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# Strategic Closure Plan for Minnesota Correctional Facility - Stillwater

Statutory Compliance Under Minnesota Statute § 241.021, subd. 3a(k)

July 2025 Submission to the Minnesota State Legislature

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This report can be provided in another format upon request.

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## Purpose

This document is submitted in fulfillment of the statutory requirement set forth in Minn. Stat. § 241.01, subd. 3a(k), which mandates that the Commissioner of Corrections provide a written report to the Legislature containing specific, prescribed content whenever the Department of Corrections (DOC) is considering the closure of a facility.<sup>1</sup>

During the 2025 legislative session, Minnesota Correctional Facility (MCF)-Stillwater was identified for a phased closure to consolidate the state's prison facilities to enhance the DOC's economic efficiency, end state investments into the crumbling infrastructure at MCF-Stillwater, and minimize the ongoing health and safety concerns the facility presents to both staff and the incarcerated population. This was passed through the 2025 Public Safety and Judiciary Budget and Policy Omnibus Bill.

The scope of this plan reflects the statutory requirements, specifically how the DOC will:

1. Minimize staff layoffs;
2. Maximize opportunities for staff transfer to vacant positions in other correctional facilities;
3. Engage staff, labor unions representing employees at the facility, and public officials from local units of government impacted by the facility closure;
4. Identify and minimize potential adverse impacts on incarcerated individuals;
5. Minimize disruptions to conditions of confinement, rehabilitative programming, educational opportunities, medical and mental health care, family visitation, and case planning; and
6. Prioritize access to services that support rehabilitation and successful reentry across all state correctional facilities.

This plan will be delivered to the chairs and ranking minority members of the Minnesota Senate and House of Representatives committees with jurisdiction over public safety policy and finance.

## Minimizing Staff Layoffs

The DOC is committed to minimizing layoffs throughout the phased closure of MCF-Stillwater. Key strategies will include:

- **Phased population reduction to allow attrition:** The DOC's phased reduction of the incarcerated population by approximately 50% during Phase 1 enables a corresponding reduction in staffing needs through natural attrition, such as retirements, resignations, and

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<sup>1</sup> The total cost of salaries, printing, and supplies incurred in the development and preparation of this report was approximately \$2,338 (reported as required by Minn. Stat. §3.197).

position transitions. This approach helps avoid abrupt layoffs and aligns reductions with operational needs.

- **Leveraging retirement trends:** The DOC has identified 476 DOC employees statewide who will be eligible for retirement by July 2029.<sup>2</sup> The DOC is tracking retirement eligibility at the facility and agency levels to proactively identify positions that will become vacant to provide opportunity through attrition for Stillwater staff. This analysis helps the agency create individualized reassignment pathways based on forecasted vacancies.
- **MOUs with labor unions to facilitate transfers:** Under existing labor contracts, with the exception of MAPE, each facility is its own seniority unit. This creates significant barriers to transfers without layoffs. The DOC is working with unions to develop Memorandums of Understanding (MOUs) to address this unique closure scenario, including provisions that allow for voluntary transfers and address other considerations. Figure 1 lists the “Meet-and-Confer” meetings held with labor unions to date. These MOUs are central to enabling staff movement in a manner that mitigates and minimizes layoffs.

**Figure 1: Labor Union MOU Meet-and-Confer Meetings**

<b><i>Labor Union</i></b>	<b><i>Meet-and-Confer Meetings</i></b>
<b><i>AFSCME</i></b>	May 22, May 29, June 3, June 10, June 18, July 1, July 16, July 24
<b><i>MAPE</i></b>	June 16, July 1, July 16, July 24
<b><i>MMA</i></b>	June 3, June 10, June 18, July 2, July 15, July 24
<b><i>MNA</i></b>	June 18, July 7, July 21
<b><i>SRSEA</i></b>	June 10, June 18, July 2, July 16, July 28

In consultation with Minnesota Management and Budget (MMB), the DOC explored the use of early retirement incentives. However, their analysis determined that these incentives would not be cost-effective under current conditions and could inadvertently impact staffing at facilities beyond Stillwater.

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<sup>2</sup> Data taken as of June 15, 2025.

## Maximizing Staff Transfers

To maximize the number of MCF-Stillwater staff placed into vacant DOC positions outside that facility, key strategies will include:

- **Developing MOUs:** Because of facility-based seniority units in most labor agreements, MOUs are essential to facilitate a transfer process across facilities. These agreements enable voluntary reassignment, alternative placement pathways, and considerations that would otherwise prevent Stillwater staff from filling positions at other sites.
- **Allowing facilities to temporarily staff at 100%:** DOC's operating budget assumes a 3% vacancy rate, which limits most facilities to maintaining a 97% staffing rate. For the purpose of absorbing Stillwater staff, the DOC is temporarily allowing facilities to hire up to 100% of their staffing complement. As staff attrition naturally occurs over time, these facilities will gradually return to 97% staffing without needing layoffs or creating staffing disruptions.
- **Conducting a staff preference survey:** The DOC surveyed all MCF-Stillwater staff on June 3, 2025, to gather information on desired locations, roles, and transition timing. As of June 18, nearly 75% of employees responded. The results provide valuable insight for employees preferences for the agency to take into consideration for matching employees with anticipated openings.
  - When asked in the survey if the staff member would like to transfer or remain at MCF-Stillwater for as long as possible:
    - 52% answered they would like to stay at MCF-Stillwater for as long as possible and then potentially transfer.
    - 33% answered they would like to transfer as soon as possible.
    - 14% answered they had no preference.
  - When asked in the survey what other Minnesota Correctional Facility they would like to transfer to, below are the following answers for their first choice of facility, which largely correlate with geographic proximity to Stillwater:
    - 55% MCF-Oak Park Heights
    - 25% MCF-Lino Lakes
    - 5% MCF-Red Wing
    - 5% MCF-Rush City
    - 4% MCF-Shakopee

- 4% MCF-Faribault
- 1% MCF-Moose Lake
- 0.2% MCF-Togo
- **Transfer preference considerations:** Staff interested in remaining in the metro area are being prioritized for openings at nearby facilities, including Oak Park Heights (2.5 miles from MCF-Stillwater), Lino Lakes (27.9 miles), and Red Wing (44.5 miles).

## Engagement with Staff, Labor Unions, and Local Units of Government

The DOC's engagement strategy includes proactive, transparent communication with stakeholders:

- **Labor engagement:** The Commissioner, Deputy Commissioners, and Human Resources leadership meet weekly with labor union leadership (AFSCME, MAPE, MMA, MNA, and SREA) to provide updates, problem-solve emerging issues, and build consensus around solutions. Formal meet-and-confer sessions are also being held consistently throughout the summer. These will continue through at least mid- September. **Appendix A** contains a list of all labor union meetings thus far.
- **Staff engagement:** The DOC has established a consistent communication rhythm to ensure internal audiences remain informed and engaged throughout the MCF-Stillwater closure process. Staff receive weekly memos every Tuesday, while incarcerated individuals are provided with updates each Thursday. Friends and family also receive weekly communications on Thursdays, which are posted on the DOC's public website and the DOC's internal information sharing web platform (iShare) for staff awareness.
- **Local government engagement:** Beginning in July 2025, the DOC will initiate quarterly briefings with officials from the cities of Bayport and Stillwater, as well as representatives from the Washington County Board and Sheriff's Office. The first local government briefing – which included elected officials from the cities of Bayport, Stillwater, and Oak Park Heights, as well as Washington County Commissioners, Chiefs of Police, and Sheriff's Office leaders – was presented by Commissioner Schnell and DOC staff on July 16, 2025.
- **Legislative engagement:** Beginning in August 2025, quarterly briefings will be offered to the House and Senate public safety chairs and ranking members, as well as legislators representing the Stillwater district. The goal of these briefings is to provide proactive information to the legislature and ongoing transparency throughout the phased closure process.

## Identifying and Minimizing Potential Adverse Impacts on Incarcerated Individuals

The DOC has implemented and will continue to rely on a multi-layered transfer plan to ensure a safe and respectful transition for incarcerated individuals:

- **Relocation rubric:** A structured relocation rubric has been developed to guide decisions related to transfers. It balances custody classification, treatment needs, safety considerations, and programming access, ensuring transparent and consistent placement decisions. **Appendix B** contains a copy of the rubric and a one-page summary document.
- **Prioritizing care and stability:** Placement decisions are made with an emphasis on preserving:
  - Medical continuity, including access to chronic care and specialized units;
  - Mental health treatment, including therapeutic units and outpatient services;
  - Programming continuity, such as ongoing enrollment in Atlantis substance-use disorder treatment programming or higher education; and
  - Work assignments, such as Institution Community Work Crews (ICWC)
- **Maintaining communication and dignity:** Weekly meetings are held between facility leaders and incarcerated person representatives. These meetings provide real-time updates and offer a structured space for dialogue, which helps reduce anxiety and build cooperation during the transition.

## Minimizing Disruptions to Conditions of Confinement, Rehabilitative Programs, Educational Opportunities, Medical and Mental Health Care, Family Visitation, and Case Planning Services

To preserve stability for incarcerated individuals:

- **Continuity of care:**
  - Medical and mental health records are being proactively transferred to receiving facilities.
  - Placement decisions prioritize keeping individuals with their current care teams when feasible, particularly for those receiving long-term or specialty care.
  - Health screenings and PREA<sup>3</sup> protocols have been modified to ensure continuity of

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<sup>3</sup> The Prison Rape Elimination Act (PREA) requires a number of things occur during transfers, including intake questions.



essential services during intake at new facilities.

- **Preservation of primary rehabilitative programming in Stillwater during the phased closure:**

- Each incarcerated person is assessed using the relocation rubric, which includes aligning transfer destinations with the individual's existing program participation whenever possible.
- The Atlantis substance use disorder treatment program is being expanded from 34 to approximately 90 beds to address demand for treatment across the DOC.
- Earned Living Units are being launched as a new model for positive behavior reinforcement. These units will house individuals with sustained demonstrated success in their incarceration to date.
- Education programs (including higher education and the tattoo program), work assignments (including MINNCOR), transitions support, and other enrichment opportunities (such as the Prison Mirror newspaper) will continue to be offered in Stillwater for participants in the Earned Living Units.
- The four Stillwater Institution Community Work Crews (ICWC) will be relocated to Lino Lakes, ensuring that incarcerated individuals will continue to be able to access these work assignments and build employment skills and that DOC is able to fulfill its commitment to the cities that contract for the work.

- **Prioritize educational opportunities:**

- Each incarcerated person is assessed using the relocation rubric, which includes aligning transfer destinations with the individual's secondary and postsecondary education participation whenever possible.
- Incarcerated individuals in higher education programs who will not be participating in the Earned Living Units are being reviewed for transfer on a case-by-case basis, and any transfers for these individuals will coincide with breaks in academic terms in order to minimize disruption.

- **Structured and safe placement:** Incarcerated person transfers are being conducted in coordinated phases to avoid overburdening transport or intake and housing resources at receiving facilities.

- All placement decisions are made with a focus on maintaining safe staffing levels and appropriate population density at each site. Facilities will be monitored closely to ensure they remain within safe operating capacity, and adjustments will be made as needed. As always, safety and security for staff and the incarcerated population



remain the Department's top priority throughout this process.

- Each transfer cohort is selected using the MnSafeD risk assessment – a validated risk assessment instrument that has proven to be highly accurate in predicting institutional misconduct among Minnesota's prison population – and specialty eligibility criteria to ensure safe population shifts.
- Restrictive housing beds will be used only when necessary and for no more than 30 days, with the directive to move the incarcerated person to a more permanent placement.
- **Fostering Stability:**
  - The DOC is expanding video visitation capacity and working to expedite visiting application processes for families of relocated individuals.
  - Case planning coordination is being built into transfer timelines, ensuring case managers are aware of movement decisions and are prepared to support continuity of reentry services.

## **Prioritizing Access to Rehabilitative and Reentry Services**

To support rehabilitation and reentry during the transition:

- Placement decisions in the relocation rubric explicitly consider proximity to vocational training, cognitive-behavioral programming, and higher education opportunities.
- Treatment bed placement will be based on proximity to release dates, ensuring timely access for those nearing return to Minnesota communities.
- Case plans and records will be updated in advance of transfers to ensure continuity of care and readiness for reentry.

## **Conclusion**

This report reflects the DOC's commitment to a thoughtful, strategic, safe, and person-centered transition. As a vital part of Minnesota's public safety system, the Department prioritizes safety in all aspects of its work – operating secure facilities, protecting staff, supporting incarcerated individuals, and preparing people for successful reentry. Public safety is not only a goal but the guiding principle behind every decision in this transition. The DOC will continue to engage staff, unions, incarcerated people, external stakeholders, and the public to ensure that the closure of MCF-Stillwater prioritizes safety and equity and aligns with the agency's mission to transform lives for a safer Minnesota.

## Appendix A. Labor Meetings

Labor Partner	Date	Format
AFSCME	05/15/25	In-Person
AFSCME	05/19/25	In-Person
AFSCME	05/22/25	In-Person
AFSCME	05/29/25	In-Person
AFSCME	05/29/25 <sup>4</sup>	In-Person
AFSCME	06/02/25	In-Person
AFSCME	06/03/25	In-Person
AFSCME	06/03/25	In-Person
AFSCME	06/05/25	In-Person
AFSCME	06/09/25	In-Person
AFSCME	06/09/25	In-Person
AFSCME	06/10/25	In-Person
AFSCME	06/16/25	Hybrid - In-Person/Virtual
AFSCME	06/16/25	In-Person
AFSCME	06/18/25	In-Person
AFSCME	06/23/25	Hybrid - In-Person/Virtual
AFSCME	06/30/25	Hybrid - In-Person/Virtual
AFSCME	07/01/25	In-Person
AFSCME	07/07/25	Hybrid - In-Person/Virtual
AFSCME	07/14/25	Hybrid - In-Person/Virtual
AFSCME	07/16/25	In-Person
MAPE	05/15/25	In-Person
MAPE	05/27/25	In-Person
MAPE	05/29/25	In-Person
MAPE	06/02/25	In-Person
MAPE	06/02/25	In-Person
MAPE	06/09/25	Hybrid - In-Person/Virtual
MAPE	06/09/25	In-Person

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<sup>4</sup> There can often be multiple meetings in one day and appear in this table as separate lines.

MAPE	06/16/25	Hybrid - In-Person/Virtual
MAPE	06/16/25	In-Person
MAPE	06/16/25	Virtual
MAPE	06/23/25	Hybrid - In-Person/Virtual
MAPE	06/30/25	Hybrid - In-Person/Virtual
MAPE	07/01/25	Virtual
MAPE	07/07/25	Hybrid - In-Person/Virtual
MAPE	07/14/25	Hybrid - In-Person/Virtual
MAPE	07/16/25	Hybrid - In-Person/Virtual
MMA	05/15/25	In-Person
MMA	05/27/25	Virtual
MMA	06/03/25	Hybrid - In-Person/Virtual
MMA	06/09/25	Hybrid - In-Person/Virtual
MMA	06/10/25	Hybrid - In-Person/Virtual
MMA	06/10/25	Hybrid - In-Person/Virtual
MMA	06/16/25	Hybrid - In-Person/Virtual
MMA	06/18/25	In-Person
MMA	06/23/25	Hybrid - In-Person/Virtual
MMA	06/30/25	Hybrid - In-Person/Virtual
MMA	07/02/25	In-Person
MMA	07/07/25	Hybrid - In-Person/Virtual
MMA	07/14/25	Hybrid - In-Person/Virtual
MMA	07/15/25	Virtual
MNA	05/15/25	Virtual
MNA	06/02/25	Virtual
MNA	06/09/25	Virtual
MNA	06/18/25	Virtual
MNA	06/21/25	Virtual
MNA	06/28/24	Virtual
MNA	07/07/25	Virtual
MNA	07/14/25	Virtual
SRSEA	05/15/25	Virtual
SRSEA	05/27/25	In-Person
SRSEA	05/29/25	In-Person

SRSEA	06/02/25	In-Person
SRSEA	06/09/25	In-Person
SRSEA	06/10/25	In-Person
SRSEA	06/16/25	In-Person
SRSEA	06/18/25	Virtual
SRSEA	06/21/25	Virtual
SRSEA	06/28/25	Virtual
SRSEA	07/02/25	Virtual
SRSEA	07/07/25	Virtual
SRSEA	07/14/25	Virtual
SRSEA	07/16/25	Virtual

## Appendix B. Relocation Rubric

### Facility Relocation Rubric for Placement Decision-Making<sup>1</sup>

[Minn. Stat. § 241.01, subd. 3a\(k\)](#) requires that, when planning the closure of a prison facility, the commissioner must: identify the potential adverse impacts of the closure on incarcerated individuals; minimize disruptions in conditions of confinement, rehabilitative programming, educational opportunities, mental health and medical care, family visitation, and case planning; and prioritize access to services that support rehabilitation and successful reentry across all state facilities.

**For each global prison population movement review, DOC will make transfer assignments in the below order to ensure consistent, strategic, and transparent criteria that meet its legislative obligations.** This rubric identifies the order of considerations in placement decisions and how staff will assess criteria when comparing different housing alternatives available at any given time during each coordinated movement.

Legislatively Required Relocation Considerations (in order of priority)	Relocation Goals	Type of Bed/Facility	Assessment of Transfer Criteria (in order of priority)	Rationale	Notes (policy needs)
<b>Minimize potential adverse impacts on incarcerated people</b>	<ul style="list-style-type: none"><li>Maximize use of beds that can only be used by someone who meets certain eligibility criteria (e.g., sex offense treatment)</li><li>Prioritize the health and accessibility needs of</li></ul>	<ol style="list-style-type: none"><li>Specialty beds at facilities</li><li>Minimum custody facility</li><li>Facilities with higher education programs</li></ol>	<ol style="list-style-type: none"><li>Supportive living services</li><li>Mental health unit</li><li>Sex offense treatment</li><li>Substance use disorder treatment</li><li>Prison Fellowship Academy</li></ol>	<ul style="list-style-type: none"><li>Ensures priority use for those most in need of specialty beds</li><li>Expands access to general population beds</li><li>Relies on expertise in health, recovery, and programming</li></ul>	<p>Current waitlist positions will still be relied on to fill treatment beds.</p> <p>Placement for some in (pre-)treatment SO units/beds may require variance from regulatory</p>

<sup>1</sup> To be used every time DOC makes transfer decisions reducing the population of MCF-Stillwater by half through mid-September 2025. DOC staff will focus the Stillwater transfer assignments to those incarcerated people that have been identified as eligible for relocation by Subgroup 3.

Legislatively Required Relocation Considerations (in order of priority)	Relocation Goals	Type of Bed/Facility	Assessment of Transfer Criteria (in order of priority)	Rationale	Notes (policy needs)
	incarcerated people <ul style="list-style-type: none"> <li>• Prioritize the preservation of primary rehabilitative programming (“PRP”) continuity</li> <li>• Maintain stability in operations and conditions of confinement</li> </ul>		6) Challenge Incarceration Program 7) Minimum custody 8) Higher education placement	<ul style="list-style-type: none"> <li>• Curtails mismatches in health, safety, and programming needs</li> <li>• Maintains vacancies that fit broader needs</li> </ul>	requirements (reviewing policy, too).  All other placements follow current criteria for eligibility and bed assignment.
<b>Minimize disruptions in mental health and medical care</b>	<ul style="list-style-type: none"> <li>• Prioritize agency-wide housing opportunities for people with chronic or ongoing health needs</li> <li>• Identify environmental limitations, at all facilities for incarcerated people with high</li> </ul>	All general population facilities	1) Housing restrictions set by health services (e.g., low bunk, single cell)  2) Chronic care medical needs and management geography (Medical appointments)  3) Mental health provider/group continuity	<ul style="list-style-type: none"> <li>• Within available options, after medical and mental health needs, prioritize classification, safety and security needs, remaining primary rehabilitative programming, then non-primary rehabilitative</li> </ul>	Reviewing single cell assignment criteria in policy for breadth.  Develop a communication tool for sending and receiving facilities to ensure continuity of medical/dental healthcare needs.  Develop a process for the transfer of prescribed

Legislatively Required Relocation Considerations (in order of priority)	Relocation Goals	Type of Bed/Facility	Assessment of Transfer Criteria (in order of priority)	Rationale	Notes (policy needs)
	<p>medical/physical needs.</p> <ul style="list-style-type: none"> <li>Identify incarcerated people with high medical/physical needs and provide recommendation of best facility placement to meet those needs.</li> </ul>		<p>4) Other ADA accommodations not already considered that might require a specific cell/facility assignment</p>	<p>programming (in this order)</p> <ul style="list-style-type: none"> <li>Provides opportunity for individualized medical and mental health needs assessments</li> <li>Incorporates expertise in health, recovery, and programming</li> </ul>	<p>medications to ensure medications are available at the receiving facility at the next scheduled medication time.</p> <p>Develop a communication strategy to advise correctional staff of incarcerated persons who have special needs that may affect housing, work, program assignments, and/or disciplinary measures.</p> <p>Confidentiality must be considered, and information is shared on a need-to-know basis for the safety and security of an incarcerated individual while other medical</p>



Legislatively Required Relocation Considerations (in order of priority)	Relocation Goals	Type of Bed/Facility	Assessment of Transfer Criteria (in order of priority)	Rationale	Notes (policy needs)
					information is protected.
<b>Minimize disruption in rehabilitative programming and educational opportunities</b>	<ul style="list-style-type: none"> <li>Prioritize continuity in programming, including secondary education, vocational, MINNCOR, and structured activity</li> </ul>	All general population facility placement Medium: FRB, LL, ML Close: RC, STC Max: OPH	1) Classification score 2) Safety and security factors <sup>2</sup> 3) Release date 4) Remaining Primary Rehabilitative Programming <sup>3</sup> 5) Non-PRP <sup>4</sup>	<ul style="list-style-type: none"> <li>Administration of programming in a prison is often most effective when groups have continuity and share similar control level traits</li> <li>Disruption or gaps in programming can set people back</li> <li>DOC must still make tough decisions about who gets access to primary</li> </ul>	Group intends to rely on current selection and placement criteria for these decisions that are generally mentioned in policy 202.100 classification system and policy 301.095 central transportation.  A policy review is underway to identify if any criteria do need modification for specific programs.

<sup>2</sup> Includes incompatibilities with incarcerated people or staff, facility restrictions, MNSafe-D (a validated risk assessment instrument that has proven to be very accurate in predicting institutional misconduct for Minnesota’s prison population) , and security threat group association.

<sup>3</sup> Higher education, substance use disorder treatment, sex offense treatment, and prison fellowship academy are typically considered “primary rehabilitative programming”. Those programs are NOT included in this section of the rubric as they are priority placements above. This section of the rubric includes placement for the remaining PRP: secondary education, EMPLOY, cognitive interventions (thinking for a change, moving on, decision points), cognitive behavioral interventions for intimate partner violence, and employment.

<sup>4</sup> Non-primary rehabilitative programming (Non-PRP) includes things such as job placement, structured group time, elective programming, etc.

Legislatively Required Relocation Considerations (in order of priority)	Relocation Goals	Type of Bed/Facility	Assessment of Transfer Criteria (in order of priority)	Rationale	Notes (policy needs)
				rehabilitative programming with limited resources; therefore, release date assessment is critical	May need MDTs to ensure individualized assessments occur for those with higher classification scores.
<b>Minimize disruptions in conditions of confinement</b>	<ul style="list-style-type: none"> <li>• Maintain stability in operations and conditions of confinement</li> <li>• Maximizes likelihood of smooth transition for staff and incarcerated people</li> </ul>	Transitional segregation bed use (excluding STW beds)	1) All PRP 2) Non-PRP	<ul style="list-style-type: none"> <li>• Temporary while awaiting a general population bed that is an appropriate programming placement</li> <li>• Maximizes transfers to appropriate facilities, when possible, while appropriate programming beds open up</li> <li>• Preserves space in STW seg if needed for those who resist transfer</li> </ul>	Limit the time someone can be placed in temp segregation housing when not for discipline  First in, first out approach  UI status but potential access to property and reading materials as in any other placement

## Support Activities for All Relocations

Legislatively Required Relocation Considerations	Issue	Solution Strategies	Related Tasks
<b>Minimize potential adverse impacts on incarcerated people</b>	<ul style="list-style-type: none"> <li>Transfers, particularly for people who have been in one facility for a lengthy period, can upend aspects of life, including relationships, familiarity with the institution, staff, and culture, awareness of rules, and programming.</li> </ul>	<ul style="list-style-type: none"> <li>Rely on unit rep groups to support incoming transfers.</li> <li>Maintain intake and orientation procedures used in every facility.</li> <li>Prioritize spiritual care programming participation and religious diet request confirmations.</li> </ul>	<p>Prioritize final revisions to handbook policy that includes updates to facility handbooks, ensuring consistent practices and information is being shared.</p> <p>Chaplains or coordinators will identify spiritual care programming participation between transfer and receiving facility.</p>
<b>Prioritize access to services that support rehabilitation and successful reentry</b>	<ul style="list-style-type: none"> <li>Programming resources are finite and people entering prison have a multitude of needs that must be addressed, from substance use or sex offense treatment needs, behavioral health concerns, medical issues, to educational needs.</li> <li>DOC does not have the resources or available treatment beds to immediately meet people's needs.</li> <li>DOC attempts to prioritize placement in a facility that best matches each individual's circumstances, but no</li> </ul>	<ul style="list-style-type: none"> <li>Prioritize people for treatment based on when they are releasing, delaying treatment for those with long sentences in favor of providing treatment to someone releasing to a Minnesotan community earlier.</li> </ul>	<p>Update case plans and records management in advance of transfers.</p> <p>Allocate additional staffing resources to specialty bed reviews and medical and mental health need identification.</p>

Legislatively Required Relocation Considerations	Issue	Solution Strategies	Related Tasks
	placement is a perfect fit that can check every box.		
<b>Minimize disruption in case planning</b>	<ul style="list-style-type: none"> <li>Transfers can increase access to treatment, programs, and visitation, but can be disruptive and destabilizing.</li> <li>DOC has a process for case management and medical care continuity that will be leveraged more heavily during mass movements</li> </ul>	<ul style="list-style-type: none"> <li>Ensure adequate records staff support to prioritize records transfers for this population.</li> <li>Understanding someone's needs when transferring will help the receiving facility support them.</li> </ul>	Case managers across all facilities who are involved in these transfers will be encouraged to collaborate and share information as necessary for supportive transitions and case planning.
<b>Minimize disruption in family visitation</b>	<ul style="list-style-type: none"> <li>DOC does not have a way of capturing how close current or prospective visitors are to a potential new facility</li> </ul>	<ul style="list-style-type: none"> <li>Expand access to video visiting or phone calls</li> <li>Expedite visiting applications for people transferred from STW</li> <li>Electronic applications submitted for STW visiting will be processed first</li> </ul>	<p>Consider revision to kiosk policy access criteria to reduce barriers to video visiting.</p> <p>Contact Visiting Application Unit to create process for expedited/priority processing.</p>

## MCF-Stillwater Relocation Rubric

As the Department of Corrections (DOC) prepares to close MCF-Stillwater in phases, the agency is working to ensure incarcerated individuals are transferred to other facilities in a way that is safe, fair, and as smooth as possible. Normally, we make these decisions one person at a time. But because we're moving many people at once as part of the MCF-Stillwater phased closure, the DOC has created a relocation rubric – a clear, step-by-step decision-making tool to guide placements.

The relocation rubric helps to ensure that:

- The process is thoughtful, consistent, and fair
- People are placed based on individual needs and safety
- We follow the requirements in state law ([Minn. Stat. § 241.01, subd. 3a\(k\)](#)):
  - Minimize disruptions to housing, healthcare, programming, and visitation;
  - Protect access to rehabilitation and reentry services; and
  - Reduce negative impacts on incarcerated individuals as much as possible

### What the Rubric Considers

When making placement decisions, DOC staff will go through these four steps, in this order:

#### 1. Special Program Eligibility

Individuals who qualify for specific placements will be prioritized first. This includes people who are eligible for:

- Mental health treatment and housing
- Substance use or sex offense treatment
- Higher education
- Prison Fellowship Academy
- Challenge Incarceration Program
- Minimum custody work programs

These placements help ensure people stay connected to the programs they are currently in or need.

#### 2. Medical and Mental Health Care Needs

Next, staff assess healthcare-related needs. This includes:

- Individuals who require certain medical or mental health accommodations
- People who need to be closer to specific health providers or services

### 3. General Placement Factors

For all remaining transfers, staff use the following factors to make the best match possible:

- Custody level and classification score
- Programming still needed
- Time remaining on sentence and upcoming release dates
- Safety and security concerns
- Compatibility with others in housing units

This step helps maintain stability in facilities and for staff and progress for IPs as much as possible.

### 4. Temporary Housing

People may need to go into a temporary segregation bed while we wait for the right bed to open up.

- This is not discipline
- It is only used if there is no other safe option
- The goal is to keep this under 30 days whenever possible

Staff will work to move people into permanent placements as quickly as possible.

### Bottom Line

The MCF-Stillwater closure transfers of incarcerated people are not happening at random. The relocation rubric is designed to make the process thoughtful, strategic, and fair, while meeting the legal and logistical demands of moving a large number of people safely. Our goal is to reduce disruption, maintain stability across facilities, and continue providing the programs and services that support rehabilitation and success.

A copy of the full rubric is available upon request.