

ARTICLE 42 – VISITING
Revised April 1, 2015

**54020.6 Official Visits by other Departments/
 Agencies/Foreign Officials and Other
 Distinguished Visitors**

Law enforcement personnel (local, state, and federal staff) including District Attorneys and District Attorneys' investigators who enter CMC on official business will be processed through the Entrance Building as any visiting state employee. The arrival of these visitors will require notification to the Investigative Services Unit (ISU) office or the Classification and Parole Representative, as appropriate. Escort will be determined at this time if necessary.

54020.7 Visiting Days and Hours

Saturday/Sunday/Holidays 8:30 am to 3:30 pm

Legal holidays as listed below, per CCR, Title 15, Division 3, Section 3172.2, Minimum Visiting Days and Hours:

- New Year's Day
- Independence Day
- Thanksgiving Day
- Christmas Day

54020.11 Processing Visitors

Persons requesting approval to enter the security area of CMC for the purpose of visiting an inmate shall enter the East Facility through the double glass doors of the main Entrance Building (west side of building); at West Facility through the Visitors' Entrance Building.

Upon entering the Entrance Building/Gatehouse area, the visitor will obtain a Visitor Pass (CDCR-1000) from staff. The pass will be filled out completely and correctly, with all information printed legibly by the visitor.

The completed pass and a copy of their VPASS appointment confirmation will be presented to the computer operator for processing. Adult visitor(s) will be required to render a valid form of picture identification in accordance with CCR Section 3173.

Visitors without VPASS appointments will be processed after VPASS appointments have been accommodated.

Visitors of Hearing-Impaired Inmates - The approved visitor should advise the computer operator that the inmate he/she wishes to visit is hearing-impaired. Staff shall notify the Facility Sergeant of the visitor's arrival. Facility custodial personnel shall make a reasonable attempt to locate the inmate and advise him of the visit. Hearing-impaired inmates are responsible for the following:

- Notifying their prospective visitors they are to advise the computer operator the inmate they wish to visit is hearing-impaired.
- Attempting to obtain prior information on dates of visits and inform custodial staff.

Approved visitors will have their passes stamped, and the final processing will be completed, which consists of:

- Assuring proper attire, per CCR 3174, is worn and personal items are searched.

- Visitors pass through the metal detector, per CCR 3173.2, under the direction of the Entrance Building Sergeant/staff and sign in on the Visitor Log.
- Visitors have their right wrist stamped with fluorescent ink. This should not be washed off, as visitors will be required to pass their hand under an ultraviolet light upon exiting the visiting area. Minor children under seven years old are exempt.
- Visitors will take both portions of the gate pass and proceed to the inside visiting desk and present the pass to the visiting desk officer. The inmates being visited will be paged to report to the Visiting Room. Inmates will be paged every 15 minutes.

Visitor Screening

Metal Detectors

All visitors shall successfully pass through the detector unless a documented medical condition or disability exists that would preclude the visitor from passing through the detector.

Processing may require the removal of shoes, jackets, sweaters, suspenders, belts, piercings, jewelry, or other accessories for closer inspection or separate processing.

Additional screening will occur when an individual sets off the alarm of the metal detector, an individual is selected for additional screening, or an individual has provided documentation to substantiate a condition that precludes successful screening by metal detector. This additional screening may include either:

- A hand-held wand inspection in conjunction with a clothed body search of the visitor's body, including the torso;
- A clothed body search alone; or
- An unclothed body search.

Additional searches will be conducted by staff of the same gender as the visitor.

Hand-held wand inspection: A hand-held wand inspection helps staff to identify what may have set off the alarm on the walk-through metal detector or to confirm an alarm present during the initial screening.

Clothed body search: To ensure security, a clothed body search may be used in conjunction with the hand-held wand inspection. A clothed body search may also be performed as a stand-alone procedure, when appropriate, or to resolve alarms set off during an inspection by the metal detector. A clothed body search may include touching sensitive areas of the body.

Unclothed body search: This procedure may be conducted with the visitor's consent or when there is a reasonable suspicion that the visitor is carrying contraband and when no less intrusive means are available to conduct the search

Visitor Check-out Process

East Facility - Upon completion or termination of a visit, the inmate will approach the Visiting Room window at the visiting desk. At the same time, the inmate's visitor(s) will approach the visiting desk in the foyer area. The inmate

will be identified, issued his ID card and then processed through the Control Corridor. The visitor will be required to produce his/her photo identification card and be identified with the white copy of his/her visiting pass and directed to proceed to the Entrance Building. Visitors will be instructed not enter the sally port until directed by custody staff. Custody staff will ensure visitor(s) are in possession of CDC 1000 Visitor Pass and identification prior to entering the sally port. At the Entrance Building, staff will check the visitor's right wrist by utilizing the ultraviolet lamp. The exiting visitor will also be required to produce his/her photo identification card prior to leaving the institution.

The time the visitor exited the institution will be recorded on the Visitor Log. After the visitor is processed out, he/she cannot re-enter the institution for the remainder of that day. The visiting pass will be returned and secured for a three-month period.

West Facility - Upon completion or termination of a visit, both the inmate and the visitor will approach the visiting desk. The inmate will be identified, issued his ID card and then processed through the visiting search room. The visitor will be required to produce his/her photo identification card and be identified with the white copy of the visiting pass and will exit the Visiting Room for processing at the Entrance Building. At the Entrance Building, staff will check the visitor's right wrist by utilizing the ultraviolet lamp. The exiting visitor will also be required to produce his/her photo identification card prior to leaving the institution and sign out on the Visitor Log. After the visitor is processed out, he/she cannot re-enter the institution for the remainder of that day. The visiting pass will be returned and secured for a three-month period.

Search of Visitor Produces Contraband

The Entrance Building Sergeant may detain the visitor and turn him/her over to CMC ISU Personnel or local authorities, if the contraband presents a risk to the security and safety of the institution.

During normal duty hours, when the search produces a positive result, the following action will be taken:

- **East Facility** - The Entrance Building Officer will contact the Watch Commander or the Visiting Lieutenant who will take charge of the incident at that point.
- **West Facility** - The Entrance Building Officer will contact the Watch Commander or the Visiting Lieutenant who will take charge of the incident at that point.
- All visits shall be suspended pending administrative review. If the offender is not prosecuted, approval to visit will be considered upon approval of an updated CDCR-106 Visiting Questionnaire. If the court finds the individual not guilty, approval to visit will be considered upon submission of an updated CDCR-106 form. The deciding authority will prepare documentation for the visitor and the inmate stating the reason for the action, the length of time the action will apply, and under what conditions the action will be reconsidered.

54020.13.3 Unclothed Searches of Visitors

Searches will take place in an area that assures the privacy of the visitor as well as the integrity of the search.

Prior to the initiation of the first phase of the search and before each successive escalation of the search, the individual will be given ample opportunity to voluntarily remove and surrender the contraband.

54020.14.1 Refusal to Submit to a Search

During business hours, the Warden/CDW must authorize every physical search of a person or his/her designated representative. On weekends or holidays, the Watch Commander or Visiting Lieutenant will make authorization. An Administrative Officer-of-the-Day (AOD) contact will be required.

A written report stating the reason for the extraordinary search, the visitor's response and the results, shall be submitted to the Warden no later than the first working day following the search. Copies of the report, or a summary excluding confidential information, shall be given to the inmate who the person visited or intended to visit and, if requested, to the visitor. A copy of the complete report shall be scanned into the inmate's electronic Central File.

All searches other than an initial visual or metal detector inspection and each progressive step must be under the direction of supervisory staff at not less than the level of Correctional Sergeant.

Each degree of the search must be thoroughly evaluated in order to determine reasonable cause to proceed with a more intrusive method of search. If reasonable cause exists:

- The visitor will be detained or placed under constant visual observation.

NITROGLYCERIN AND INHALERS WILL BE ALLOWED WHEN ACCOMPANIED BY CURRENT DOCTOR'S NOTE OR VALID PRESCRIPTION LABEL.

Close B Custody Inmates

Inmates who participate in visits and have Close B Custody are not allowed anywhere outside of the main Visiting Room.

Close A Custody Counts During Visiting

Counts on Saturdays, Sundays and Holidays:

10:45 a.m. All inmate ingress and egress processing will cease. Preparation will be made for Close A Custody inmates to out-count in the Visiting Room.

11:00 a.m. The Close A Custody out-count will be conducted. The out-count will be hand-delivered to Control.

11:05 a.m. General population inmate (GP) processing will resume. No Close A Custody inmates will be processed until count clears.

11:15 a.m. Visitor exit processing will cease and resume after the Visiting Room count clears. Visitors will be asked to wait at the Visiting Room desk until the Visiting

Room count clears, at which time, they will be allowed to proceed to the Entrance Building.

11:20 a.m. All inmate ingress and egress processing will cease. The Visiting Room official Close A Custody count will be taken.

11:30 a.m. The official Close A Custody count will be given to Control via telephone.

Processing of visitors will continue during the Close A Custody Count. When count clears, Close A Custody inmates will be paged to the Visiting Room immediately utilizing the institutional paging system.

The Close A Count process will only have a minimal effect on the processing of visitors.

Visitors who enter the institution during the Close A count process may go directly to the main Visiting Room. However, if the actual out-count or official count is being conducted, the visitors must wait in the visiting over-flow area until the count process is completed at approximately 11:35 a.m.

Visitors who come to visit inmates who have Close A/B custody will be processed the same as all other visitors.

Visitors, who wish to bring their visit to an end, can do so at any time except during the Close A Count procedure. As soon as the Close A Count clears, visitors may leave at their discretion. Close A inmates whose visit ends after the out-count, will be held in the inmate restroom at the rear entrance to visiting until count clears.

When the Close A Custody count is cleared, normal visiting activities will resume.

54020.22 Non-Contact Visiting

Inmates assigned to ASU and inmates undergoing disciplinary detention are automatically assigned privilege Group D for the purpose of visiting. Inmates assigned to ASU shall be on non-contact visiting status.

Inmates assigned to the Mental Health Crisis Bed Unit may receive non-contact visits with the approval of the Interdisciplinary Treatment Team.

- Non-contact visiting will take place in the booths located in the Main Visiting Room. The visitors and inmates are not permitted to touch each other or exchange anything. Visitors or inmates will not be permitted to leave the non-contact visiting area after the visit begins, unless concluding the visit.
- All non-contact visits will be by appointment only. Ability to visit is not guaranteed. Appointments will be made on Thursday between the hours 0900 and 1100 by the Visiting Operations Staff. When a visitor calls to make an appointment, Visiting Staff will verify that the inmate is eligible for a visit prior to scheduling an appointment.
- Visitors will be assigned to a specific booth (#1-#5). The appointments will need to be made on Thursdays between 0900-1100 hours. This will allow the Visiting Operations Staff time to distribute the list of approved non-contact visits to all affected areas on Fridays for weekend visits. All scheduled

appointment time slots will be a minimum of one hour and a maximum of two hours.

Visits will occur on regular visiting days, during scheduled visiting hours. **Non-Contact visiting for ASU inmates will conclude at 3:00 p.m.**

Procedure for ASU Non-Contact Visiting

The inmate will be escorted in restraints and secured in the non-contact visiting booth. The door will be secured, deadlocked, and the restraints then removed through the cuffing port. An inspection shall be made of the non-contact visiting booth prior to and upon termination of the visit. Once the visit is terminated, the inmate will remain seated until the visitor has departed. The inmate is then placed in restraints through the cuffing port and escorted to the visiting search room for processing.

- Any two approved adult visitors may visit with the inmate one at a time, or one approved adult visitor may be accompanied by one minor.
- The inmate shall not bring anything into the non-contact visiting area.
- The visitor can bring similar items as a regular visitor can bring into the institution into the non-contact booth except photo ducats.
- Inmates on non-contact visiting status shall not participate in the Family Visiting Program.

54020.22.2 Non-Contact Visits for General Population (GP) Inmates

GP inmates, placed on non-contact visiting status through the disciplinary process will utilize the non-contact visiting area and will visit during normal visiting hours. Non-contact visiting for GP inmates will conclude at 3:00 p.m. on Saturday/Sunday. The same procedure for scheduling non-contact visits for ASU inmates applies to GP inmates.

54020.25 Visiting Photo Program

Inmate Welfare Fund photograph ducats will be sold at the respective entrance building while the visitor is being processed into the computer.

Inmate and visitor photographs will only be taken in specifically designated areas within the visiting area under the direct observation of custodial staff and only with the approved visitor(s) of the individual inmate. Inmates are not allowed to have a photograph taken solely of them and must have their approved visitor in photograph.

Inappropriate photographs are subject to seizure and may result in suspension or disciplinary action. No refund is authorized for photographs retained for evidence.

Visitors shall not be permitted to leave anything for inmates. However, inmates may take two photographs that were taken in the Visiting Room back to their living areas.

54020.27 Visiting in CDCR Hospitals and Infirmaries

CMC Correctional Treatment Center-Medical (CTC-M) visits shall be authorized for inmates-patients with a diagnosis of a critical and/or serious illness as determined

by their attending physician. The attending physician shall notify the Medical Social Worker (MSW). The following procedures shall be utilized.

The MSW or designee will:

- Verify that the inmate-patient meets the criteria for CTC-M visiting, noting special precautions after consulting with the physician and nursing staff.
- Verify the inmate-patient wishes to have the visit in order to communicate with respective family members. The "Consent to Release Information" form, CMC-MED 290b, shall be signed by the inmate-patient and witnessed.
- Verify with visiting staff that the visitor(s) is approved to visit and initiate appropriate paperwork.
- Generate the CTC-M Visiting Form indicating the inmate-patient who is to receive the CTC-M visit with the names of the family members approved to visit. When the form has been approved and signed by the Custody Operations Captain, it shall be distributed as follows:
 - Captain of Facility
 - Custody Operations Captain
 - Central Control
 - Health Care Manager
 - Watch Office
 - Visiting Operations
 - Entrance Building
 - CTC-M Second Floor
 - Charge Nurse
 - Warden

Visitors will be escorted to the CTC-M as arranged by the Watch Commander utilizing the Control Corridor CTC-M entrance. The MSW may be the escort if requested by custody staff.

All adult visitors must have been pre-approved for regular visits. An "emergency" clearance for a CTC-M visit may be initiated in the absence of prior approval in certain circumstances, e.g., patient placed on critically ill list.

CTC-M visits may be permitted at any time of the day or night outside of regular visiting days and hours.

Only two individual visitors at one time may be escorted to visit an inmate who is a patient in the CTC-M. The length of the visit will be one hour and may be terminated by custody or medical staff as needed. In the case of a seriously ill patient who may have intermittent periods of more medical stability, visits to the regular institutional visiting room on regular visiting days may be permitted with a physician's order. The patient may decide if he is feeling well enough to go to the Visiting Room for a visit. An inmate has the right to refuse a visit at any time.

54020.28 Visiting in a Community Hospital

An inmate/patient in a community hospital will be permitted visits, only if designated by the CEO or his/her designee as critically ill. The process for arranging visits shall be the same as for patients in the CMC CTC-M. Visitors will be processed at the CMC-East Entrance Building where they must receive a pass before proceeding to the outside hospital. A "visitor's pass" will be issued for those approved. The custody staff at the community hospital will be contacted prior to the visit,

informing the officer of the number and identity of the visitors.

54020.30.1 Visiting Room Capacity

EAST FACILITY

Visiting Room	109
Visiting Room Patio	94
Visiting Overflow Area	74
Visiting Foyer Area	16

Outside Table Area - Determined by the Visiting Lt/Sgt.

WEST FACILITY

Visiting Room	170
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Outside Area - Determined by the Visiting Lt./Sgt.

54020.32.1 Clearance and Approval for Attorney Visit

Attorney visits/depositions will be coordinated by either the Litigation Coordinator's (LC) or Board of Prison Hearings (BPH) Coordinator's office. All BPH and Valdivia Attorneys will contact the BPH and all other attorney's will go through the LC office. The staff person arranging the attorney visit/deposition will coordinate office space with the Visiting staff, East Captain's office and the Health Services Correctional Officer at the East Facility. Supervision of the attorney visit will be coordinated with the Watch Office. The Health Services Correctional Officer at the East Facility will provide supervision of the attorney visit. The LC's office will coordinate with the Visiting Lt./Sergeant for attorney visits occurring on visiting days. Attorney visits/depositions will also require notification of Entrance Building staff of the respective facility.

An attorney wishing to arrange a private attorney/inmate consultation shall request an appointment by calling, faxing, or writing the LC. If possible, attorneys visiting for the first time are requested to notify institutional staff five days in advance. Attorneys with current gate clearance approvals on file are requested to notify institutional staff two days in advance, if possible. However, a 24 hour notice is considered minimum for this purpose. In an emergency, appointment requests may be cleared through the LC or BPH Coordinator.

Advance security/gate clearances will be completed on all persons attending attorney/legal visits and depositions. When possible, the five day advance submittal of attendees will allow for completion of the clearances and notification of any denials of entrance to the facility. Attendees will be required to provide in writing, on professional letterhead, their current name and any others previously used, current address, date of birth, valid state driver's license number or state-issued identification card number, proof of current registry and good standing with a governing bar association; and indication of the jurisdiction(s) licensed to practice law and any prior arrest or conviction record.

Inmate-patients may be housed in a Mental Health Crisis Bed (MHCB) or other medical setting for the purpose of mental health treatment. Attorneys shall have access to visit these individuals in order to provide adequate due process related to parole proceedings.

When the LC or BPH Coordinator determines that an attorney has requested to visit an individual housed in a medical setting for the purpose of mental health

treatment, the LC or BPH Coordinator shall notify the supervising Licensed Clinical Social Worker (LCSW) over the MHCBS of the visit request, and the attorney of the inmate-patient's housing status. The supervising LCSW shall notify the assigned primary clinician, in the medical setting, that the attorney visit was requested.

Every effort shall be made to ensure that attorney visits occur, when requested, in a confidential setting. This may require careful scheduling of the attorney visit to avoid impacting services to other patients treated in the facility. When an individual refuses escort to a confidential setting, or there has been documentation that he has been assaultive in the last 24 hours, the attorney shall be allowed contact at the cell-front. When an individual is in clinical restraint, the attorney shall be allowed contact from outside the cell door, with the cell door open.

In rare occurrences, the clinician may determine that a visit from the attorney could compromise the health and safety of the inmate-patient. For example, if an individual holds delusional beliefs about the attorney, or threatens self-harm if an attorney visit is allowed, the clinician shall carefully document the reason for concern in the Electronic Unit Health Record (eUHR). The clinician shall document, using a CDCR Form 128B, that a visit from the attorney could be detrimental to the health and safety of the inmate-patient. The CDCR Form 128B shall be completed the same working day that the clinician is notified of the requested attorney visit, and shall indicate the reason why the visit may be detrimental, and the time frame recommended for a rescheduled visit. Copies of the CDCR Form 128B shall be scanned into the eUHR and the electronic Central File. The original CDCR Form 128B shall be given to the LC or BPH Coordinator. The LC or BPH Coordinator shall provide a copy of the CDCR Form 128B to the attorney by sending it via facsimile to CalPAP Headquarters at (916) 452-7491, and the attorney shall be requested to postpone the visit. When a clinician determines that an attorney visit could be detrimental to the inmate-patient, a mental health clinician who is a supervisor or manager shall be notified to review the documentation of the concern. Progress toward resolving the concern shall be documented in the eUHR at least every 24 hours. When an attorney declines to postpone the visit, the visit shall be allowed, and clinical contact shall be scheduled immediately following the attorney visit to determine whether modification of the treatment plan is necessary to ensure the safety of the inmate-patient.

54020.32.3 Attorney Visiting Hours

Attorney visits for the purpose of private consultation with an inmate will be permitted during the institution's regularly scheduled work-week hours (Monday through Friday, from 8:00 a.m. to 3:45 p.m.). Designated visiting rooms should be sufficient to accommodate three persons. Inspection and authorization of incoming legal materials will be the responsibility of Entrance Building custody staff. No briefcases or recording equipment that cannot be searched will be allowed inside the institution. All paperwork pertaining to the legal visit must be hand-carried. Inmates will be thoroughly searched prior to entering and upon exiting an attorney visit/deposition. Legal materials will be inspected according to established procedure.

Due to space and time limitations, attorney visits will be limited to three hours in duration unless special circumstances have been discussed and other arrangements approved in advance of the visit.

54020.32.4 Location of Attorney Visits

Attorney visits at the East Facility will take place at the Attorney Room or in Room #4 adjacent to the Board of Parole Hearing (BPH) Rooms.

Attorney visits at the West Facility will take place in the West Administration Building in Room A-205 or the Conference Room.

The door to the room where the visit is occurring will normally be closed to ensure the confidentiality of the visit. The attorney/representative or the inmate requiring the use of a restroom will be accommodated and directed or escorted to the appropriate room.

During attorney visits, inmates and attorneys/attorney representatives are not to have access to the vending machines or any other method of purchasing food or beverages. On non-visiting days an attorney is not required or in need of currency during the attorney visit.

Inmates on Administrative Segregation Status

Due to the need to provide both security and confidentiality during attorney/attorney representative visits with inmates on Administrative Segregation status, the procedure below will be followed:

Attorney/attorney representative visits shall be scheduled through the LC or BPHC as previously outlined in this section. Visits shall occur in the Non-Contact booth area. The Associate Services Search and Escort (S&E) Officer will obtain leg restraints from the Watch Office. The S&E Officer will maintain security coverage by positioning himself/herself outside the non-contact visiting area, inside the visiting room, keeping visual contact during the entire course of the visit.

When a compelling need exists, the Associate Warden, West Facility, may grant to an inmate on non-contact visiting status a contact visit with his attorney. If this occurs, the visit will be in the BPH area. The S&E Officer will apply leg restraints upon entering the BPH waiting area prior to placing the inmate in the interview room.

54020.32.5 Processing East Facility

- Inmates scheduled for an attorney visit will proceed to the Control Corridor and present their identification card and ducat to the Control Corridor Officer. The Control Corridor Officer will conduct a clothed body search of the inmate and process him through the grill gate leading to the second floor Health Services waiting area. The inmate will surrender his identification card and ducat to the Health Services Officer who will direct the inmate to be seated on the bench pending arrival of the attorney or representative.
- Upon arrival to the East Facility Entrance Building, the attorney/representative will be processed per procedure. The Entrance Building Officer will escort the attorney/representative to the Health Services

Officer adjacent to the BPH hearing rooms. The Health Services Officer will direct the attorney/representative to the Attorney Room or Room #4.

- After the attorney/representative is situated in the room, the Health Services Officer will direct or escort the inmate to the room.
- Supervision of the attorney/inmate visit will be the responsibility of Health Services Officer.
- At the conclusion of the visit, the Health Services Officer will sign the inmate's ducat and return it to him along with his identification card and process him back to the Control Corridor Officer. The Health Services Officer will contact the East Facility Entrance Building at extension 7737 to coordinate escort for the attorney/representative. The Entrance Building Officer will proceed to the Health Services area and escort the Attorney/representative back to the Entrance Building. The attorney/representative will be processed out per procedure.

West Facility

- An inmate scheduled for an attorney visit will proceed to the West Administration Building and surrender his identification card and ducat to staff who will retain both while the visit is in progress. The inmate will be instructed to remain seated in the foyer area outside the Watch Office door pending arrival of the attorney/representative.
- Upon arrival to the West Facility Entrance Building, the attorney/representative will be processed per procedure. The Outside Patrol Sergeant or Entrance Gate Officer will drive the attorney/representative to the Control Pedestrian Gate and be processed per procedure. An S&E Officer will report to the Control Pedestrian Gate to assume the escort. The S&E Officer will check out a Personal Alarm Device (PAD) and escort the attorney/representative to the second floor Conference Room or Room A-205. The S&E Officer will return downstairs and give the inmate a clothed body search prior to escorting him to the attorney visit.
- The S&E Officer will periodically check on the status of the visit.
- At the conclusion of the visit, the attorney/representative and inmate shall report to the S&E Officer. Staff will sign the inmate's ducat and return it to him along with his identification card prior to releasing him back to the housing unit. The Watch Sergeant will telephone the West Facility Entrance Building to coordinate escort. The Outside Patrol Sergeant or Entrance Gate Officer will proceed to the Administration building and escort the attorney/representative back to the West Facility Entrance Building. The attorney/representative will be processed out per procedure.

54020.32.6 Attorney Representatives/Litigation Support Personnel

Regulations governing attorneys' and attorney representatives' visits do not apply to student assistant

programs operating under agreements between the Department, institution and law school. Such programs must be operated in accordance with the individual agreements.

54020.32.9 Depositions

Arrangements for depositions will require coordination with staff responsible for scheduling boardroom and conference room space and Entrance Building staff. Prior to recording a deposition, attorneys will sign a disclaimer regarding use of the tape. The Litigation Office will provide the disclaimer. Depositions will be scheduled on weekdays between 8:00 a.m. and 3:45 p.m. Five-day advance contact is required due to space limitations.

Inspection of all audio/video or stenography recording devices is required prior to admittance into the institution. Attendance at depositions should be conservatively limited due to space availability, escort duties and security concerns.

54020.32.9.1 Audio Recording

Audio recording of authorized interviews by attorneys and attorney representatives shall be permitted with the inmate's consent. Prior approval is not required from institutional staff. Prior to recording meetings with their clients, attorneys/approved representatives are required to sign a media disclaimer provided by the Litigation Coordinator. The institution has equipment that attorneys and representatives may use. The user must furnish tapes. Tapes are to be sealed in their original packaging.

54020.32.9.2 Video Recording

Video recording of authorized interviews, with the inmate's consent, shall be permitted with the prior approval of the Warden/CDW.

54020.33 Family Visiting General Information

The Visiting Sergeant will be responsible for ensuring adherence to Family Visiting procedures. The Visiting Sergeant shall also supervise Visiting staff and oversee day-to-day operations of the Family Visiting Program.

The institution provides all necessary accommodations except food and approved linens/bedding items to permit extended and overnight visits between eligible inmates and members of the inmate's immediate family. Sufficient clothing for all visitors for the duration of the Family Visit will be needed. Excessive amounts will not be allowed. The visitor cannot bring any clothing into the institution for the inmate. It is the inmate's responsibility to mail the Family Visiting Inmate Notification Form, CDCR 1072 (Exhibit 1), to the prospective visitor prior to the date of the Family Visit. The Family Visiting Confirmation Form, CMC-FV-004 (Exhibit 2), as well as the Exemption of Family Visit Funds from Restitution Fines/Orders Form, CDCR 1839 (Exhibit 3), shall be mailed by the inmate along with the CDCR 1072. Specific information regarding institutional policies relating to Family Visiting; e.g., authorized property for visit, medical requirements, required documentation, is included in these documents.

The Family Visiting Coordinator (FVC) shall schedule visits and process all associated paperwork. Family Visits are scheduled approximately sixty (60) days prior to actual date of occurrence. At the time of scheduling, FVC shall confirm family relationships on all proposed

visitors. The assigned Correctional Counselor I (CCI) will provide assistance as needed.

Participants in the Family Visiting Program shall be required to stay in their assigned unit or fenced yard for the duration of the visit. Parents shall be responsible for the supervision of their children who must be kept in the unit or fenced yard. Visitors shall not be permitted to wander about or the visit may be terminated. Visitors and inmates shall not wear undergarments, thermal underwear or any other unauthorized clothing outside the Family Visiting Unit.

Emergency contact phone numbers are posted in the units for participants.

54020.33.1 Inmate Family Visiting Eligibility

Immediate family members are eligible to come into the institution to participate in Family Visits, with prior approval of the correctional CCI or the FVC. Approved relationships are as follows:

Inmate's legal wife;
 Natural parents; step-parents; foster parents; adoptive parents (see below);
 Grandparents;
 Inmate's own brothers and sisters;
 Inmate's own children;
 Inmate's adopted children;
 Inmate's step-children -- with natural parent;
 Inmate's grandchildren;

Aunts, uncles, cousins, nephews, nieces are not considered immediate family members unless there is a bona fide foster relationship proven and approved by the Chief Deputy Warden (CDW). Persons related to inmates by common-law shall not be approved.

Proven foster brothers and sisters may be approved for Family Visiting with the prior approval of the CDW, foster sisters must be chaperoned. If a family relationship existed prior to inmate's incarceration, an adoptive parent is eligible for Family Visits.

Persons under 18 years of age will not be permitted overnight Family Visits without the presence of another adult member of the inmate's immediate family. Exception(s) include an inmate's legal spouse. Inmate's minor children, or legal step-children, and grandchildren may come to Family Visits with another approved Family Visiting participant if they have the written, notarized approval of their outside parent or legal guardian. The inmate is responsible for sending this form to his family for completion.

Each approved adult Family Visitor must first be an approved regular visitor. The FVC will check the Strategic Offender Management Systems (SOMS) for visitor approval.

An inmate may apply for a family visit, consisting of approximately 46 hours in duration. If approved, a 3-month period must have elapsed before the inmate is eligible for another visit for Privilege Group A inmates. For Privilege Group B inmates, 120 days must have elapsed.

- The CCI shall submit a memorandum to the CDW in cases where the inmate requests a Family Visit and appears to be eligible, *if case factors do not change, on initial application only*. The CDW shall approve or deny all such requests. Upon receipt of the decision, if it is favorable, the FVC shall schedule the visit and advise the inmate in writing of the dates set.
- No other special assignment of dates shall be made unless an appeal is granted at the Warden's level.

When two members of the same immediate family are both incarcerated at the same facility of the California Men's Colony (a father and his son or full-blooded brothers), they may share Family Visits with members of their immediate, mutual family (own mother, father, brothers, or sisters), total number not to exceed capacity of the unit. This shall require the approval of the Custody Operations Captain. Mutual visits will not be used so that either man will have more or longer visits than his peers. Any relatives other than those listed in this paragraph shall not be approved unless they are specifically approved by the CDW.

If an inmate is in the CMC CTC-M when his Family Visit is scheduled to begin, the attending physician will determine whether the inmate is physically able to report to the Family Visit. If the admission is for a psychiatric problem, the Chief Psychiatrist will determine whether the inmate participates in the visit.

The Facility Captain will notify the FVC when an inmate has been found in possession of a controlled substance, narcotics, drug paraphernalia, cash, or has come from another institution while on non-contact visiting status, via CDCR 128-G.

Inmates within 60 days of their release date will not be considered for the Family Visiting Program. This restriction does not apply to inmates who will be released to "Hold."

Approximately 72 hours prior to the date of occurrence of the Family Visit, Visiting Operation staff shall review the inmate's case factors in SOMS to determine if the inmate's privilege group or disciplinary status has changed Family Visiting eligibility. If Family Visiting eligibility has changed, the Visiting Lieutenant/Sergeant shall cancel the Family Visit and prepare a CDCR-128B informational chrono indicating the reason for the cancellation and forward a copy to the assigned CCI.

Identified Human Immunodeficiency Virus (HIV) Infected Inmates

An identified HIV-infected inmate may be permitted an overnight Family Visit with:

- Inmate's legal wife
- Parents; defined as natural parents; adoptive parents, if the adoption occurred and a family relationship existed prior to the inmate's incarceration; foster parents; or a step-parent, if accompanied by one natural parent; and/or natural children, step-children and adopted children, if the adoption occurred prior to incarceration, with whom a family relationship existed prior to incarceration;

- Grandchildren; Grandparents; Siblings.

Conditions:

Identified HIV-infected inmates shall not be permitted to have overnight family visits unless all of the following conditions are met:

- Adherence to all applicable provisions of CCR, Title 15, Division 3, Chapter 1.
- The inmate's legal wife, parent, child, grandchild, grandparent, or sibling seeking an overnight visit shall submit appropriate legal documentation verifying that he/she meets the above criteria. Documentation shall be submitted to the institution Visiting Lieutenant/Sergeant/FVC for verification of family relationship. Such documentation shall be submitted far enough in advance to allow sufficient time for institutional verification of the relationship. Verification and approval/disapproval requires approximately four to six weeks from the date of receipt of the visiting questionnaire.
- An HIV-infected inmate housed in the general population (GP) requesting an overnight family visit with his legal wife, parent, child, grandchild, grandparent, or sibling as defined above, will not require medical clearance. However, all HIV infected inmates, regardless of where they are housed, require disclosure to their visitors. Inmate-patients in the CTC-M will require medical review. The CEO or his/her medical designee shall prepare a CDCR-128-C recommending approval/disapproval for CTC-M inmate-patients to participate in an overnight visit with pre-designated visitors and direct a copy to the inmate-patient's assigned CCI. All HIV infected inmates shall be required to complete disclosure waivers. The assigned CCI shall submit the completed inmate application package to the Facility Captain for approval. The package shall include:
 - CDCR 106, Family Visiting Application;
 - Disclosure waivers;
 - Medical clearance (if applicable).

Upon approval by the Facility Captain, the application shall be submitted to the Facility Classification Coordinator for presentation to the next available ICC for approval/denial. If the request is denied, the reasons for denial shall be documented on a CDCR 128-G.

Applications for overnight visits with previously approved visitors will not require Institutional Classification Committee (ICC) approval. The completed application will be submitted to the Facility Captain for approval. Upon approval, all applications for overnight visit will be forwarded to the FVC.

Upon receipt of Family Visiting applications from inmates, the FVC will fax the inmates' names and CDCR numbers of the inmates applying to participate in overnight visits to the HIV Coordinator. The HIV Coordinator will notify the FVC of any inmate that is found to be on the list. If this is the case, the inmate will be required to disclose their HIV status to the visitors per this procedure.

Visitation privileges shall be consistent with the privileges of all general population inmates, and in accordance with the inmate's classification level, Work Incentive Program classification and custody level.

All persons approved for a family visit must receive written information about HIV disease. This information, provided by the institution prior to the initial visit, shall include at least an explanation of HIV disease, transmission routes, and precautions to be taken to avoid exposure to HIV. The procedure for providing the informational counseling will be as follows:

- The inmate's assigned physician will review the inmate's medical file to verify the HIV status of the inmate applying for a family visit. If the inmate is documented as having HIV, the physician will gain the inmate's signature on a CDC 7301.
- (Authorization, Waiver and Release - Inmate's Authorization to Disclose HIV Status, Exhibit 4). The physician will forward the CDC 7301 to the FVC. The FVC will cross-reference all inmate family visiting applications for HIV status prior to sending any family visiting documents to the family. Each visitor, including approved children, will receive a CDC 7301.
- The FVC will send the CDC 7301, along with all necessary HIV materials, to each family member applying for a visit. This will be sent via certified, return-receipt mail. If the family members reside at different addresses, a CDC 7301 will be sent to each address.
- Approved children are the responsibility of the parent/legal guardian. In order for children to visit an HIV inmate, a Parent/Legal Guardian's Waiver and Release For Family Visit form (CDC 7301-A, Exhibit 4-A) will be filled out for each child. This form will be completed by a Notary Public and bear an official notary seal.
- The CDC 7301/7301-A must be mailed back to the FVC no later than 21 days prior to the visit. The scheduled family visit will not be approved until verification has been received and the CDC 7301/7301-A has been signed and returned to the FVC. Failure to sign the CDC 7301/7301-A or to return the forms in a timely fashion will be cause for denial of the family visit. The signed release affirms that the family members applying to visit have received, read, and understood the HIV literature and absolve the Department and all its employees and agents of any and all liability for any and all injuries or illness resulting from the visit. The completed form(s) shall be maintained in the inmate's health record.
- In order to protect the health status of the inmate and the visitor, an identified HIV infected inmate who would otherwise qualify for an overnight Family Visit may be denied the privilege if the attending physician determines that either the inmate or the visitor has a communicable disease which can be transmitted through casual contact and cause a serious health threat to the inmate or the visitor.

Implementation

The inmate's physician will inform the HIV-positive inmate that the inmate's written authorization is required

before the institution can release information on the inmate's HIV status to the approved visitor and obtain the required waiver. In order to facilitate this disclosure, CDCR 7301 form shall be used.

- Prior to the initial visit, the inmate's physician shall have the inmate complete the top portion of the form. One form will be needed for each visitor.
- The inmate's assigned physician shall witness his signature.
- The signed CDCR 7301 form(s) is then to be forwarded to the FVC who will in turn send to each visitor (one each) the prepared CDC 7301/7301-A via certified, return-receipt mail. Required written HIV information will be sent with the CDC 7301/7301-A to each person applying for a visit.
- The form must be completed and mailed back to the FVC at least 21 days prior to the start of the scheduled visit. The CDC 7301/7301-A is considered a confidential document.
- Overnight Visitation by Minor Children with a Parent Identified as HIV-infected: The accompanying adult and legal guardian of the child(ren) shall sign a waiver absolving the department of all liability should either the child or accompanying adult contract the HIV disease or any illness as a result of the visit.
- The signed waivers and the authorization form from both parent and/or legal guardian and accompanying adult shall contain an acknowledgment that the HIV materials were received, read and understood. In order to accomplish this, each institution will use only CDC Forms 7301, 7301-A or Spanish Language Forms 7301-B, 7301-C.

54020.33.2 Inmate Applications for Family Visits

Family Visiting Applications, CMC-FV-006 (Exhibit 5), are available in the Facility Program Offices.

Inmates applying to participate in the Family Visiting Program must submit their initial (first) application to their assigned CCI. Thereafter, all subsequent applications shall be submitted directly to Visiting Operations.

Falsification of a Family Visiting application shall result in disciplinary action including suspension of Family Visiting privileges. Renewal of Family Visiting privileges will be considered by classification committee upon receipt of a request by the affected inmate.

A maximum of six names can be submitted for approval on the application. A maximum of three approved visitors are allowed on a Family Visit at one time, excluding children less than 18 months of age.

The CCI shall review the application for eligibility per CCR 3177 and previous classification actions (Exhibit 6). If found ineligible, the inmate will be notified via the returned application with reason(s) for denial noted on the form. If approved, the application will be forwarded to FVC for scheduling according to next available dates. There is no stand-by list for Family Visiting. Requested visitors must meet the standard of immediate family per CCR 3000 "Immediate Family defined." CCI's and Visiting Operations staff shall require documented proof of family relationship prior to approving attendance at a Family Visit.

Family visits shall be scheduled with specific family members. Once an application is approved, one change of an addition, substitution or date will be permitted.

54020.33.4 Notification of Scheduled Family Visiting Dates

Upon written request from the inmate, one change of Family Visiting date shall be permitted per scheduled visit.

54020.33.8 Processing Inmates for Family Visiting

The inmate shall be processed through the Visiting Room just as for regular visits. The inmate shall bring an itemized list of articles to be taken with him (state issue clothing), Family Visiting List, CMC-FV-002 (Exhibit 7). This list must be verified upon return from each visit.

54020.33.13 Family Visiting Length and Visitor Reporting Requirements

All participants shall arrive and depart from the Family Visit at the same time. Family Visitor in-processing begins between 1100 a.m. and 1:00 p.m. on the first day and out-processing extends to 10:00 a.m. on the final day. The inmate and his family must be ready to exit the unit at 9:30 a.m. Visitors must be at the institution or have called by 1:00 p.m. on the first day of the visit or the visit will be cancelled. If, because of extraordinary circumstances, the visitor cannot arrive by 2:30 p.m., they may be allowed to enter the Family Visiting Unit the next day upon availability of the Family Visiting Officer to process the visit. The scheduled out processing date remains the same.

If a visitor arrives after the 1:00 p.m. cancellation time and has not made prior arrangements for being late, the visitor will be considered a "no show", and a three-month suspension may be invoked. Should suspension be in effect, an application for Family Visiting will be accepted after the suspension expires. The suspension shall not be part of the normal waiting period between submissions of application and visit.

54020.33.14 Processing of Visitors for Family Visiting

Family Visiting property shall always be searched. FVC, CMC ISU or designee will also search persons, lockers, and cars when documented probable cause exists, upon approval. If a visitor refuses a search of his/her person or property, the Family Visit will be cancelled. The inmate will be required to submit another application to be scheduled for a subsequent visit.

During normal duty hours, when the search produces a positive result, the Family Visiting Officer will contact the Custody Operations Captain and the ISU Lieutenant who will take charge of the incident.

After normal duty hours when the search produces a positive result, the incident will be referred to the Watch Commander.

Visiting guests shall report to the respective facility Gatehouse/Entrance Building. All individuals, 18 years of age or over, must present either their Department of Motor Vehicles (DMV) valid driver's license or identification card, United States Government identification card, United States military identification card, picture identification card issued by the USINS, picture identification card issued by the Mexican Consulate (Certificado de Matricula Consular), or a valid

passport, as identification for entry. All identification must be current and have a picture on the card. For each visit, the inmate's spouse must present their marriage license or marriage certificate that has the embossed or purple inked County's seal to show it has been recorded. An inmate's sister/brother and children (adult or minor) must present certified birth certificates for each Family Visit. Only those visitors whose names appear on the approved forms shall be allowed to visit.

Visitor's cars shall remain in the Visitor's parking lot. The vehicle will be locked and secure. The vehicle keys will be secured in a locker at the respective facility entrance building. The visitor will retain the locker key.

54020.33.16 Food for Family Visiting

All food ordering will be handled by an approved vendor. Shipments will be received at the Warehouse Monday through Friday. Family Visiting Staff shall secure all ordered food items in the appropriate storage facilities designated for the Family Visiting Program. Family visiting Staff will conduct a weekly inventory of received food packages to ensure the timely arrival prior to the scheduled visit. Applicants will receive a receipt once the package has been verified as received. Should a package not arrive within 72 hours of the scheduled visit, the visit may be canceled. Family Visiting Staff will conduct an inventory with the visitors on the date of intake. Any discrepancies regarding the food package will be taken directly to the approved vendor by the visitor. In the event an item is received damaged or missing, the Family Visiting Staff will substitute with an alternate item that has been provided in advance by the approved vendor.

54020.33.18 Family Visiting Count Procedures

Inmates on a Family Visit must report to the entrance area of the Family Visiting Unit and be counted at 0030, 0230, 0430, 1615, and 2100 hours. If the inmate fails to report for count, disciplinary action will be initiated. All persons occupying the Family Visiting Units are to be physically seen twice each day at approximately 0830 hours, and again at approximately 2100 hours. The respective Tower Officer will contact the inmate by telephone to coordinate the inmate's exit onto the landing for count.

54020.33.20 Condition and Cleanliness of Family Visiting Units

Available Facilities:

Mobile Homes - There are four mobile homes at the West Facility. Each will accommodate four adults and one small child with two bedrooms, two double beds, and one crib per trailer.

Apartments- There are three units at the East Facility. Each will accommodate four adults and one small child with two bedrooms, two double beds, and one crib per apartment. All three are wheelchair accessible.

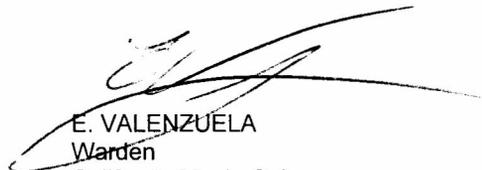
Unit maintenance and lawn care in each nearby area shall be done during vacancy on: Tuesdays - West Facility and Wednesdays - East Facility.

Visiting Operations staff will order supplies, arrange maintenance of Visiting Units, complete inmate worker

reports (CDCR 1697 and 101) and otherwise ensure successful operation of the program.

54020.34 Appeals Related to Visiting

If a visitor has a complaint, he or she may write to the Visiting Lieutenant/Sergeant directly. All issues will be responded to via United States Mail. If satisfaction is not received, the problem should be taken to the Custody Operations Captain.



E. VALENZUELA
Warden
California Men's Colony

FAMILY VISITING INMATE NOTIFICATION

CDC 1072 (3/99)

Exhibit 1

TO: (Inmate's Name)	CDC NUMBER:	HOUSING:
FROM: FAMILY VISITING COORDINATOR	INSTITUTION: CMC - East	DATE:

YOUR REQUEST FOR A FAMILY VISIT WITH THE FOLLOWING PROPOSED VISITORS HAS BEEN APPROVED.

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

TYPE OF VISIT REQUESTED: REGULAR FAMILY VISIT

Your Family Visit is scheduled for (date): _____

Time of arrival must be between 12:00 PM to 1:00 PM

Detach the bottom half of this form and mail it to a participating adult family member for confirmation of this visit. The completed Confirmation MUST be returned by the proposed visitor, via U.S. Mail directly to the Family Visiting Coordinator of this institution.

----- ✂ ----- **Please cut along dotted line and return the bottom half of this form** ----- ✂ -----

To: Proposed Family Visiting Participants Listed Below:	INMATE NAME:	CDC NUMBER:
1. _____		
2. _____	5. _____	
3. _____	6. _____	
4. _____		

A Family Visit has been scheduled for (date): _____

Minors MUST be accompanied by an adult who is an approved visitor and must have prior approval from a parent or legal guardian if the accompanying adult is not the minor's parent or legal guardian.

Please confirm your participation or cancellation by completing the information below. This form must be returned by Mail to the FAMILY VISITING COORDINATOR.

* ALL FORMS MUST BE RECEIVED BY THE FAMILY VISITING COORDINATOR AT LEAST 21 DAYS PRIOR TO THE FAMILY VISIT. FAILURE TO COMPLY WILL RESULT IN CANCELLATION.

Return Completed Confirmation to:
FAMILY VISITING COORDINATOR
CMC EAST FACILITY
P.O. BOX 8101
SAN LUIS OBISPO, CA. 93409-8101

- I/We will arrive as schedule between 12:00 PM and 1:00 PM
- I/We will not arrive as schedule. Please cancel this scheduled visit.

SIGNATURE OF ADULT PROPOSED VISITOR

DATE:

Telephone Number: (805) 547-7628

FAMILY VISITING CONFIRMATION FORM-ATTACHMENT

GENERAL INFORMATION:

Family Visiting is a privilege earned by the inmate through successful program participation. Every effort will be made to provide a friendly atmosphere for the visit.

The Family Visitor(s) shall report to the appropriate facility Visitor Processing area between the hours of 12:00 p.m. and 1:00 p.m. on the date of their scheduled Family Visit. If the visitor cannot arrive within the specified time frame, it is the visitor's responsibility to notify the Family Visiting Coordinator at (805)547-7628. If the visitor(s) do not arrive by 1:00 p.m., and prior notification has not been made, the Family Visit will be denied. The participants will be subject to a 90 day suspension from the Family Visiting Program. **NO EXCEPTIONS WILL BE MADE.** Visitor(s) must be ready to exit the Family Visiting accommodations no later than 10:00 a.m. Family Visits can be interrupted or terminated if circumstances dictate. It is required that all visitor(s) comply with all laws, rules, and policies while participating in the Family Visiting Program. All visitor(s) are required to comply with instructions or orders given by staff.

Participation in the Family Visiting Program is restricted to the inmate's immediate family members. Immediate Family Members means legal spouse; registered domestic partner, natural parents; adoptive parents, if the adoption occurred and a family relationship existed prior to the inmate's incarceration; step-parents or foster parents; grandparents; natural, step, or foster brothers or sisters; the inmate's natural and adoptive children; grandchildren; and legal stepchildren of the inmate. Aunts, uncles and cousins are not immediate family members unless a verified foster relationship exists.

REQUIRED DOCUMENTATION NEEDED FOR EACH FAMILY VISIT:

Proof of valid marriage shall be established by the inmates assigned Correctional Counselor prior to approval to participate in the Family Visiting Program. A certified official marriage certificate shall be presented to the Family Visiting Officer prior to each visit. A marriage certificate is required for both step-parents, if applicable. No photo copies will be accepted.

Each visitor over the age of 18 years shall possess valid identification. Acceptable forms of identification are as follows: Drivers License, DMV ID Card, Valid Passport, Active Military ID, or other valid government issued ID.

To verify that immediate family criteria is met, the inmates parents, grandparents, siblings, children and grand children (both minors and adults) must present official birth certificates prior to each visit. Visitors must bring certified official supporting documentation, to prove family lineage, including the inmates, parents, and other qualified immediate family members birth certificates to each visit. An inmate's minor children, when not visiting with their natural parents, must be accompanied by an approved family member who is authorized to chaperone the minor. The approval shall specify by name, the approved family member who is authorized to chaperone the minor and the specific date of each family visit authorized for the minor's attendance. Valid departmentally approved notarized consent forms must be presented prior to each visit. Notarized consent forms must indicate the natural parent's or legal guardian's approval to participate in prison visitation on the approved form. Consent documentation attached to a notarized consent form will not be accepted. Notarized consent from legal guardians must also be accompanied by certified official supporting documentation. The appropriate form is available on the CDCR website visitation link and visiting staff.

All certificates must be through the appropriate county recorder's office and shall be embossed or stamped with the official county seal.

Visitors are authorized to possess the following items while participating in the family-visiting program:

One bag of clothing per visitor; no suitcases are permitted. Clothing shall be in paper, plastic, or fabric bags. Basic personal hygiene and cosmetic items in the amount necessary for the length of the family visit. No aerosol containers. Visitors with children shall use disposable diapers only. Baby powder, baby food and formula may be brought in to the visit in factory-sealed containers only. Searchable children's toys such as simple games, coloring books, crayons, or pencils (as authorized by the institution) may be allowed. Locker key. Prescribed medications with prior authorization. Prescribed birth control pills. A spouse shall be permitted to bring in a maximum of ten commercially sealed condoms per visit. Condoms in unsealed packaging shall not be permitted into the institution. All unused condoms shall be retained in their sealed packaging and taken from the institution by the visiting spouse. Under no circumstances shall an inmate be permitted to possess condoms outside of the family visiting quarters.

All medications must be currently prescribed. A letter from your doctor listing your medications, dose and frequency of use must be sent to CMC along with your confirmation form. Any person who requires narcotic medication, life sustaining medications or life sustaining apparatus, must have prior approval to participate in the family visiting program. Approval can be obtained by having your physician submit a letter to institutional staff explaining the extent of your medical condition and their approval of your over night visit in a prison. Failure to have prior written approval will result in your visit being denied upon your arrival at the institution.

Clothing:

Clothing restrictions are same for family visits as for regular visits.

Cosmetics and basic hygiene:

The following items are limited to the quantity necessary for the duration of the visit and must be searchable. Limit 5 items total: Make up foundation, Blush, Eyeliner, Mascara, and Lipstick.

The following items are authorized and restricted to one item each. Items must be in factory sealed containers, the contents must be clear to allow search, must not contain alcohol, or be flammable: Shampoo, Conditioner, Facial Cleanser, toothpaste, toothbrush, bath soap, deodorant, feminine hygiene, and Lotion.

No electrical appliances or aerosol containers are allowed.

Any other items shall be considered unauthorized and will not be permitted to enter the institution.

Food for Family Visits:

All food ordering will be handled by an approved vendor. The approved vendor for Family Visiting at the California Men's Colony is Walkenhorst's. Food orders can be placed by contacting Walkenhorst's toll free at (877) 660-9255. Orders can be sent directly to Walkenhorst's at 540 Technology Way, Napa, CA 94558. Orders can also be made online at www.walkenhorsts.com. Shipments will be received at the Warehouse Monday through Friday. Family Visiting Staff shall secure all ordered food items in the appropriate storage facilities designated for the Family Visiting Program. Family visiting Staff will conduct a weekly inventory of received food packages to ensure the timely arrival prior to the scheduled visit. Applicants will receive a receipt once the package has been verified as received. Visitors will be notified in advance if a package has not been received within seven (7) days of the scheduled visit. Should a package not arrive within seventy-two (72) hours of the scheduled visit, the visit will be canceled. Family Visiting Staff will conduct an inventory with the visitors on the date of intake. Any discrepancies regarding the food package will be taken directly to the approved vendor by the visitor. In the event an item is received damaged or missing, the Family Visiting Staff will substitute with an alternate item that has been provided in advance by the approved vendor.

If the Family Visit is cancelled, the Family Visiting Package will be returned to the approved vendor. All refunds and discrepancies will be handled directly by the approved vendor.

Visitors with infants may be allowed the following items: Powdered or bottled formula in vendor-sealed containers and baby food in vendor-sealed containers.

It is illegal to bring weapons, ammunition, teargas, alcohol, controlled substances, narcotics, cell phones/accessories, and tobacco into a prison.

CONFIRMATION:

ALL PAPERWORK MUST BE RECEIVED BY THE FAMILY VISITING COORDINATOR AT LEAST 51 DAYS PRIOR TO THE SCHEDULED VISIT.

EXEMPTION OF FAMILY VISIT/TEMPORARY COMMUNITY LEAVE FUNDS FROM RESTITUTION FINES/ORDERS
CDC-1839 (Rev.5/97)

AMOUNT OF MONEY YOU HAVE ENCLOSED:

TO BE COMPLETED, IN ITS ENTIRETY, BY FAMILY MEMBER

NAME OF INMATE YOU WISH TO VISIT: (Last, First, MI)	CDC NUMBER:
NAME OF FAMILY MEMBER PROVIDING FUNDS: (Last, First, MI)	TELEPHONE NUMBER: ()
FAMILY MEMBER'S ADDRESS: (Include City, State, and Zip Code) (See Privacy Statement on the back)	

- THESE FUNDS ARE TO PAY FOR FOOD DURING A FAMILY VISIT (FV)
- THESE FUNDS ARE FOR A TEMPORARY COMMUNITY LEAVE (TCL)

CANCELLATIONS

IF THIS VISIT/LEAVE IS CANCELLED:

- 1) ALL FUNDS WILL REMAIN INDEFINITELY IN THE INMATE'S TRUST ACCOUNT WITH A HOLD PLACED ON THEM UNTIL USED FOR FUTURE FAMILY VISITS OR TEMPORARY COMMUNITY LEAVES.
- 2) THESE FUNDS WILL BE AVAILABLE SOLELY FOR THE PURPOSE OF FAMILY VISITS OR TEMPORARY COMMUNITY LEAVES AND CANNOT BE USED TO PURCHASE ITEMS FROM THE CANTEEN.
- 3) RESTITUTION WILL NOT BE TAKEN FROM THESE FUNDS WHILE THEY ARE BEING HELD FOR THE FAMILY VISITS OR TEMPORARY COMMUNITY LEAVES.
- 4) NO REFUNDS WILL BE MADE.

IMPORTANT:

- 1) PLEASE SEND THIS FORM WITH PAYMENT TO THE INSTITUTION'S ADDRESS, ATTENTION: FAMILY VISITING.
- 2) IF THIS FORM DOES NOT HAVE COMPLETE INFORMATION, THE FUNDS WILL BE TRANSFERRED TO THE INMATE'S TRUST ACCOUNT AND SUBJECT TO RESTITUTION DEDUCTIONS.

SIGNATURE OF FAMILY MEMBER PROVIDING FUNDS	DATE SIGNED
SIGNATURE OF CDC STAFF FACILITATING FUNDS FOR EMERGENCY TCL	DATE SIGNED

CONFIDENTIAL DOCUMENT

NOTE: A SEPARATE FORM IS REQUIRED FOR EACH VISITOR FOR EACH VISIT

INMATE'S AUTHORIZATION TO DISCLOSE HIV STATUS

I authorize the Chief Medical Officer ("CMO") or his/her designee to disclose to (name) _____ who is my (relationship) _____ that I have tested positive for the Human Immunodeficiency Virus (HIV). I further authorize the CMO, or his/her designee, exercising his/her sole discretion, to disclose to the above-named person any information regarding my medical condition and/or medical treatment.

I authorize:

- my child (name) _____
- my child's other parent or legal guardian (name) _____

at the sole discretion of the CMO, to be informed of my HIV status. I authorize the Parent/Legal Guardian Authorization, Waiver and Release (CDC 7301-A) to be presented to a Notary Public for the purpose of notarizing.

PRINT NAME - FIRST, MIDDLE, LAST		CDC NUMBER
INMATE'S SIGNATURE		DATE
WITNESS' SIGNATURE	PRINTED NAME	DATE

VISITOR'S WAIVER AND RELEASE FOR FAMILY VISIT

On behalf of myself, my unborn child(ren), my personal representatives, heirs, assigns, and next of kin:

1. I acknowledge that the above-named inmate, whom I request to visit, is infected with the Human Immunodeficiency Virus (HIV), the AIDS virus. I understand that HIV is communicable through contact with blood and other bodily fluids, and that such contact includes, but is not limited to, sexual activities and sharing of intravenous needles;
2. I assume all risk that as a result of this visit, I may become infected with HIV, AIDS, or other related disease or diseases;
3. I assume all risk that as a result of this visit, a child already conceived or who may be conceived may become infected with HIV, AIDS, or other related disease or diseases;
4. I release, waive, discharge, and covenant not to sue (a) the California Department of Corrections ("CDC"); (b) CDC's prisons, facilities, camps, or institutions, (c) the State of California ("State"), including each of its departments, boards, or other divisions and (d) the employees or agents of (a) through (c) above for any and all liability for all losses or discharges on account of violation of the civil rights of, and/or the injury to the person or, the property of, and/or the death of me or any other person or persons caused, whether primarily or secondarily, by an HIV infection arising out of this visit; and
5. I expressly agree that this waiver and release is as broad and inclusive as is permitted by the laws of the State and the United States, and that if any part of it is held invalid, the remainder shall continue in full force and effect.

This waiver serves to acknowledge that I have received, read and understand the HIV materials provided by the Department of Corrections.

PRINT NAME - FIRST, MIDDLE, LAST	VISITOR'S SIGNATURE	DATE
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THIS FORM, WHEN COMPLETED, IS TO BE MAINTAINED IN THE INMATE'S MEDICAL FILE

STATE OF CALIFORNIA
PARENT / LEGAL GUARDIAN'S AUTHORIZATION, WAIVER AND RELEASE
CDC 7301-A (8/91)

DEPARTMENT OF CORRECTIONS

CONFIDENTIAL DOCUMENT

CDC # _____

PARENT / LEGAL GUARDIAN'S WAIVER AND RELEASE FOR FAMILY VISIT

I am the parent / legal guardian of _____ I
authorize _____, to accompany my child/ward on an overnight visit.
(NAME OF CHILD / WARD)
(NAME OF ACCOMPANYING ADULT)

I understand that the person whom my child/ward will visit has tested positive for the HIV antibodies and agree on behalf of my minor child/ward to:

1. Assume all risk if, as a result of this visit, my child/ward becomes infected with HIV, AIDS, or other related disease or diseases;
2. Release, waive, discharge, and covenant not to sue (a) the California Department of Corrections ("CDC"); (b) CDC's prisons, facilities, camps, or institutions; (c) the State of California ("State"), including each of its departments, boards, or other divisions; and (d) the employees or agents of (a) through (c) above; and (d) the employees or agents of (a) through (c) above; for any and all liability for all losses or damages on account of violation of the civil rights of, and/or the injury to the person of, the property of, and/or the death of my child or any other person or persons caused, whether primarily or secondarily, by an HIV infection arising out of this visit; and,
3. Expressly agree that this waiver and release is as broad and inclusive as is permitted by the laws of the State and of the United States, and that if any part of it is held invalid, the remainder shall continue in full force and effect.

In addition to the above, my signature acknowledges that I have received, read and understand the HIV materials provided by the Department of Corrections and that it is my responsibility to educate and inform my child/ward of the HIV disease as I see fit.

PRINT NAME - FIRST, MIDDLE, LAST _____

PARENT OR LEGAL GUARDIAN'S SIGNATURE _____	DATE _____
--------------------------------------------	------------

To be completed by Notary Public:

State of California _____)
 County of _____)
 On _____ before me, _____
(herein insert name)
 personally appeared _____

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they execute the same in and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Witness my hand and official seal.

Signature _____ *Notary Public: Affix official notary seal above.*

VISIT: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	SIGNATURE OF WARDEN OR HIS/HER DESIGNEE _____	DATE _____
INSTITUTION _____		

FAMILY VISITING APPLICATION

INSTRUCTIONS: Inmate to complete and submit application to assigned Counselor.
Counselor to verify relationships and forward to Family Visiting Coordinator.

TO: FAMILY VISITING COORDINATOR via Correctional Counselor		DATE SUBMITTED TO COUNSELOR	DATE OF LAST FAMILY VISIT
FROM: (Inmate's Full Name)		DATE RECEIVED BY FV COORDINATOR	PLEASE SCHEDULE FAMILY VISIT ON OR ABOUT
CDC NUMBER	CELL/DORM (Bed Number)	EPRD/BOARD DATE	PRIVILEGE GROUP
CUSTODY		DATE OF LAST CDC 115	WORK/PROGRAM ASSIGNMENT

I request that a Family Visit be scheduled for my family members as listed below: (Limit of 3 unless minor is under 18 month old)

VISITOR'S NAME (first and last)	AGE	RELATIONSHIP	
ADDRESS (street, city, state, & zip)			TELEPHONE NUMBER ()
VISITOR'S NAME (first and last)	AGE	RELATIONSHIP	
ADDRESS (street, city, state, & zip)			TELEPHONE NUMBER ()
VISITOR'S NAME (first and last)	AGE	RELATIONSHIP	
ADDRESS (street, city, state, & zip)			TELEPHONE NUMBER ()
VISITOR'S NAME (first and last)	AGE	RELATIONSHIP	
ADDRESS (street, city, state, & zip)			TELEPHONE NUMBER ()

I understand that my Correctional Counselor will verify these relationships and that a certified proof of marriage or other relationship must be presented at the time of the visit. I understand and agree to the following requirements for participation in the Family Visiting Program.

1. That receipt of a serious rules violation during the waiting period will cancel any scheduled visit pending.
2. That falsification of any information will cause my Family Visiting privileges to be cancelled and will result in disciplinary action.
3. That it is required that I submit to an unclothed body search and I may be required to submit to a urine specimen at the end of my visit.
4. That my visitors are subject to search of their person(s), property, and vehicles.
5. That my visitors and I must abide by the rules posted in the Family Visiting Unit.
6. That I am responsible to ensure the Family Visiting Unit is left in clean condition.
7. That I am responsible for any damage to the unit and/or equipment incurred during my visit.
8. That a Family Visit may be terminated at anytime for reasons of security of the institution.

I request a REGULAR FAMILY VISIT

My family is available to visit:

ANYTIME WEEKDAYS WEEKENDS

FORGERY, FALSIFICATION OR ALTERATION OF ANY PORTION OF THIS APPLICATION MAY RESULT IN DISCIPLINARY

Inmate's Signature: _____ Date: _____

THE AREA BELOW TO BE COMPLETED BY CORRECTIONAL COUNSELOR

I have verified the above, including family relationship, privilege group, disciplinary record, and status as approved visitors in accordance with the Institutional Visiting Procedures. Changes in an inmate's eligibility will be reported to the Family Visiting Coordinator prior to the visit.

This visit is approved. This visit is denied for one or more of the following reasons:

- _____ Inmate is not eligible for Family Visiting [Per CCR Section 3174(e)].
- _____ Records indicate inmate and proposed visitor are not legally married.
- _____ The Visitor(s) requested is (are) not an approved visitor(s).
- _____ Inmate or visitor requested is on non-contact visiting status.
- _____ Other _____

Counselor's Signature: _____ Date: _____

Facility Captain's Signature: _____ Date: _____

California Men's Colony - Family Visiting Worksheet

Name: _____ CDCR# _____ Release Date: _____	
Work/Program Assignment - Effective: _____ WG/PG: _____ Custody: _____	
Inmate's Information	Comments
Family Relationship	<input type="checkbox"/> Marriage Certificate in C-File <input type="checkbox"/> Need Copy of Marriage Cert
Pending CDCR 115(s)	
Escape History	
Visiting Restriction(s)	
Commitment Offence and past behavior which may pose a threat to family members	
CCR 3177(b)(2) Precluding Factors	⇒ Designated a condemned inmate ⇒ Sentenced to life without parole ⇒ Sentenced to life, without a parole date established by the BPT ⇒ Designated Close A or Close B ⇒ Assigned to an Administrative Segregation Unit ⇒ Assigned to Security Housing Unit ⇒ Assigned to a Reception Center ⇒ Designated "C" Status ⇒ Guilty of one or more Div A or Div B RVR Offenses within past 12 months ⇒ Guilty of narcotic trafficking while incarcerated in a state prison
Current Case Factors regarding family problems, mental problems, which could affect inmate's current stability	
Medical concerns, i.e., HIV + attach paperwork for HIV +	
Please Make Sure All Factors Have Been Verified	

Completed by and Date _____

FAMILY VISITING INVENTORY LIST

Name (Last, First):	CDC#:	Housing:	Date:
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AUTHORIZED	LIST	ITEM:	INVENTORY	RETURN (X)
1		RAZOR - BLADE		
1		TOOTHBRUSH		
1		COMB		
1		HAIR BRUSH		
2		DRAWERS (UNDERWEAR)		
2		<input type="checkbox"/> T-SHIRT OR <input type="checkbox"/> UNDERSHIRTS		
1 Pair		SLIPPERS / SHOWER SHOES		
1		JACKET (STATE-ISSUED ONLY)		
2 Pair		SOCKS		
2		HANDKERCHIEFS		
1		RELIGIOUS MEDAL <input type="checkbox"/> YELLOW METAL <input type="checkbox"/> WHITE METAL		
1		WEDDING BAND <input type="checkbox"/> YELLOW METAL <input type="checkbox"/> WHITE METAL		
1 Pair		PRESCRIPTION EYE GLASSES <input type="checkbox"/> CLEAR <input type="checkbox"/> TINTED <input type="checkbox"/> PHOTOGRAY		
1		EYEGLASS CASE		
1 Pair		SHOES (STATE-ISSUED ONLY)		
1 Pair		BLUEJEANS (STATE-ISSUED ONLY)		
1		BLUE CHAMBRAY SHIRT (STATE-ISSUED ONLY)		
1		BELT (STATE-ISSUED ONLY)		

INMATE CANTEEN ITEMS (FACTORY SEALED/UNOPENED)

12		CANNED SODA OR MILK COMBINED		
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IMPORTANT! ENSURE YOU ARE IN POSSESSION OF YOUR I.D. CARDS WHEN REPORTING FOR FAMILY VISITS.

***NO INMATE CANTEEN ITEMS MAY BE RETURNED FROM THE FAMILY VISITS.**

Only the above listed items are authorized to be taken out to a Family Visit. No exceptions with written approval of the Associate Warden, Program Services, or higher authority.

INMATE SIGNATURE

INVENTORYING OFFICIER