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| MICHIGAN DEPARTMENT OF CORRECTIONS  **SEGREGATION BEHAVIOR REVIEW** | | | | | | | | | | | | | | | | | | | | | | | | | | | | CSJ-283  Rev. 07/18 | | | |
| **GENERAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Review Type: {reviewType} | | | | | | | | | | | | | | | ERD: | | | | | | | | | | AMX: | | | | | |  |
| {ERD} | | | | | | | | | | {AMX} | | | | | |  |
| Prisoner Number: | | | Prisoner Name: | | | | | | | | | | | | Facility Code: | | | | | | | | | | Lock: | | | | | | Date: |
| {prisonerNumber} | | | {prisonerName} | | | | | | | | | | | | {facility} | | | | | | | | | | {lock} | | | | | |  |
| **Type of Segregation:** (Check All That Apply): | | | | | | | | | | | | | | | OPT: {#OPT}{/}{^OPT}{/} Yes {#OPT}{/}{^OPT}{/} No | | | | | | | | | | | | | | | | |
| {#adminSeg}{/}{^adminSeg}{/} Administrative Date Classified To: {#adminSeg}{adminSegDate}{/} | | | | | | | | | {#punSeg}{/}{^punSeg}{/} Punitive: Date Placed In: {#punSeg}{punSegDate}{/} | | | | | | | | | | | | | | | | {#tempSeg}{/tempSeg}{^tempSeg}{/tempSeg} Temporary: Date Placed In: {#tempSeg}{tempSegDate}{/tempSeg} | | | | | | |
| Reason for Segregation Classification: {segReason} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PRISONER HISTORY** Format Note: Use Charge Code and Month/Year Example: (032), 12/06; (027 & 020), 03/07 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Misconduct Reports Since Last Review: | | | | | | | {reportsSinceReview} | | | | | | | | | | | | | | | | | | | | | | | | |
| Summary of Misconducts - # for each code: | Bondable Misconducts (Last 6 Months): | | | | | | | | | | | | | | | | | | Non-Bondable Misconducts (Past Year): | | | | | | | | | | | | |
| {bondableOffensesWithin6Months} | | | | | | | | | | | | | | | | | | {nonbondableOffensesWithin1Year} | | | | | | | | | | | | |
| Previously Classified to Segregation  (Last 3 Years): | Date(s): | | | | {adSegDate1} | | | | | | {adSegDate2} | | | | | | | | | {adSegDate3} | | | | | | | | | | {adSegDate4} | |
| Reason(s): | | | | {adSegReason1} | | | | | | {adSegReason2} | | | | | | | | | {adSegReason3} | | | | | | | | | | {adSegReason4} | |
| Nature of What Led to Segregation Placement / Relevant Behavior in Segregation: | {segNature} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STG: {#STG1}{/}{^STG1}{/} I {#STG2}{/}{^STG2}{/} II | | | | | | | | | | | | | | Approval Required for Release? {#DD}{/}{^DD}{/} DD {#CMO}{/}{^CMO}{/} CMO {#ADD}{/}{^ADD}{/} ADD {#NA}{/}{^NA}{/} N/A | | | | | | | | | | | | | | | | | |
| Date of Last Warden Interview: {lastWardenInterview} | | | | | | | | | | | | | | Date of Last ADD Interview:  {lastADDInterview} | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **HOUSING UNIT TEAM EVALUATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IISP STAGE: N/A {#IISPNA}{/}{^IISPNA}{/}  {#IISP1}{/}{^IISP1}{/} I {#IISP2}{/}{^IISP2}{/} II {#IISP3}{/}{^IISP3}{/} III {#IISP4}{/}{^IISP4}{/} IV {#IISP5}{/}{^ ISP5}{/} V {#IISP6}{/}{^IISP6}{/} VI | | | | | | **Housing Unit Officers** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **AM (**Print Name) {amOfficer} | | | | | | | | | | | | | | | | | **PM (**Print Name) {pmOfficer} | | | | | | | | |
| Appropriate Behavior and Attitude: | | With Staff: | | | | {#never1}{/}{^never1}{/} Never {#rarely1}{/}{^rarely1}{/} Rarely {#sometimes1}{/}{^sometimes1}{/} Sometimes {#regularly1}{/}{^regularly1}{/} Regularly | | | | | | | | | | | | | | | | | {#never2}{/}{^never2}{/} Never {#rarely2}{/}{^rarely2}{/} Rarely {#sometimes2}{/}{^sometimes2}{/} Sometimes {#regularly2}{/}{^regularly2}{/} Regularly | | | | | | | | |
| With Prisoners: | | | | {#never3}{/}{^never3}{/} Never {#rarely3}{/}{^rarely3}{/} Rarely {#sometimes3}{/}{^sometimes3}{/} Sometimes {#regularly3}{/}{^regularly3}{/} Regularly | | | | | | | | | | | | | | | | | {#never4}{/}{^never4}{/} Never {#rarely4}{/}{^rarely4}{/} Rarely {#sometimes4}{/}{^sometimes4}{/} Sometimes {#regularly4}{/}{^regularly4}{/} Regularly | | | | | | | | |
| Housekeeping and Personal Hygiene: | | | | {#good1}{/}{^ good1}{/} Good {#adequate1}{/}{^adequate1}{/} Adequate {#poor1}{/}{^poor1}{/} Poor | | | | | | | | | | | | | | | | | {#good2}{/}{^ good2}{/} Good {#adequate2}{/}{^adequate2}{/} Adequate {#poor2}{/}{^poor2}{/} Poor | | | | | | | | |
| Regular Housing Unit Officers: | | | | | | Signature: | | | |  | | | | | | | | | | | | | Signature: | | | |  | | | | |
| ARUS/PC Name & Title: | | | | {pcName} | | | | | | | | | Signature: | | | | |  | | | | | | | | | | | | | Date: |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SECURITY CLASSIFICATION COMMITTEE ACTION: Interview & Recommendation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prisoner Participated in Interview: {#participated}{/}{^participated}{/} Yes {^participatedNo}{/}{#participatedNo}{/} No - Why Not: {whyNot} | | | | | | | | | | | | | | | | | | | | | SCC Stop at Cell if Prisoner Refused? {#sccStop}{/}{^sccStop}{/} Yes {^sccStopNo}{/}{#sccStopNo}{/} No | | | | | | | | | | |
| Prisoner’s Comment: | | {comment} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Expectations: | | {#misconductFree}{/}{^misconductFree}{/} Remain Misconduct Free | | | | | | | | | | | {#IISP}{/}{^IISP}{/} Participate/Advance in IISP | | | | | | | | | | | | | {#other}{/}{^other}{/} Other: {otherText} | | | | | |
| Potential to honor the trust implicit in less restrictive confinement: | | | | | | | | | | | | | Evaluation:  {potential} | | | | | | | | | | | | | | | | | | |
| Recommendation: | | {#continue}{/}{^continue}{/} Continue Segregation | | | | | | {#reclassify}{/}{^reclassify}{/} Reclassify to General Population | | | | | | | | | | | | | | {#transfer}{/}{^transfer}{/} Transfer | | | | | | | {#protection}{/}{^protection}{/} Protection | | |
| Reason for Continued Segregation: {reason} | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prisoner’s Signature: | |  | | | | | | | | | | | | | | | | | | | | | | Date: | | | |  | | | |
| Staff Name & Title: | | {staffName1} | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | | Date: |
| Staff Name & Title: | | {staffName2} | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | | Date: |
| QMHP Name & Title:  (If Applicable) | | {QMHP} | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | | Date: |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **WARDEN’S REVIEW** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Approve SCC Recommendation? (If Applicable) {#wardenApproval}{/}{^wardenApproval}{/} Yes {^wardenApprovalNo}{/}{#wardenApprovalNo}{/} No | | | | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | Date: |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REQUIRED INTERVIEWS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| {#wardenInterview}{/}{^wardenInterview}{/} Warden (6 months) | | | | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | Date: |
| {#addInterview}{/}{^addInterview}{/} ADD (Annual) | | | | | | | | | | | | | Signature: | | | |  | | | | | | | | | | | | | | Date: |

Distribution (Completed/Signed Copies Only): {#residentDist}{/}{^residentDist}{/} Prisoner {#counselorDist}{/}{^counselorDist}{/} Counselor File {#recordDist}{/}{^recordDist}{/} Record Office File {#centralDist}{/}{^centralDist}{/} Central Office File {#addDist}{/}{^addDist}{/} ADD (If Required)