



ARKANSAS DEPARTMENT OF CORRECTIONS  
DIVISION OF CORRECTION  
OFFICE OF THE DIRECTOR  
DEXTER PAYNE  
6814 Princeton Pike  
Pine Bluff, AR 71602



## ADMINISTRATIVE DIRECTIVE

**SUBJECT: Movement of Pregnant Women**

**NUMBER: 2024-10**

**SUPERSEDES: 2019-29**

**APPLICABILITY: Transportation Officers and all facilities housing female inmates**

**REFERENCE: Arkansas Code Ann. § 12-29-804; AR 829 Prenatal Care of Pregnant Inmates or Residents**

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**APPROVED: Original signed by Dexter Payne**

**EFFECTIVE DATE: 03/05/2024**

### **I. POLICY:**

It is the policy of the Arkansas Division of Correction (ADC) to ensure that the movement of pregnant women is done in a humane manner safeguarding the health of the woman and the fetus without compromising the ADC's responsibility to public safety.

### **II. PURPOSE**

Women in labor often experience sudden pain during contractions, need to support their abdomens during movement, and are easily thrown off-balance due to the pronounced shift in weight. Therefore, it is important that they be able to shift their posture to ease pain and work with the contraction. They also need to support their abdomens to cushion bumps in transportation and facilitate changes in posture and position. They need their legs and hands free when standing to maintain balance and to catch themselves without falling on their abdomens whenever they are required to walk.

### **III. DEFINITIONS:**

- A. Labor. means the period of time before a birth during which regular contractions of the uterus result in dilation and effacement of the cervix;
- B. Post-partum. means the eight (8) week period following delivery, unless a longer period is determined to be necessary by a health care professional.

- C. Other health professional. means a person who performs clinical duties, such as health care practitioners, nurses, licensed professional counselors, social workers, and emergency medical technicians in accordance with each health care professional's scope of training and applicable licensing, registration, certification, and regulatory requirements; and
- D. Restraints. means a physical restraint or mechanical device used to control the movement of an inmate's body or limbs.

#### IV. PROCEDURE

- A. Pregnant women will be reviewed by the Classification Committee for Class I-B trustee status upon completion of their initial assignments. Class I-B status need not be granted at that time if doubts remain about their trustworthiness.
- B. All of the usual requirements for Class I-B status must be met, except for the availability of an I-B (outside the fence) job assignment. Medical staff shall be consulted for restrictions on activities.
- C. Any inmate who is granted I-B status will be allowed movement outside the facility without restraints. The supervision of the inmate by a Correctional Officer is still required. The officer shall carry the security equipment usually carried when supervising inmates.
- D. The inmate will be medically unassigned for a six (6) week period following delivery. The inmate will return to classification after the medical provider has determined that she is fit to be assigned to a job.
- E. Transporting pregnant inmates and restraint of pregnant inmates will be as follows:
  - 1. Upon determination by medical staff that the inmate is in active labor, the obstetrician will be contacted, per protocol or prior agreement, and the inmate will be transported immediately to the hospital unless the obstetrician instructs otherwise.
  - 2. To the extent possible, the inmate will be moved by wheelchair from the facility to the transport vehicle and from the transport vehicle to the clinic or hospital.
  - 3. Under no conditions will any type of restraint circling the abdomen be used.
  - 4. ADC shall not place an inmate verified to be pregnant, in labor, or in recovery (six (6) week period following delivery) in restraints unless:
    - a. The inmate presents a substantial flight risk; or

- b. A medical or security circumstance dictates that the inmate be restrained to ensure the safety and security of:
    - i. The inmate, or child;
    - ii. The staff;
    - iii. Other inmates; or
    - iv. The public.
- 5. If restraints are required, the physician, nurse, or other health professional providing inmate obstetric care shall have final decision-making authority on the use of restraints and may request that the inmate not be restrained.
- 6. If restraints are used on a pregnant inmate under section IV.E.4:
  - a. Only soft restraints may be used.
  - b. Leg or waist (circling the abdomen) restraints shall not be used on any inmate who is in labor.
  - c. Leg restraints shall not be used on a pregnant inmate who is not in a wheelchair, bed, or gurney.
  - d. Soft hand restraints may be used if the inmate is not actively experiencing contractions (e.g. travel for a clinic visit to the obstetrician). The restraints shall always be forward-facing, designed to restrain the person's hands in front of the person to protect the person and others.
  - e. When the inmate is on a bed or gurney, one hand or one leg may be restrained to the bed or gurney, unless removal of the restraint is requested by medical staff. The inmate should be given the choice of hand or leg restraints unless good security practice dictates otherwise.
- 7. All restraints will be removed when the inmate is in the labor and delivery room or when anesthesia is initiated. At that point, medical restraints may be ordered by the attending physician should they be seen as medically indicated.
- 8. The supervising officer will not leave the presence of an unrestrained inmate except during delivery or if requested to do so by medical staff during the performance of other medical procedures. At such times, the officer will remain in the immediate vicinity, accessible to hospital staff as needed.

- F. Correctional Officers are expected to always use good judgment. Circumstances not anticipated in this Administrative Directive may require adjustments in the procedures above. Should deviation from this policy be required, the Correctional Officer must contact the Warden or Duty Warden as soon as the situation necessitating the adjustment has been adequately addressed. The Warden or Duty Warden will notify the Administrator of Medical Services who will review the action to determine whether better alternatives or policy changes are needed.
- G. The facility shall make written findings within ten (10) days regarding the extraordinary medical or security circumstance that dictated the inmate to be restrained. The written findings shall be maintained for at least five (5) years.
- H. If restraints are used during labor, the duty warden should be notified and shall notify the Medical Administrator and duty director who will report the use of restraints during labor to the Secretary of Corrections who will notify the Board of Corrections and the Attorney General.



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## ADMINISTRATIVE DIRECTIVE

**SUBJECT:** Movement ~~and Restraint~~ of Pregnant Women

**NUMBER:** ~~19-29~~ 2024-

**SUPERSEDES:** ~~13-60~~ 2019-29

**APPLICABILITY:** Transportation Officers and  
all facilities housing female inmates-

**REFERENCE:** Arkansas Annotated Code 12-29-804; AR 829 Prenatal Care of Pregnant Inmates or Residents AR 829

Arkansas Code Ann. §§ 12-32-101, 102, and 103

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Adult Correctional Institutions ACA Standards

**APPROVED:-** Original signed by Dexter Payne

**EFFECTIVE DATE:** 9/9/2019

### I. POLICY:

It is the policy of the Arkansas Division of Correction (ADC) To ensure that the movement of pregnant women outside of a correctional facility is done in a humane manner safeguarding the health of the woman and the fetus without compromising the Division of Correction ADC's responsibility to public safety.

### II. PURPOSE

Women in labor often experience sudden pain during contractions, need to support their abdomens during movement, and are easily thrown off-balance due to the pronounced shift in weight. Therefore, it is important that they be able to shift their posture to ease pain and work with the contraction. They also need to support their abdomens to cushion bumps in transportation and facilitate changes in posture and position. They need their legs and hands free when standing to maintain balance and to catch themselves without falling on their abdomens whenever they are required to walk.

### III. DEFINITIONS:

- A. Labor.~~“Labor.”~~ means the period of time before a birth during which regular contractions of the uterus result in dilation and effacement of the cervix;
- ~~B. “Post-partum.” means; as determined by the physician of the inmate, the thirty-day period following delivery of a child; the eight (8) week period following delivery, unless a longer period is determined to be necessary by a health care professional.~~
- ~~B.~~
- C. “Other health professional.” means a person who performs clinical duties, such as health care practitioners, nurses, licensed professional counselors, social workers, and emergency medical technicians in accordance with each health care professional’s scope of training and applicable licensing, registration, certification, and regulatory requirements; and
- D. “Restraints.” means a physical restraint or mechanical device used to control the movement of an inmate's body or limbs.

### IV. PROCEDURE

- A. Pregnant women will be reviewed by the Classification Committee for Class I-B trust~~tee~~ status upon completion of their initial assignments. Class I-B status need not be granted at that time if doubts remain about their trustworthiness.
- B. All of the usual requirements for Class I-B status must be met, except for the availability of ~~a~~ an I-B (outside the fence) job assignment. Medical staff ~~should~~ shall be consulted for restrictions on activities.
- C. Any inmate who is granted I-B status will be allowed movement outside the facility without restraints. The supervision of the inmate by a Correctional Officer is still required. The officer will ~~shall carry~~~~be expected to have~~ the security equipment usually carried when supervising inmates.
- D. The inmate will be medically unassigned for a ~~thirty-days~~ six (6) week period following delivery. The inmate will return to classification after the medical provider has determined that she is fit to be assigned to a job.

E. Transporting pregnant inmates and restraint of pregnant inmates will be as follows:

1. Upon determination by medical staff that the inmate is in active labor, the obstetrician will be contacted, per protocol or prior agreement, and the inmate will be transported immediately to the hospital unless the obstetrician instructs otherwise.
2. To the extent possible, the inmate will be moved by wheelchair from the facility to the transport vehicle and from the transport vehicle to the clinic or hospital.
3. Under no conditions will any type of restraint circling the abdomen be used.
4. ADC shall not place an inmate verified to be pregnant, in labor, or in ~~post-partum~~-recovery (~~thirty-days~~six (6) week period following delivery) in restraints unless:
  - a. The inmate presents a substantial flight risk; or
  - b. A medical or security circumstance dictates that the inmate be restrained to ensure the safety and security of:
    - i. The inmate, or child;
    - ii. The staff;
    - iii. Other inmates; or
    - iv. The public.

5. If restraints are required, the physician, nurse, or other health professional providing inmate obstetric care shall have final decision-making authority on the use of restraints and may request that the inmate not be restrained.

5.

6. If restraints are used on a pregnant inmate under section IV.E.4:
  - a. Only soft restraints may be used.
  - b. Leg or waist (circling the abdomen) restraints shall not be used on any inmate who is in labor.
  - c. Leg restraints shall not be used on a pregnant inmate who is not in a wheelchair, bed, or gurney.
  - d. Soft hand restraints may be used if the inmate is not actively experiencing contractions (e.g. travel for a clinic visit to the obstetrician). The restraints shall always be forward-facing, designed

to restrain the person's hands in front of the person to protect the person and others.

- e. When the inmate is on a bed or gurney, one hand or one leg may be restrained to the bed or gurney, unless removal of the restraint is requested by medical staff. The inmate should be given the choice of hand or leg restraints unless good security practice dictates otherwise.
  - 7. All restraints will be removed when the inmate is in the labor and delivery room or when anesthesia is initiated. At that point, medical restraints may be ordered by the attending physician should they be seen as medically indicated.
  - 8. The supervising officer will not leave the presence of an unrestrained inmate except during delivery or if requested to do so by medical staff during the performance of other medical procedures. At such times, the officer will remain in the immediate vicinity, accessible to hospital staff as needed.
- F. Correctional Officers are expected to ~~use good judgment at all times~~always use good judgment. Circumstances not anticipated in this Administrative Directive may require adjustments in the procedures above. Should deviation from this policy be required, the Correctional Officer must contact the Warden or Duty Warden as soon as the situation necessitating the adjustment has been adequately addressed. The Warden or Duty Warden will notify the Administrator of Medical Services who will review the action to determine whether better alternatives or policy changes are needed.
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- H. If restraints are used during labor, ~~ADC~~ the duty warden should be notified and shall notify the Medical Administrator and duty director who will report the use of restraints during labor to the Secretary of Corrections who will notify the Board of Corrections ~~and to~~ the Attorney General.