I. **DESCRIPTION:** The New York State Department of Corrections and Community Supervision (DOCCS) is responsible for receiving incarcerated individuals (new commitments, Return Parole Violators (RPV), and court returns) from all 62 counties in New York State. DOCCS is required to receive incarcerated individuals 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 incarcerated individual must be fully classified prior to transfer into a general confinement facility.

A. **Intake Centers:** Responsible for receiving incarcerated individuals from selected counties. Incarcerated individuals 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 incarcerated individual is received into DOCCS custody.
A. Intake Centers

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

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

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

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

NOTE: Male incarcerated individuals 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, “Incarcerated Individual Grooming Standards”).

NOTE: Female incarcerated individuals will receive personal hygiene products as necessary.

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

9. Each incarcerated individual 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 incarcerated individuals assigned to a female classified facility, and Form #DC055 for incarcerated individuals assigned to a male classified facility, upon arrival at the facility, and distribution shall be documented on Form #4021A, “Draft Receipt.”

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

11. Incarcerated individuals are screened by Health Services to determine any immediate health related issues.
12. Incarcerated individuals are made available for staff from OMH to conduct a suicide screening. If OMH is not available to screen the incarcerated individual 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 incarcerated individual for suicide risk within 48 hours of their arrival.

13. Each incarcerated individual shall be initially assessed by a Security Supervisor for their risk of being sexually abused by other incarcerated individuals or sexually abusive toward other incarcerated individuals 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 incarcerated individual is accepted into DOCCS custody.

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

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

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

NOTE: Male incarcerated individuals 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, “Incarcerated Individual Grooming Standards”).

NOTE: Female incarcerated individuals will receive personal hygiene products as necessary.

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

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

11. Each incarcerated individual 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 incarcerated individual 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 Incarcerated Individual Training Participation.”

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

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

15. Incarcerated individuals are made available for staff from OMH to conduct a suicide screening. If OMH is not available to screen the incarcerated individual 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 incarcerated individual for suicidal risk within 48 hours of their arrival.

16. Each incarcerated individual shall be initially assessed by a Security Supervisor for their risk of being sexually abused by other incarcerated individuals or sexually abusive toward other incarcerated individuals 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 incarcerated individual being transferred from Reception to a General Confinement facility.

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

2. Each incarcerated individual 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 incarcerated individuals in a Reception Center shall receive a dental examination/screening and radiographs prior to transfer to their permanent facility.

4. All incarcerated individuals 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 incarcerated individual shall be re-assessed by an ORC for their risk of being sexually abused by other incarcerated individuals or sexually abusive toward other incarcerated individuals 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 incarcerated individual 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 incarcerated individuals are automatically screened for Shock Incarceration Program participation.

11. Preliminary recommendations are made for incarcerated individual 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 incarcerated individual, where it is determined, through testing, the incarcerated individual has special needs. The incarcerated individual 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 Incarcerated individual Classification and Placement

1. An incarcerated individual 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 incarcerated individual’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 incarcerated individual's placement and program assignments in order to maximize the incarcerated individual's safety.

2. Upon request from an incarcerated individual 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 incarcerated individual’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 incarcerated individual’s placement and program assignments, in order to maximize the incarcerated individual’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 incarcerated individual 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 incarcerated individual’s own views with respect to his or her own safety shall be given serious consideration.