



DEPARTMENT OF THE NAVY
NAVY PERSONNEL COMMAND
5720 INTEGRITY DRIVE
MILLINGTON TN 38055-0000

1550
Ser 84B/096
12 Jun 02

From: Commander, Navy Personnel Command (PERS-84)
To: Distribution

Subj: POLICY ON NOTIFYING PRISONERS CONVICTED OF SEX OFFENSES OF
AVAILABLE COMMUNITY TREATMENT PROGRAMS PRIOR TO THEIR RELEASE

Ref: (a) 42 U.S.C., Section 13943
(b) SECNAVINST 1640.9B

Encl: (1) Notification of Community Treatment Programs

1. Purpose. To ensure that information regarding community treatment programs in the community into which a convicted sex offender is released is made available to them upon their release from confinement per reference (a). This requirement applies whether or not the prisoner participated in sex offender programs while incarcerated.

2. Discussion. Releasing prisoners convicted of sex offenses poses a special risk to the community at large. This is one reason why extensive sex offender treatment programs have been instituted at the consolidated briggs. This notification policy is intended to supplement these programs and ensure that all prisoners convicted of sex offenses are aware of local treatment opportunities before their release.

3. Definitions. For the purpose of this policy, a sex offender is a prisoner adjudged or sentenced for a sex offense(s) against either a minor or an adult.

4. Exception. Prisoners transferred to another correctional facility or released to a detainer do not need to be provided this information at the original confinement facility.

5. Procedure

a. Before release from confinement, all qualifying prisoners shall receive notification of sex offender programs in the community to which they will be released. In facilities with a clinical services department, that department shall make notification; otherwise, the prisoner's counselor will make the notification.

b. Staff will ensure that prisoners receive enclosure (1). Include the name, address and telephone number of the treatment agency. Other information might including the length and cost of treatment as well as the modality used. At least one treatment source must be provided.

Subj: POLICY ON NOTIFYING PRISONERS CONVICTED OF SEX OFFENSES OF
AVAILABLE COMMUNITY TREATMENT PROGRAMS PRIOR TO THEIR RELEASE

c. The prisoner will sign and date enclosure (1). Refusal to sign the form will be documented. A copy of the form will be filed in the prisoner's brig record. If released on parole, a copy will be forwarded to the parole officer.

d. To determine what local resources are available, the following clearinghouses can be contacted for assistance in identifying sex offender treatment programs:

Safer Society Foundation
Post Office Box 340
Brandon, Vermont 05733-0340
(802) 247-5141

Association for Treatment of Sexual Abusers
4900 SW Griffith Drive, Suite 274
Beaverton, Oregon 97005
(503) 643-1023

In addition to the above, in those cases where a qualifying prisoner is being released from a waterfront brig, the clinical service department at Consolidated Brig Miramar may also be contacted for assistance in finding local resources.

6. This guidance continues PERS-84 policy of 20 March 1997 and shall be published in future revisions to reference (b).

7. Point of contact is Mr. Tim Purcell at (901) 874-4452 or DSN 882-4452.


W. E. PECK
By direction

Distribution:
CINCLANTFLT (N16)
CNET (00JC)
CINCPACFLT (N16)
All Navy Brigs/CCUs

NOTIFICATION OF COMMUNITY TREATMENT PROGRAMS

In accordance with the provisions of the Violent Crime Control and Law Enforcement Act of 1994, and per Navy policy, the

(Name of brig)

is required to notify prisoners convicted of sex offenses of available treatment programs prior to their release. We have identified the following treatment program(s) in or about your release area, which may be of assistance to you. We strongly encourage you to contact these programs, or other similar programs.

Treatment Program

Address _____

Telephone Number _____

Other pertinent information _____

Treatment Program _____

Address _____

Telephone Number _____

Other pertinent information _____

Prisoner's signature _____ Date _____

Staff signature _____ Date _____