State of Iowa Department of Corrections

Policy and Procedures

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Applicability: Institutions
Policy Code: Public Access
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Chapter 3: INSTITUTIONAL OPERATIONS
Sub Chapter: HOUSING OPERATIONS
Related DOC Policies: HSP-502, HSP-740, IO-HO-05, IO-HO-06, IO-HO-07, IS-CL-02
Administrative Code Reference: N/A
Subject: LONG-TERM RESTRICTIVE HOUSING (LTRH)
PREA Standards: N/A
Responsibility: Nick Lamb
Effective Date: July 2025
Authority:

1. PURPOSE

To provide specific guidelines regarding the placement, movement and programming of male incarcerated individuals assigned to Long-Term Restrictive Housing (LTRH).

2. POLICY

It is the policy of the IDOC to utilize incarcerated individual behavior-based incentive programs and targeted programming to reintegrate incarcerated individuals in LTRH into General Population housing. All LTRH beds shall be considered IDOC system beds. Assignment to and removal from LTRH is the responsibility of Statewide Utilization Review committee (SURC).

CONTENT

A. Housing Assignment

B. Incentive Programs

C. Programming

D. Mental Health

3. DEFINITIONS - As used in this document

A. Long-Term Restrictive Housing (LTRH) - Housing intended for incarcerated individuals who have been assigned for 60 or more days in Short Term Restrictive Housing (STRH) and/or Disciplinary Detention (DD).

B. Long-Term Restrictive Housing Review Committee (LTRHRC) – A committee at Iowa Correctional Institution for Women (ICIW) composed of the Warden or Deputy Warden, Associate Warden of Security, and Associate Warden of Treatment for review of incarcerated individuals recommended for placement in LTRH.

C. Serious Mental Illness (SMI) - A serious and persistent disorder of thought or mood which significantly impairs judgment, behavior, capacity to recognize reality or cope with the ordinary demands of life within the prison environment which is manifested by substantial suffering or disability. Serious mental illness requires a documented mental health diagnosis, prognosis and treatment as appropriate by mental health staff. This would include the broad categories of: Schizophrenia and other psychotic disorders, bipolar disorders, depressive disorders, dementia and other organic brain disorders.

D. Statewide Utilization Review Committee (SURC) - A system wide committee chaired by the Deputy Director of Institution Operations/Designee that considers appropriate utilization of Restrictive Special Housing beds. The committee shall include an Assistant Deputy Director and others as assigned by the Director.

E. Unit Team - Each Unit Team when possible, shall include a Unit Manager, security staff, health care staff, mental health professional and treatment staff who work primarily in the Unit and who are directly responsible for the incarcerated individuals living in that Unit. Unit Team members may have responsibilities in more than one Unit.

F. Short Term Restrictive Housing (STRH) - Housing intended for incarcerated individuals assigned for less than 60 days.

4. PROCEDURES

A. Housing Assignment

1. All institutions shall consider long-term segregated incarcerated individuals for placement in LTRH if an incarcerated individual has served 60 or more days in continuous STRH status or Disciplinary Detention.

2. All institutions shall review incarcerated individuals given 60 or more days Disciplinary Detention after the incarcerated individual has served 30 days. If the incarcerated individual can be managed back in general population; then a time cut/suspension should be considered. Otherwise, the incarcerated individual in male institutions shall be referred to SURC and incarcerated individuals at ICIW shall be referred to LTRHRC per procedures outlined below.

3. Incarcerated individuals diagnosed with a SMI shall not be placed in the LTRH unless referred to the Mental Health Utilization Review Committee for approval in conjunction with the SURC.

4. Considerations for placement in LTRH include, but are not limited to:

    a. Prior placement of incarcerated individual in STRH or DD.

    b. Re-occurring behavior resulting in repeated STRH placement or DD.

    c. Prior attempt to reintegrate the incarcerated individual into General Population (GP) at current facility.

    d. Prior attempt to reintegrate incarcerated individual into GP at another facility.

    e. Incarcerated individual constitutes an on-going potential threat to the safety of others or the security or orderly management of the facility.

    f. DD time 60 or 90 days. (Refer to IDOC policy **IO-HO-07** *Disciplinary Detention* (DD))

5. Referrals for admission into LTRH shall be submitted by the Unit Team to the SURC for further consideration. Institutional Staff shall submit *SURC Referral* **(IO-HO-08 F-1)** to the Deputy Director of Institution Operations/Designee for review. ICIW Unit Team shall

submit LTRH recommendations to the LTRHRC. ICIW may utilize **IO-HO-08 F-1** form for these referrals.

6. Institutional classification teams may place incarcerated individuals in LTRH status; however, transfer and continued placement in LTRH shall be reviewed by the SURC for male incarcerated individuals or the LTRHRC at ICIW.

7. Assignment of incarcerated individuals to LTRH shall be reviewed and approved by the SURC for male incarcerated individuals or the LTRHRC for ICIW incarcerated individuals.

8. Release of incarcerated individuals from LTRH shall be made by the SURC/LTRHRC in conjunction with the Unit Team.

9. The Unit Team in conjunction with SURC/LTRHRC shall maintain a priority placement list for LTRH.

10. incarcerated individuals' placement and status in LTRH shall be reviewed in accordance with the applicable policy including **IS-CL-02** *Incarcerated Individual Classification*, **IO-HO-05** *Short Term Restrictive Housing (STRH)*, **IO-HO-06** *Protective Custody* Housing and **IO-HO-07** *Disciplinary Detention (DD)*.

11. SURC staff/LTRHRC shall review an incarcerated individual's status every 60 days as part of the Unit Team.

B. Incentive Programs

Incarcerated individuals assigned to LTRH shall be eligible for an incentive program. Institutional procedures shall outline the incentive program, and may include some of the following incentives:

1. Visitation

2. Recreation

3. Restraint Options

4. Phone Calls

5. O-mail

6. Hobbycraft
7. Property
8. Work
9. Dayroom
10. Television

C. Programming

1. The LTRH Program is based on the Challenge Program.
    a. The program is broken into Phases.
    b. Upon admission, incarcerated individuals shall be given an *Incarcerated Individual Handbook* outlining rules, privileges, and expectations of LTRH.
    c. The Classification/Unit Team shall determine movement between Phases of LTRH. The classification meetings shall be documented in ICON generic notes by institutional staff.
    d. Completion or removal from Phases as well as cognitive-behavioral programming shall be documented in ICON Offender Interventions by institutional staff.
2. Evidence-based cognitive-behavioral programming/curriculum, approved by the Deputy Director of Institution Operations/Designee, shall be an integral part of each incarcerated individual's programming.
3. Incarcerated individuals in LTRH shall be provided programming based on their needs as determined by the Institutional Treatment Classification Committee or Unit Team.
4. Programming may include in-cell and group setting formats.
5. Case managers shall complete the Institutional Case Plan/DRAOR for incarcerated individuals upon admission into LTRH to develop a clear path for movement to less restrictive housing. A copy of the Institutional Case Plan shall be provided to the incarcerated

individual. Regular reviews of this plan are necessary to motivate the incarcerated individual to make progress.

D. Mental Health

If staff observe that an incarcerated individual's behavior is deteriorating or an incarcerated individual displays odd or inappropriate behavior and may require a professional mental health intervention, or if an incarcerated individual self-reports a need in this area, staff shall contact a Mental Health professional; and if not available, the request shall be forwarded to Health Services for evaluation and determination of appropriate action.

1. If an incarcerated individual is found to be decompensating, Mental Health professionals shall be consulted in determining appropriate placement of incarcerated individuals in accordance with **HSP-502** *Intra-System Transfers* and **HSP-740** *Identified Mental Health Level of Care*.

2. Emergency Transfers shall occur in accordance with **HSP-602** *Emergency Services*.