexual abuse).

11. Each inmate is to receive the gender-specific Prison Rape Elimination Act (PREA) pamphlet. “The Prevention of Sexual Abuse in Prison; What Inmates Need to Know,” Form DC053 for inmates assigned to a female classified facility, or Form DC055 for inmates assigned to a male classified facility, upon arrival at the facility, and distribution shall be documented on Form #4021A.
12. Each inmate is to view the gender-specific version of the film “Ending Sexual Abuse Behind the Walls; An Orientation,” during the reception and classification process. Viewing of the film is to be documented on Form #115.33, “Report of Inmate Training Participation.”

13. Each inmate is to view the Suicide Prevention Video and shall receive Form #DC056, “Suicide Prevention for People in Prison,” designed for inmates to keep in their possession. Distribution shall be documented of Form #4021A.

14. Inmates are screened by Health Services staff to determine any immediate health related issues.

15. Inmates are made available for staff from OMH to conduct a suicide screening. If OMH is not available to screen the inmate on the day of their arrival, DOCCS Health Services staff will be responsible for completing Form #3152RC, “Reception/Suicide Prevention Screening Guidelines.” In such cases, OMH is responsible for additionally screening the inmate for suicidal risk within 48 hours of their arrival.

16. Each inmate shall be initially assessed by a Security Supervisor for their risk of being sexually abused by other inmates or sexually abusive toward other inmates using the gender-appropriate PREA Risk Screening Form #115.41M or Form #115.41F, in accordance with the facility-specific PREA Risk Screening Facility Operation Manual.

C. Transfer to a General Confinement Facility: The following classification activities must be completed prior to an inmate being transferred from Reception to a General Confinement facility.

1. A DNA sample is obtained (buccal swab) from all eligible inmates in accordance with Executive Law §995 (7).

2. Each inmate is assigned a medical level after they receive a health appraisal that includes the administration of vaccinations if indicated, associated blood work, and X-rays. A medical history is also completed.

3. All inmates in a Reception Center shall receive a dental examination/screening and radiographs prior to transfer to their permanent facility.

4. All inmates participate in an intake interview by an Offender Rehabilitation Coordinator (ORC). This interview includes, but is not limited to, discussion regarding: enemies, education, programs, mental health, and medical issues.

5. Each inmate shall be re-assessed by an ORC for their risk of being sexually abused by other inmates or sexually abusive toward other inmates using the gender-appropriate PREA Risk Screening Form #115.41M or Form #115.41F, in accordance with the facility-specific PREA Risk Screening Facility Operation Manual. Sexual orientation and gender identity information from the PREA Risk Screening shall be used to assign Other Security Characteristics as appropriate.

6. New commitments are assigned a security classification level based on the “Initial Security Classification Guideline.”

7. Parole Violators are assigned a security classification level based on the “Return Parole Violator Guideline.”
8. Each inmate is assigned an OMH service level based on an evaluation completed by OMH staff.

9. The “Pattern of Criminal Behavior” is prepared by an (ORC). It is a summary of: the age criminal behavior began, the frequency, assaultiveness, notoriety, sophistication, sex offense, riot, escape, substance abuse, and any pattern of deterioration or improvement of criminal behavior, and a description of the instant offense.

10. All eligible inmates are automatically screened for Shock Incarceration Program participation.

11. Preliminary recommendations are made for inmate program needs.

12. All new commitments are given a battery of tests, which include:
   a. The Michigan Alcohol Substance Treatment (MAST) and Simple Screening Instrument (SSI) to address substance abuse therapy needs; and
   b. Academic tests, such as the Test of Adult Basic Education (TABE) and BETA, to determine educational needs and IQ.

13. The ORC completes a Reception COMPAS on all new commitments.

D. Extended Classification: This is an extension of the regular classification process and is designed to provide for the additional review and monitoring of an inmate, where it is determined, through testing, the inmate has special needs. The inmate remains in “extended classification” until the individual program needs are established and an appropriate facility is determined. This involves the joint participation of DOCCS, OMH, and medical personnel.

E. Transgender/Intersex Inmate Classification and Placement

1. An inmate who identifies as transgender, intersex, or gender non-conforming during PREA Risk Screening, or who has a diagnosis of Gender Dysphoria or Intersex (identified via extended classification codes), shall be asked additional questions by their ORC using the “Gender Identity Interview,” Form #115.41GI, regarding their gender identification, expression, and preferences. The interview will also document the inmate’s statement regarding their safety in connection with decisions regarding their housing and placement. Information from the Gender Identity Interview will be used to assist the Department in making an individualized assessment of the inmate’s placement and program assignments in order to maximize the inmate’s safety.

2. Upon request from an inmate who identifies as transgender or intersex for a transfer from a male classified facility to a female classified facility, or vice versa, the ORC shall notify the Supervising Offender Rehabilitation Coordinator (SORC) upon completion of the Gender Identity Interview, Form #115.41GI. The SORC shall notify the Deputy Superintendent for Program Services and the facility’s designated Assistant Deputy Superintendent PREA Compliance Manager. The Reception SORC shall notify the Deputy Superintendent for Program Services or Deputy Superintendent for Reception/Classification and the Assistant Deputy Superintendent PREA Compliance Manager.
The Deputy Superintendent for Program Services/Deputy Superintendent for Reception/Classification shall notify the Director of Classification and Movement of the inmate’s request via electronic mail, including the completed Form #115.41GI, and the most recently completed gender-appropriate PREA Risk Screening Form #115.41M or Form #115.41F, which shall be used to assist the Department in making an individualized assessment of the inmate’s placement and program assignments, in order to maximize the inmate’s safety. The request will be forwarded to the Central Office Transgender Placement Review Committee for a case-by-case assessment. Housing assignment by gender identity will be made when appropriate.

3. An inmate who identifies as transgender or intersex will not be placed in a gender-specific facility, housing unit, or program based solely on their external genital anatomy.

4. A transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration.