

Segregated Confinement

Facility Name:

Facility Staff:

Date:



Commission of Correction

[illegible]

Residential Rehabilitation Units (Capacity over 500 ONLY)

Facility Name:

Facility Staff:

Date:



**Commission of
Correction**

		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
TOTAL	Individuals in RRU's													
AGE	18-21													
	22-54													
	55+													
RACE	Asian													
	Black													
	White													
	Other/Unknown													
GENDER	Male													
	Female													
	Other/Unknown													
OTHER	Special Health Accommodations/Needs													
	Substance Abuse Program Participants													
	Pregnant or within 8 weeks of giving birth													

Please, save this form to your computer and complete the information contained within. If the submit button does not work with your facility's individual technology settings, send the file (not a scan or copy) to liberty@scoc.ny.gov, with the subject: HALT Reporting 2023 Submission.