



Request for Inclusion or Revision to an Administrative Directive

Connecticut Department of Correction

CN 1301
REV 02/06/15

Administrative Directive Number: **6.5** Title: *Use of Force*

I recommend the following inclusion or revision to the above referenced Administrative Directive (provide detailed explanation):

Administrative Directive 6.5, *Use of Force*, Section 8B states: Facts and circumstances leading to the Use of in-cell restraints shall be documented on CN6503, restraints check list. CN 6503, Restraint Check List REV 4/1/11 does not contain an area to document the circumstances leading to the use of restraints. I am recommending the directive be revised to reference the CN6501, Use of Force report. The CN 6501 currently has a field for "Circumstances Leading to Force".

Administrative Directive 6.5, Section 8; B states... and in accordance with section 19 of this directive. Section 19 of Administrative Directive 6.5 refers to Video Recording. I am recommending the directive be revised to reference section 20; Reporting and Record Keeping in lieu of Video Recording.

See attached documents

ORIGINATOR

Name: [Redacted] Title: [Redacted] Date: 02/29/2016

Signature: [Redacted] Facility/Unit: [Redacted] Services [Redacted]

UNIT/DISTRICT/DIVISION RECOMMENDATIONS

Approved	Denied	Signature	Date
<input type="checkbox"/>	<input type="checkbox"/>	Unit Administrator's signature:	Date:
<input type="checkbox"/>	<input type="checkbox"/>	District Administrator's signature: <small>(only needed if originating from facility)</small>	Date:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Division Administrator's signature: <i>[Signature]</i>	Date: <i>3/1/16</i>

COMMISSIONER'S DECISION

This request is: **APPROVED** **DENIED** Effective date of request: _____

The language/provisions of this inclusion/revision shall be effective as of: 3/7/16
and subsequently added to the Administrative Directive at the next update.

This inclusion/revision shall be added to the Administrative Directive prior to: _____

This inclusion/revision shall be added immediately to the Administrative Directive.

Commissioner's signature: *[Signature]* Date: *3/2/16*