

<p style="text-align: center;"><b>POLICY OF</b></p> <p style="text-align: center;"><b>STATE OF DELAWARE</b></p> <p style="text-align: center;"><b>DEPARTMENT OF CORRECTION</b></p>	<p style="text-align: center;"><b>POLICY NUMBER</b></p> <p style="text-align: center;">14.15</p>	<p style="text-align: center;"><b>PAGE NUMBER</b></p> <p style="text-align: center;">1 of 2</p>
	<p><b>RELATED ACA Standards</b></p> <p>4-4264,4-4315, 4-4316, 4-4320</p>	
<p><b>CHAPTER: 14 FOOD SERVICES</b></p>	<p><b>SUBJECT: ALTERNATIVE MEAL PLAN</b></p>	
<p><b>APPROVED BY THE COMMISSIONER AND EFFECTIVE THIS DATE:</b></p> <p style="text-align: right;"> 07/06/2016</p>		
<p><b>APPROVED FOR PUBLIC RELEASE</b></p>		

**I. AUTHORITY:** 11. *Del. C. 6517, 29 Del. C. 8903*

**II. PURPOSE:** To establish a policy for the use of the Alternative Meal Plan.

**III. APPLICABILITY:** All Department of Correction (DOC) employees, volunteers, medical contractors and all offenders under the custody and supervision of the DOC.

**IV. DEFINITIONS:**

A. **Delaware Automated Correctional System (DACS)**-The Delaware Department of Correction offender management system.

B. **Alternative Meal-** A nutritionally adequate loaf-style form of nourishment prepared following the recipe listed in DACS; designed to be consumed without the need for utensils, which is served as an alternative to regular meals.

C. **Alternative Meal Report-** A document describing the disruptive behavior, date and time of recommendation, medical consultation, review and approval of the Warden or designee, start date of Alternative Meal Plan, duration of first occurrence, duration of second occurrence (if necessary), and duration of subsequent occurrences (if necessary).

D. **Disruptive behavior-** Includes, but is not limited to: misuse of food, throwing food, throwing utensils, throwing of body waste, refusal to return utensils, arson, cell flooding, tampering with the chow slot.

**V. POLICY:** The Department will provide a nutritionally adequate meal for offenders who fail to respond to appropriate correctional intervention and have failed to modify their behavior through other means. The Alternative Meal Plan shall not be used as a disciplinary sanction and shall only be ordered on an individual basis. The Alternative Meal Plan may be used to manage disruptive behaviors which threaten the safety and security of the institution, staff members, and other offenders.

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<b>SUBJECT: Alternative Meal Plan</b>		

- A. Offenders engaged in disruptive behavior may be reviewed for placement on the Alternative Meal Plan.
- B. Staff members who observe the disruptive behavior shall report the behavior to the Shift Commander and submit an incident report.
- C. The Shift Commander shall utilize the Alternative Meal Report (Attachment 1) for recommendation of placing the offender on the Alternative Meal Plan.
- D. The Medical Department shall review the Alternative Meal Plan recipe to ensure that no allergic reactions or other medical conditions would prohibit the use of the Alternative Meal. The recipe will only be modified based on the recommendation of the Medical Department.
- E. The Warden or designee shall be the final approving authority.
- F. The Medical Department and Warden or designee shall review all Alternative Meal Plan orders weekly.
- G. The Warden or designee shall notify the Food Service Department that an offender requires the Alternative Meal.
- H. The Food Service Department shall prepare the Alternative Meal according to the recipe in DACS without variation, unless directed by the Medical Department.
- I. For a first occurrence, the Alternative Meal Plan shall be used for a maximum of three (3) consecutive days (nine {9} meals).
- J. For a second occurrence, or subsequent occurrence, the Alternative Meal Plan shall be ordered for a maximum of seven (7) consecutive days (twenty-one {21} meals).
- K. The Alternative Meal shall be served for the entire period ordered, unless otherwise determined by the Warden or designee.
- L. The substitution period shall not exceed seven (7) consecutive days.
- M. Without further incident, the offender shall automatically be removed from the meal program upon the time period expiring.
- N. Food shall not be withheld or used as a disciplinary sanction under any circumstance.

**(Attachment 1)**

Alternative Meal Report

Inmates Name: \_\_\_\_\_ SBI: \_\_\_\_\_ Building: \_\_\_\_\_

1. Statement of behavior.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommended:

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Shift Commander: \_\_\_\_\_

2. Medical Consultant:

Yes \_\_\_ No \_\_\_ is there any medical reason to terminate placement on the Alternative Meal Plan? If yes attach documentation.

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Reported by: \_\_\_\_\_  
Physician

3. Warden/Designee Review:

Recommended for Meal Plan

\_\_\_\_ Approved  
\_\_\_\_ Disapproved

Date of Review: \_\_\_\_\_ Warden/Designee Signature: \_\_\_\_\_

Meal Plan to start \_\_\_\_\_

- First occurrence-three days (nine meals)
- Second occurrence-seven days (21 meals)
- Subsequent occurrences – seven days (21 meals) with the option of and extension in accordance with Standard Operating Procedure \_\_\_\_\_.

