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GENERAL INCIDENT CATEGORY: ASSAULT (01)

DEFINITIONS: Assault shall mean an intentional or reckless infliction of physical injury upon another person.

Treatment shall mean any specific medical procedure used for the cure or improvement of a disease, injury or pathological condition (e.g. stitches, medicine, splints, sterile dressings, injections). Examination, evaluation (X-rays, blood tests, etc.) and diagnosis do not constitute treatment.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate/Inmate Assault - the perpetrator of the assault is one inmate and victim of the assault is one or more inmates, or the inmate perpetrator and inmate victim are not clearly distinguishable

02. Inmate/Personnel Assault - the perpetrator of the assault is one or more inmates and victim is one or more facility personnel

03. Inmate/Visitor Assault - the perpetrator of the assault is one or more inmates and the victim is one or more visitors

04. Personnel/Inmate Assault - the perpetrator of the assault is one or more facility personnel and the victim is one or more inmates

05. Visitor/Inmate Assault - the perpetrator of the assault is one or more visitors and the victim is one or more inmates

06. Inmate/Inmate Group Assault/Gang Assaults - The perpetrators of the assault are two or more inmates and the victim of the assault is one or more inmates

07. Visitor Assault - an assault on visitor(s) by one or more personnel, visitor, inmate

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours:

1. Any assault requiring treatment to one or more inmates, personnel, or visitors at the facility medical unit, hospital or emergency room following the incident
2. Any assault which was terminated by the use of following:

   a. Impact Weapons
   b. Mechanical restraints other than for routine inmate movement
   c. Electronic devices
   d. Chemical Agents
   e. Canines
   f. Firearms
   g. Medication ordered by a physician or nurse practitioner as an emergency intervention

3. Any Inmate/Inmate Group Assault/Gang Assault
GENERAL INCIDENT CATEGORY: SEX OFFENSE (02)

DEFINITION: Sex Offense shall mean conduct constituting an offense as prescribed by Article 130 of the New York State Penal Law, including, but not limited to, any degree of rape, criminal sexual act, forcible touching, sexual abuse or sexual misconduct.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate/Inmate Sex Offense - both the perpetrator and the victim are inmates

02. Inmate/Personnel Sex Offense - the perpetrator is an inmate and the victim is an employee, as that term is defined by Penal Law §130.05(3) (f)

03. Inmate/Visitor Sex Offense - the perpetrator is an inmate and the victim is a visitor

04. Personnel/Inmate Sex Offense - the perpetrator is an employee, as that term is defined by Penal Law §130.05(3) (f), and the victim is an inmate

05. Visitor/Inmate Sex Offense - the perpetrator is a visitor and the victim is an inmate

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours of occurrence or initiation of an internal and/or criminal investigation into an alleged sex offense.
GENERAL INCIDENT CATEGORY: CONTAGIOUS ILLNESS (03)

DEFINITION: Contagious illness shall mean an infectious illness or disease capable of being transmitted by environmental condition or human contact.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate Contagious Illness - only inmates have contracted the illness
02. Personnel Contagious Illness - only personnel have contracted the illness
03. Group Contagious Illness - a significant number of inmates and personnel have contracted an illness as a probable result of being exposed to the ailment (e.g., flu, measles, mumps, hepatitis, meningitis)

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. All physician-confirmed cases of communicable diseases listed in 10 NYCRR section 2.1 and reportable to the NYS Department of Health pursuant to 10 NYCRR section 2.10

2. Any quarantine of a facility or portion of a facility by a physician or local, state or federal department of health or other agency

3. Any removal or relocation of an inmate or staff member for quarantine purposes by a physician or local, state or federal department of health or other agency
GENERAL INCIDENT CATEGORY: CONTRABAND (04)

DEFINITION: Contraband shall mean any article or substance, the possession of which would constitute an offense under the New York State Penal Law or that is specifically prohibited by facility regulations.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate-Introduced Contraband - when one or more inmates are found to be in possession of contraband, his/her ownership of it has been confirmed, or he/she attempts to bring it into the facility

02. Personnel-Introduced Contraband - when one or more personnel provides, or attempts to provide, contraband to one or more inmates

03. Visitor-Introduced Contraband - when one or more visitors deliberately bring contraband into the facility and provide, or attempt to provide, it to one or more inmates and/or personnel

04. Unknown Source-Introduced Contraband - when ownership or responsibility for contraband found within the facility cannot be determined or presumed. Following an arrest, an update shall be submitted within 14 days

05. Arrest of Security Staff/Civilian Staff/Volunteer Staff - when any person of authority within the facility is arrested and charged with violating sections 205.20 or 205.25 of the Penal Law

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours.

1. All discoveries of the following contraband introduced by an inmate or visitor after the admission procedure has been completed

   a. Any deadly weapon or dangerous instrument, as defined in Article 10 of the New York State Penal Law

   b. Ammunition
3. All discoveries of the following contraband introduced by an unknown source

a. Any deadly weapon or dangerous instrument, as defined in Article 10 of the New York State Penal Law

b. Ammunition

c. Explosive substances and/or fireworks

d. Quantities of drugs, legal or illegal, the possession of which would constitute an offense under the Penal Law, or which violates facility policy and procedure.

e. Any quantity of alcohol

f. Any other contraband capable of endangering the safety or security of the facility or any person therein
GENERAL INCIDENT CATEGORY: DEATH (05)

DEFINITION: Death shall mean the cessation of a person’s life.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate Death - the deceased is an inmate
02. Personnel Death - the deceased is a facility personnel member
03. Visitor Death - the deceased is a visitor at the facility
04. Newborn/Infant Death - the death or stillbirth of a child of an inmate

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification to the Commission (Form M 187 Section I) shall be done within 6 hours via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission. Form M 187 (Sections I & II) shall be submitted within 10 days of the pronouncement of death via telephonic facsimile, electronic or digitally transmitted data in a manner prescribed by the Commission.

1. All inmate deaths

Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. All personnel deaths

2. All visitor deaths, which occur as a result of an act by one or more inmates or by personnel, while on facility property, or in a temporary SCOC-approved facility, hospital or court detention area

3. Any stillbirth, or perinatal death, or death of an infant who has been housed with its mother at the facility pursuant to Correction Law 611
GENERAL INCIDENT CATEGORY: MAJOR MAINTENANCE/SERVICE DISRUPTION (06)

DEFINITION: Major maintenance/service disruption shall mean an occurrence which disrupts normal facility operations, or the delivery of inmate services required by Chapter I of of Subtitle AA, Title 9 NYCRR (e.g., medical care, food services), or causes a substantial breakdown in the functioning of essential facility utilities and/or infrastructure. This does not include brief power outages scheduled by utility companies for routine maintenance or repair.

REPORTABLE INCIDENT CATEGORIES:

01. Major Maintenance/Service Disruption

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone immediately, and form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours.

1. All major maintenance/service disruptions that result in one or more of the following:
   a. physical injury requiring one or more inmates, personnel or visitors to be admitted to a hospital
   b. essential services or essential facility utilities or infrastructure interruptions extending beyond 8 hours in duration
GENERAL INCIDENT CATEGORY: DISTURBANCES (07)

DEFINITION:  
*Major disturbance* shall mean an occurrence simultaneously and collectively caused by a group of inmates or other individuals which results in a temporary loss of control of any correctional facility, or portion thereof, by the established authority.

*Loss of control* shall mean a disruption of routine facility activities and functions causing a lockdown of any part of a correctional facility, the vacating of mandated posts, or the necessity of additional responding staff to quell the disruption.

*Minor disturbance* shall mean an occurrence, caused by inmates or other individuals acting in concert, which does not result in a loss of control by the established authority, but may threaten the safety, security and good order of a correctional facility (not an assault).

*Treatment* shall mean any specific medical procedure used for the cure or improvement of a disease, injury or pathological condition (e.g., stitches, medicine, sterile dressings, and splints) examination; diagnosis and evaluation (X-rays, blood test, etc.) do not constitute treatment.

*Individual inmate disturbance* shall mean an occurrence during which an individual inmate exhibits behavior that disrupts the normal operation of a correctional facility.

REPORTABLE INCIDENT CATEGORIES:

01. Major Disturbance

02. Minor Disturbance

03. Individual Inmate Disturbance

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone *immediately* and form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. Any major disturbance

Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours
1. All minor disturbances which result in one or more of the following:
   
a. Treatment provided to one or more inmates, personnel or visitors at the facility medical unit, hospital or emergency room
   
b. Property damage that limits the use of a correctional facility, or portion thereof (must involve the closing of more than one cell)
   
c. Intervention requiring the use of:
      
      (1) Impact Weapons  
      (2) Electronic devices  
      (3) Chemical Agents  
      (4) Canines  
      (5) Firearms  
      (6) Medication ordered by a physician or nurse practitioner as an emergency intervention

2. All individual inmate disturbances that result in one or more of the following:
   
a. Treatment provided to one or more inmates, personnel or visitors at the facility medical unit, hospital or emergency room
   
b. Intervention requiring the use of:
      
      1. Impact Weapons  
      2. Mechanical restraints other than for routine inmate movement  
      3. Electronic devices  
      4. Chemical Agents  
      5. Canines  
      6. Firearms  
      7. Medication ordered by a physician or nurse practitioner as an emergency intervention
GENERAL INCIDENT CATEGORY: NATURAL/CIVIL EMERGENCY (08)

DEFINITION: *Natural or civil emergency* shall mean an occurrence, originating outside the facility, of a serious and urgent nature by natural forces or human action resulting in damage, loss, destruction, or injury that requires immediate attention and poses a direct threat to the safety, security, and good order of the facility (e.g., explosions, weather, bomb threats, gas leaks, aircraft accidents, nuclear accidents, assaults on the facility, fire originating outside the facility proper, etc).

REPORTABLE INCIDENT CATEGORIES:

01. Natural/Civil Emergency
02. A declared county state of emergency
03. Evacuation of any portion of a correctional facility

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone immediately and Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. All natural/civil emergencies
2. All declared county state of emergencies
3. Evacuation of any part of the facility
GENERAL INCIDENT CATEGORY: ESCAPE / ABSCONDENCES / ERRONEOUS RELEASES (09)

DEFINITIONS:   

Escape shall mean conduct constituting an offense as prescribed by sections 205.05, 205.10 and 205.15 of the New York State Penal Law.

Attempted escape shall mean conduct constituting an attempt to commit an offense as prescribed by sections 205.05, 205.10 and 205.15 of the New York State Penal Law.

Abscondence shall mean conduct constituting an offense as prescribed by sections 205.16, 205.17, 205.18 and 205.19 of the New York State Penal Law.

Erroneous release shall mean the discharge of an inmate in violation of a lawful securing order or commitment.

REPORTABLE INCIDENT CATEGORIES:

01. Escape/County Supervision - the escape of an inmate in the custody of a county sheriff's department or county department of correction personnel

02. Escape/Other Agency Supervision - the escape of an inmate while under the custody of an agency other than the one to which he/she is committed (e.g., NYS Police, Municipal Police, Parole, Probation, etc.)

03. Attempted Escape

04. Abscondence

05. Erroneous Release

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone immediately and Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. Any escape

2. Any capture/return to custody
Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. Any attempted escape
2. Any abscondence
3. Any erroneous release
4. A capture/return to custody following an abscondence or erroneous release
GENERAL INCIDENT CATEGORY: FIRE (10)

DEFINITION:  *Arson* shall mean the intentional damaging of property by intentionally starting a fire or causing an explosion.

REPORTABLE INCIDENT CATEGORIES:

01. Arson Fire

02. Non-Arson Fire

03. Unknown Origin

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone *immediately* and Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours.

1. All fires occurring within a correctional facility resulting in the following:
   
a. Treatment provided to one or more inmates, personnel or visitors at the facility medical unit, hospital or emergency room

b. A portion of the facility is deemed unusable by the appropriate authority

c. Transfer of inmates within the facility

d. Transfer of inmates to another jail. (Requires Substitute Jail Order)
GENERAL INCIDENT CATEGORY:   DISCHARGE OF FIREARM (11)

DEFINITIONS:  *Discharge* shall mean the ballistic expulsion of any projectile from a firearm.

*Firearm* shall mean any pistol or revolver, a shotgun having one or more barrels, a rifle having one or more barrels, any weapon made from a shotgun or rifle whether through alteration or modification, a machine gun or an assault weapon.

REPORTABLE INCIDENT CATEGORIES:

01. **Firearm Discharge**

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone *immediately* and Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. Any firearm discharge that occurs:

2. While one or more personnel are performing official facility-related duties, except those occurring during practice or qualification procedures

3. All other firearms discharged on facility property
GENERAL INCIDENT CATEGORY: GROUP ACTION (12)

DEFINITION: Inmate group action shall mean a temporary stoppage of established activities by two or more inmates acting in concert, for the purpose of disrupting the operation or good order of the facility or obtaining a change in the operation or services provided by a facility.

Personnel group action shall mean any action or inaction by two or more employees that interferes with, or has the potential to threaten, the routine operation of a correctional facility including, but not limited to, a temporary stoppage or slow-down of established job activities.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate Group Action
02. Personnel Group Action

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone within 24 hours, and Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission.

1. Any inmate group action

Initial notification via telephone immediately and Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours.

1. A personnel group action that threatens the safety, security and good order of the facility
2. A personnel group action that results in the facility being unable to maintain minimum staffing levels as determined by the NYS Commission of Correction.
3. A personnel group action that affects scheduled inmate programs and/or services (rescheduled, cancelled or otherwise modified from routine provision)
GENERAL INCIDENT CATEGORY: HOSTAGE SITUATION (13)

DEFINITION: Hostage situation shall mean the unlawful abduction or restraint of one or more individuals by another.

REPORTABLE INCIDENT CATEGORIES:

01. Hostage Situation

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Initial notification via telephone immediately and Form SCOC-011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours

1. Any hostage situation, regardless of duration, which occurs:

   a. within a correctional facility, an SCOC approved temporary facility, hospital prison ward or court detention cell

   b. when an involved inmate is outside the confines of a correctional facility for any reason, including, but not limited to court, work detail, medical or mental health treatment, transport to another facility, etc.
GENERAL INCIDENT CATEGORY: PHYSICAL INJURY/ HOSPITALIZATION (14)

DEFINITIONS: Physical injury or injury shall mean an impairment of physical condition or substantial pain.

Attempted suicide shall mean an act during which an individual attempts to terminate one's own life by inflicting life-threatening injury upon oneself, or by placing oneself in a life-threatening situation, (e.g., by hanging, setting oneself on fire, ingesting poisonous chemicals or drugs, inflicting lacerations, etc.).

Self-inflicted injury shall mean an act by which an individual intentionally injures oneself which is not considered life threatening and does not represent a highly lethal attempt to terminate one's life. This shall include a refusal to consume food or fluids for a period of forty eight (48) consecutive hours.

Accidental injury shall mean an injury resulting from an unexpected occurrence with no indication of direct intentional involvement of the victim or any other individual.

Treatment shall mean any specific medical procedure used for the cure or improvement of a disease, injury or pathological condition (e.g. stitches, medicine, splints, sterile dressings, injections). Examination, evaluation (X-rays, blood tests, etc.) and diagnosis do not constitute treatment.

REPORTABLE INCIDENT CATEGORIES:

01. Inmate Attempted Suicide
02. Inmate Self-Inflicted Injury
03. Inmate Accidental Injury
04. Personnel Accidental Injury
05. Hospital Admission of Inmate
06. Release of Hospitalized Inmate From Custody

COMMISSION OF CORRECTION REPORTING REQUIREMENTS:

Form SCOC- 011 via telephonic facsimile, electronic or digitally transmitted in a manner prescribed by the Commission within 24 hours.
1. Any attempted suicide by an inmate

2. Any self-inflicted injury requiring an inmate to receive medical treatment

3. Any accidental injury requiring an inmate, employee, volunteer or visitor to be admitted to a hospital or facility medical unit as an inpatient

4. The custodial release of an inmate, while such inmate is admitted to, or otherwise presented for treatment in, a hospital due to:
   a. the revocation or amendment of a court securing order
   b. the posting of bail
   c. the expiration of a sentence

5. Transfer or relocation of an inmate to a hospital, as defined by Article 28 of the Public Health Law, for the residential care, medical management or as an inpatient for a period of 24 hours or longer