NEVADA DEPARTMENT OF CORRECTIONS
ADMINISTRATIVE REGULATION
814

INMATE COMMON FARE/RELIGIOUS DIET

Supersedes: AR 814 (Temporary, 03/23/12)
Effective Date: 06/17/12

AUTHORITY:

NRS 209.241
NRS 209.243

814.01 RESPONSIBILITY

The Warden is responsible for the implementation and monitoring of regulations regarding the inmate Common Fare, Religious/Spiritual diet.

The Chaplain/designee is responsible to coordinate the identification of inmates eligible to receive the Common Fare, Religious/Spiritual diet menu ("Common Fare").

The Culinary Manager is responsible for the proper training of staff and inmate culinary workers as well as proper preparation and service of Common Fare meals.

NDOC Purchasing Department shall be responsible for the Common Fare menu consisting of a two week cycle menu that meets or exceeds the dietary requirements.

814.02 COMMON FARE POLICY

1. The Common Fare menu intends to accommodate inmates whose sincere religious/spiritual dietary needs cannot be met by the Master Menu without prohibiting their free exercise of or without substantially burdening their sincere religious/spiritual exercise in a manner that is prohibited by controlling legal authority.

2. The Common Fare menu also intends to:

   A. Promote institutional safety, security, discipline, and order, consistent with consideration of cost and limited resources.

   B. Promote the efficient planning, ordering, preparation, and delivery of religious/spiritual dietary meals to inmates, conserving fiscal resources and preventing waste.
3. The Common Fare Menu shall be certified to meet or exceed minimum daily nutritional requirements and shall be confirmed to meet or exceed Kosher Orthodox Union standards as adopted by the Director and approved in consultation with NDOC experts and consultants.

4. Common Fare will be offered at selected facilities designated by the Director.

5. All food service staff in designated Common Fare facilities will be trained in Common Fare procedures. (See DOC Form 3062, Culinary Offender Worker Common Fare Training Acknowledgement)

6. The Common Fare Menu may not be changed at facility level, except where seasonal availability of produce items warrants that substitutions be made. Under such circumstances, the Food Services Manager may make temporary nutritionally equal substitutions with fresh seasonal produce.

7. All foods purchased for this program, except fresh fruit and vegetables, will be certified by an appropriate recognized standard symbol.

8. All foods will be prepared in designated Common Fare equipment and areas.

9. Temporary assignment to special housing at a facility offering the Common Fare Program ordinary, should not affect an eligible inmate’s participation in the Common Fare program.

A. An inmate enrolled in the Common Fare program should be provided Common Fare meals while in special housing or the facility medical unit.

814.03 COMMON FARE/RELIGIOUS MEAL PROGRAM

1. An inmate wishing to participate in the Common Fare diet shall complete and submit to the Chaplain, a Religious/Spiritual Belief Diet Accommodation Request and Registration Form (DOC Form 3060, “Registration Form”).

A. The Registration Form is intended to allow the Chaplain and correctional officials to meet the needs of the institution and the inmates, including, but not limited to:

(1) Promoting institutional safety, security, discipline and order.

(2) Promoting the efficient planning, ordering, preparation, and delivery of Common Fare meals to inmates, conserving fiscal resources and preventing waste.

(3) Resolving discrepancies and disputes that may arise concerning religious/spiritual diet accommodations, including those concerning the sincerity
of an inmate’s request or stated need for a religious/spiritual dietary accommodation.

B. An inmate shall certify that the information provided by the inmate in the Registration Form is true and correct to the best of the inmate’s knowledge, and that the request for a religious/spiritual dietary accommodation is based upon the inmate’s sincerely held religious or spiritual beliefs.

2. The Chaplain/designee shall conduct a religious/spiritual belief diet accommodation interview of the inmate as soon as reasonably practicable after the inmate’s submission of the completed Registration Form.

   A. Any inmate who sincerely subscribes to a religious/spiritual group that is listed as authorized to meet in NDOC facilities is eligible to be considered for the Common Fare program.

   B. Inmates who sincerely subscribe to other religions/spiritual beliefs may be required to provide additional information about their dietary restrictions so that their enrollment in the Common Fare program can be considered.

   C. If an inmate submits an incomplete Registration Form, it shall not be processed for religious/spiritual diet accommodation, but be returned to the inmate for completion and resubmission.

   D. The Chaplain/designee shall not conduct the interview until after the complete Registration Form has been submitted.

3. During the interview, the Chaplain/designee shall discuss with the inmate the inmate’s request for a religious/spiritual diet accommodation and matters pertaining thereto, including matters set forth in the Registration Form.

4. Inmates will be notified in writing by the Chaplain/designee of their enrollment in the Common Fare program. If the inmate is housed in a facility where the Common Fare diet is not offered he/she must be advised that transfer to another facility may be required.

   A. Enrollment in the Common Fare program does not guarantee future receipt of or constitute a legal right to receive Common Fare on a continued basis. In this regard, the Department reserves its right to challenge the facts at any time:

      (1) That an inmate’s religious/spiritual belief is sincerely held.

      (2) That an inmate’s request for a religious dietary accommodation was based on sincere religious/spiritual need.

      (3) Denial of a religious/dietary meal does not prohibit the free exercise of or impose a substantial burden on an inmate’s religious/spiritual exercise.
5. The Chaplain/designee will notify in writing, the Food Services Manager, the inmate’s Caseworker and the Institutional Business Manager of the enrollment of an inmate to receive the Common Fare diet. This information will be kept in the inmate’s I-file and entered into NOTIS.

6. The Chaplain/designee or Caseworker should advise the inmate upon enrollment in the Common Fare diet that an adequate waiting period may occur prior to the inmate actually receiving Common Fare foods, due to the time it takes to process the request, order and receive the food needed to provide the Common Fare menu to the inmate.

   A. If an inmate is enrolled in the Common Fare diet and is housed in a facility where the Common Fare diet is not offered, the Department will make alternative accommodations to meet the inmate’s religious/spiritual needs, including but not limited to transferring to a NDOC facility offering a Common Fare diet consistent with their current classification requirements.

7. The Warden or the Chaplain/designee may, at any time, challenge the sincerity of an inmate’s request or stated need for a religious/spiritual belief dietary accommodation, or challenge the claim that not providing the religious/spiritual dietary accommodation works to prohibit the free exercise of or constitutes a substantial burden on their religious exercise based on articulable facts or circumstances giving rise to reasonable suspicion or doubt as that the inmate’s request or stated need for a religious/spiritual dietary accommodation is not sincere, including, but not limited to the following occurrences:

   A. An inmate’s purchase or consumption of food products that are not in keeping with the considerations or requirements of the religious/spiritual faith group upon which the inmate bases his or her need for a religious/spiritual dietary accommodation.

   B. An inmate’s failure to adhere to his or her religious/spiritual dietary accommodation, including by consuming, or attempting to consume, meals from a menu other than the menu that accommodates an inmate’s religious diet.

   C. An inmate’s failure to consume the food offered or obtained from the menu that accommodates an inmate’s religious/spiritual diet.

   D. An inmate’s giving away, or attempted giving away, of food offered or obtained from the menu that accommodates an inmate’s religious/spiritual diet.

8. In circumstances where such a challenge is made, the Chaplain/designee shall notify the inmate and the Warden in writing of such a challenge on the DOC Form 3059, Inmate Sincerity/Substantial Burden Challenge Form”) whereupon, the Warden may suspend the provision of Common Fare meals to the inmate during the ensuing grievance process on a case by case basis, and:
A. A disagreeing inmate can appeal the decision by utilizing the grievance process, per AR 740. If the challenge is upheld through the grievance process or if the grievance process is not properly exhausted, an appropriate course of action may include:

1. The suspension of the provision of a religious/spiritual diet to the inmate. In this regard, the suspension of the provision of a religious diet is not intended to be a punishment. Rather, the suspension of the provision of a religious/spiritual diet aims to promote legitimate penological interests, including the conservation of fiscal resources, based on the inmate’s lack of a sincere need for the religious/spiritual diet accommodation and:

   a. Promoting institution safety, security, discipline and order.

   b. Promoting the efficient planning and ordering, preparation and delivery of religious/spiritual dietary meals to inmates and preventing waste, based on the inmate’s lack of a sincere need for the religious/spiritual diet accommodation.

9. Inmates who are suspended from the Common Fare diet by the Warden or the grievance process may not immediately re-enroll, until after the grievance process has concluded.

   A. The Chaplain/designee will notify in writing, the Food Services Manager, the inmate’s Caseworker and the Institutional Business Manager of the suspension of an inmate to receive the Common Fare diet. This information will be kept in the inmate’s I-file and entered into NOTIS.

10. An inmate who voluntarily withdraws from Common Fare:

   A. Should provide the reason for the removal to the Chaplain/designee.

   B. Should be aware, the Chaplain may consider an inmate’s prior voluntary withdrawal when evaluating the sincerity of any subsequent requests to receive Common Fare.

   C. The inmate’s voluntary withdrawal should be forwarded to his/her Caseworker to be kept in his/her I-file and entered into NOTIS.

   D. The inmate’s withdrawal should be forwarded to the Food Services Manager/designee.

   E. May reapply at any time according to the procedures outlined in this regulation.

11. Enrolled inmates participating in a Common Fare diet, who are prescribed a specific diet by the Medical Division will be fed the medical diet in lieu of the Common Fare diet.
unless they have signed a DOC Form 2523, Release of Liability for Refusal of Medical Treatment.

A. Enrolled inmates who are prescribed a medical diet will be allowed to resume the Common Fare diet as soon as they are released from the medical diet or they have voluntarily removed themselves from the medical diet by, signing a DOC Form 2523, Release of Medical Liability for Refusal of Medical Treatment.

814.04 COMMON FARE MEAL PROCEDURES

1. Upon delivery of Common Fare food products to the kitchens/culinary, the products will be stored in special designated areas for staging and/or storage until items are ready for use:

   A. A separate refrigeration unit or area within available cooling systems will be set aside for the staging and storage of refrigerated Common Fare food products.

      (1) The designated unit/area will be clearly marked and identified as Common Fare.

   B. Dry storage of Common Fare food items will be stored in a separate area from other food items.

      (1) In case of limited dry storage space, a special area within the existing storage area will be identified, marked, and used for staging and storage of non perishable Common Fare food products.

      (2) The designated unit/area will be clearly marked and identified as Common Fare.

   C. Frozen Common Fare food items will be stored in a separate area from other items.

      (1) In case of limited frozen storage, a special area within the existing frozen storage will be identified, marked, and used for staging and storage of frozen Common Fare food items.

      (2) The designated unit/area will be clearly marked and identified as Common Fare.

2. Common Fare food items will be prepared in accordance with State and Federal regulations.

   A. The Food Services Manager/designee will provide appropriate training and supervision for inmate culinary workers assigned to prepare Common Fare meals.
(see DOC Form 3062, Culinary Offender Worker Common Fare Training Acknowledgement.

B. Common Fare food service personnel will not handle non-Common Fare food items while preparing Common Fare food items.

C. All food preparation will be conducted in the designated Common Fare area.

(1) Food Service utensils needed for use in preparing, serving, and transporting Common Fare food items will be stored, handled, used and cleaned separately from non-Common Fare food utensils.

(2) Utensils will be washed and sanitized in their designated areas in compliance with Common Fare procedures.

(3) Sinks/vessels will be washed, sanitized according to Common Fare procedures.

(4) All utensils will be stored in a separate area, designated and identified as Common Fare according to Common Fare procedures.

D. Separate disposable serving containers will be used for the Common Fare and will be stored separately.

E. Common Fare items will be prepared and placed in serving containers designated for the Common Fare diet.

3. The Food Service Staff will develop and maintain an updated list of enrolled inmates who are authorized to participate in a Common Fare/Religious diet based on the approval of the Chaplain.

4. The Food Service Staff will maintain and document daily the list of enrolled inmates who are served Common Fare meals.

5. The Food Services Manager or other staff should document any suspicious or suspected activity that deviates from the enrolled inmate’s religious requirements in NOTIS.

   A. An inmate who is enrolled to participate in the Common Fare program will not select other food items, except beverages, from the Master Menu.

6. The Chaplains of the Department shall be the final authority for determining the distinction between what items constitute legitimate elements of a religious/spiritual diet, and ritual or ceremonial foods.
APPLICABILITY

1. This regulation requires an operational procedure for Institutions and Support Services.

2. This AR requires an audit.

REFERENCES

ACA Standard 4-4319
ACA Standard 4-4320

ATTACHMENTS

Attachment 1, DOC Form 3058, Common Fare Acknowledgment Agreement
Attachment 2, DOC Form 3060, Religious/Spiritual Belief Diet Accommodation Request and Registration
Attachment 3, DOC Form 3061, Culinary Staff Common Fare Acknowledgement
Attachment 4, DOC Form 3062, Culinary Offender Worker Common Fare Training Acknowledgment
Attachment 5, DOC Form 2523, EXAMPLE - Release of Liability for Refusal of Medical Treatment
Attachment 6, DOC Form 3059, Inmate Sincerity/Substantial Burden Challenge Form

James G. Cox, Director

Date

Approval of technical amendment removing erroneous inclusion of “(Temporary)” within the title of Nevada Department of Corrections Administrative Regulation 814 Inmate Common Fare/Religious Diet (Effective Date: 06/17/12).

James G. Cox, Director

Date
State of Nevada, Department of Corrections

Common Fare Agreement

I agree to participate in the Common Fare program. This program provides me with an appropriate religious diet that meets or exceeds minimum daily nutritional requirements.

As a participant in the Common Fare program, I acknowledge the following:

<table>
<thead>
<tr>
<th>Participant Initials</th>
<th>Acknowledgment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I understand that special accommodations are being made on my behalf to participate in the Common Fare program, including the advance-ordering of costly meals, and possibly, the relocation of my housing assignment to a facility where such meals are offered.</td>
</tr>
<tr>
<td></td>
<td>I understand that when I fail to pick up or consume a meal on the Common Fare program, that particular meal will likely be wasted; needlessly costing the Department of Corrections money that could have been put to other needs and uses.</td>
</tr>
<tr>
<td></td>
<td>I understand that the following actions or inactions on my part might lead Department officials to doubt the sincerity of my request or need for a religious/spiritual-dietary accommodation, potentially leading to the suspension of my participation in the Common Fare program:</td>
</tr>
<tr>
<td></td>
<td>———— If I fail to pick up or consume meals on the Common Fare Program.</td>
</tr>
<tr>
<td></td>
<td>———— If I fail to adhere to my religious/spiritual diet, including but not limiting by consuming or attempting to consume, meals from a menu other than the menu that accommodates my faith group.</td>
</tr>
<tr>
<td></td>
<td>———— If I eat of trade unauthorized food from the main line.</td>
</tr>
<tr>
<td></td>
<td>———— If I purchase or eat food items from the commissary/coffee shop inconsistent with the dietary requirements of the Common Fare program or my religious/spiritual faith group, upon which I base my need for a religious/spiritual dietary accommodation</td>
</tr>
<tr>
<td></td>
<td>———— If I give away, sell, trade or attempt to give away sell or trade food offered or obtained from the Common Fare menu.</td>
</tr>
<tr>
<td></td>
<td>———— I understand if I voluntarily withdrawal from the Common Fare menu, this may be a factor in the Chaplains determinations of my sincerity.</td>
</tr>
</tbody>
</table>

1

DOC 3058 (5/11)
State of Nevada, Department of Corrections

Common Fare Agreement

Food Service Manual

Attachment 1

I understand that, if my stated need for a religious/spiritual-dietary accommodation and participation in the Common Fare program is determined to be insincere, restitution charges may be imposed against my inmate account for wasted meals that were purchased for me but not consumed by me.

Having acknowledged the foregoing, I agree to participate in the Common Fare program, subject to the potential consequences outlined in NDOC AR 814.

<table>
<thead>
<tr>
<th>Offender Signature</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Offender Name and Number (Please Print)</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
<tr>
<td>Staff Witness</td>
<td></td>
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<tr>
<td>Facility</td>
<td></td>
</tr>
</tbody>
</table>

Minimum Expected Number of Common Fare Meals per Month to be Picked Up

<table>
<thead>
<tr>
<th>Month</th>
<th>Days in Month</th>
<th>Meals per Month</th>
<th>Minimum Expected # of Common Fare Meals Required to be Picked Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>February</td>
<td>28</td>
<td>84</td>
<td>63</td>
</tr>
<tr>
<td>March</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>April</td>
<td>30</td>
<td>90</td>
<td>68</td>
</tr>
<tr>
<td>May</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>June</td>
<td>30</td>
<td>90</td>
<td>68</td>
</tr>
<tr>
<td>July</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>August</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>September</td>
<td>30</td>
<td>90</td>
<td>68</td>
</tr>
<tr>
<td>October</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
<tr>
<td>November</td>
<td>30</td>
<td>90</td>
<td>68</td>
</tr>
<tr>
<td>December</td>
<td>31</td>
<td>93</td>
<td>70</td>
</tr>
</tbody>
</table>

For Official Use Only

Date Approved

Staff Signature

I acknowledge: I have been informed an adequate waiting period may occur prior to the inmate actually receiving Common Fare foods. This waiting period between being accepted and receiving the Common Fare meals is due to the time it takes to process the request and order and receive the food needed to provide the Common Fare menu to the inmate.
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Name:</td>
</tr>
<tr>
<td>2.</td>
<td>Inmate No.:</td>
</tr>
<tr>
<td>3.</td>
<td>Address (Please include institution, housing unit and cell)</td>
</tr>
<tr>
<td>4.</td>
<td>Date of Request</td>
</tr>
<tr>
<td>5.</td>
<td>Religious/Spiritual Belief - Diet Requested:</td>
</tr>
<tr>
<td>6.</td>
<td>What is your religious/spiritual affiliation?</td>
</tr>
<tr>
<td>7.</td>
<td>Please describe the basic belief systems or tenets of your religion/spiritual belief?</td>
</tr>
<tr>
<td>8.</td>
<td>How long have you practiced this religion/spiritual belief?</td>
</tr>
<tr>
<td>9.</td>
<td>How did you first come to practice this religion/spiritual belief?</td>
</tr>
<tr>
<td>10.</td>
<td>How did you acquire your knowledge of the requirements, practices, customs, and observances of this religion/spiritual belief?</td>
</tr>
<tr>
<td>11.</td>
<td>What materials do you read or study to deepen your knowledge of the tenets, scriptures, requirements, practices, customs, and observances of this religion/spiritual belief?</td>
</tr>
</tbody>
</table>

DOC 3060 (3/12)
12. How often do you read or study materials to deepen your knowledge of the tenets, scriptures, requirements, practices, customs, and observances of this religion/spiritual belief?

_________________________________________________________________________________________________________________________________________________

13. Have you taken any religious classes?

☐ YES ☐ NO

Please describe: __________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

A. How would you describe the level of your devotion to or interest in this particular religion/spiritual belief?

☐ Very Devout ☐ Devout ☐ Somewhat Devout ☐ Just Curious About it

Please describe: __________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

14. Do you attend religious services?

☐ YES ☐ NO

A. If yes, how often do you attend religious services?

☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other: __________________________

B. If no, why not? __________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________

15. Please list all religions/spiritual beliefs you have pursued in the last ten years. __________________________________________________________________________________________________________________________________________________

_________________________________________________________________________________________________________________________________________________
16. Please describe what religious/spiritual belief diet you require to practice your faith:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

17. Do you like the religious/spiritual belief diet you are required to practice according to your faith/spiritual belief?

☐ YES  ☐ NO

Please explain:________________________________________________________________________

18. Does your religious/spiritual belief diet present any health problems for you?

☐ YES  ☐ NO

Please explain:________________________________________________________________________

________________________________________________________________________

19. Why do you need a religious/spiritual belief diet accommodation to pursue your religion/spiritual belief?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

20. Have you adhered to this particular religious/spiritual belief diet before?

☐ YES  ☐ NO

A. If so, when did you first adhere to this particular religious/spiritual belief diet?

________________________________________________________________________

B. If so, have you ever abandoned this particular religious/spiritual belief diet?

☐ YES  ☐ NO

Please explain:________________________________________________________________________

________________________________________________________________________
21. What specific dietary rules must you follow, according to your religion/spiritual belief?

22. What particular foods or ingredients are you not supposed to eat, according to your religion/spiritual belief?

23. What special feasts, holidays, fasting, or other dietary events are observed or required by your religion/spiritual belief? (Please include calendar dates of such events).

24. Have you previously requested to be on a religious/spiritual belief diet?

☐ YES ☐ NO

Please explain:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
25. Has the Department ever challenged the sincerity or the substantial burden of your religion/spiritual belief or any request by you for a religious/spiritual belief -dietary accommodation?

☐ YES  ☐ NO

Please explain: ____________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

26. If you did not sincerely need a religious/spiritual belief -dietary accommodation in order to pursue your religion, would you still prefer to be given a religious/spiritual belief -dietary accommodation, anyway?

☐ YES  ☐ NO

Please explain: ____________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

27. During your incarceration, it may become necessary for a medical practitioner to order that you be placed on a medical diet, for medical reasons. If this occurs, would there be a problem in taking you off your religious/spiritual belief -diet to put you on a medical diet?

☐ YES  ☐ NO

Please explain: ____________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
28. Have you previously requested religious/spiritual belief diet accommodation?

☐ YES ☐ NO

A. If so, explain (including when, where, type of diet, and for what religion):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

B. If not, why not?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

29. Do you eat food items that are not in keeping with your religion?

☐ YES ☐ NO

A. If yes, please explain:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

B. If no, please explain:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

30. Comments you wish to make regarding this request for dietary accommodation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
I hereby attest under penalty of perjury of the laws of the state of Nevada that:

(1) The information contained in this registration form is true, correct, and complete, to the best of my knowledge; and

(2) My request for a religious/spiritual belief-dietary accommodation is sincere and sincerely needed to pursue my religion.

Print Inmate Name & Back Number (make sure it is legible):

Name: ____________________________ # __________

Inmate Signature: ______________________ Date: __________

Chaplain/Designee Signature: ________________ Date: __________

☐ Information supports the requirement for religious dietary accommodation.

☐ Information from inmate ____________________ # ____________________ does not support the requirement for religious dietary accommodation for the following reason(s):

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Inmate may appeal this decision through the grievance process.
Culinary Staff Common Fare Training Acknowledgement

I, ____________________________ acknowledge that I have received the following training:

(Food Service Staff Member)

1. I have reviewed "AR 814, Inmate Common Fare, Religious Diet"

2. I have reviewed SS-0046 Common Fare Procedures.

3. I have reviewed the "Common Fare" menu.

4. I understand importance of documentation of "Common Fare" program.

5. I understand the importance to monitor offender culinary worker(s) assigned to prepare "Common Fare" meals to ensure the compliance with all policies and procedures.

Staff Member Signature: __________________________________________

Date: ____________________________________________________________

Food Services Manager: ____________________________________________
Culinary Offender Worker Common Fare Training Acknowledgement

I. ___________________________________ acknowledge that I have been assigned as a culinary worker responsible for preparing “Common Fare” meals. I have received the following training and understand:

1. I have reviewed “AR 814, Inmate Common Fare/Religious Diet”
   - The Food Services Manager/designee has provided training regarding Common Fare meals.
   - All Common Fare food preparation will be conducted in the designated Common Fare area(s).
   - Food service utensils needed for use in preparing, serving, and transporting Common Fare food items will be stored, handled, used and cleaned separately from non-Common Fare food utensils.
   - Utensils will be washed and sanitized in the dedicated Common Fare sink/vessel.
   - Separate disposable serving containers will be used for the Common Fare meals.
   - Common Fare sinks/vessels will be washed and sanitized using approved cleaners.

(The above is a sub-section of AR 814 and not meant to represent the entire AR or the entire training program)

2. I have reviewed the SS-0046 Common Fare Procedures.

3. I have reviewed the “Common Fare” menu.

4. I have reviewed the importance of the following:
   - Using only designated utensils for preparing Common Fare items.
   - Storing “Common Fare” items in proper storage areas.
   - Adherence to “Common Fare” menu.
   - Cleaning of designated “Common Fare” spaces.
   - Food Safety Standards for “Common Fare” items.

5. I understand if I knowingly contaminate food or the Common Fare Kosher food area, I may be subject to disciplinary processes as stated in AR 707. Including but not limited to; being ordered to pay restitution costs associated with the food that has been destroyed or made un-kosher and the costs of re-koshering of the area or equipment by the Kosher expert or any costs related to restoring the Common Fare area and equipment as may be required. Including by religious personnel or experts if necessary, as may be required by religious dietary standards.

Offender Signature: __________________________________________

Date: ________________________________________________________

Food Services Manager/Designee _________________________________

DOC 3062 (5/11)
**RELEASE OF LIABILITY FOR REFUSAL OF MEDICAL TREATMENT**

I hereby release the Nevada Department of Corrections from any and all liability and responsibility that might result from my refusal of examination, treatment or testing described below; and further release any and all personnel from any and all liability and/or responsibility that might be incurred.

I further understand that I may be subject to disciplinary action up to and including being financially responsible for all expenses related to this refusal:

<table>
<thead>
<tr>
<th>Check all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Infirmary Appointment for:</td>
</tr>
<tr>
<td>□ Dental Appointment for:</td>
</tr>
<tr>
<td>□ Psychiatry/Psychology Appointment for:</td>
</tr>
<tr>
<td>□ Physical Therapist Appointment for:</td>
</tr>
<tr>
<td>□ Optometrist Appointment for:</td>
</tr>
<tr>
<td>□ Podiatrist Appointment for:</td>
</tr>
<tr>
<td>□ Chronic Care Clinic for:</td>
</tr>
<tr>
<td>□ OSHA Protocol for TB/Bloodborne Pathogens:</td>
</tr>
<tr>
<td>√ Other Describe: Refusal of Medical Meals</td>
</tr>
</tbody>
</table>

**COMMENTS:** I wish to continue common fare meals for religious/spiritual reasons.

**INMATE HAS BEEN INFORMED OF THE POTENTIAL ADVERSE MEDICAL CONSEQUENCES OF REFUSAL:**

This release has been signed under no duress and with full understanding of possible hazards which may occur due to refusal.

**INMATE/STAFF SIGNATURE**

Joe C. Inmate

ID# 99999

DATE 12/4/11

**HEALTH STAFF WITNESS**

Dr. Smith

DATE 12/4/11

**NEVADA DEPARTMENT OF CORRECTIONS**

RELEASE OF LIABILITY

NAME: Inmate, Joe C

ID# 99999

DOC 2523 (12/11)
State of Nevada Department of Corrections
Religious/Dietary Accommodation Challenge Form

To: AW ____________________________

From: ____________________________ ____________________________ (Date)

Inmate Name ____________________________________________ Inmate DOC Number ____________________________

Basis for Challenge: (Please check applicable)

☐ Sincerity

___ Inmate is not sincere about religion.
___ Inmate’s request for dietary accommodation is not sincere.

☐ Substantial Burden – Denial of a religious accommodation diet does not impose a substantial burden on the inmate’s religious exercise

☐ Prohibit Free Exercise – The denial of the religious accommodation diet does not prohibit the inmate free exercise of their religion.

1) Occurrence/s: ____________________________________________

2) Date and Time: ____________________________________________

3) Source of Information: ____________________________________

4) Please state the articulable facts giving rise to the reasonable suspicion concerning the inmate’s beliefs, which you base this challenge.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Inmate Notified On: ____________________________________________.

Warden Notified On: ____________________________________________.

Caseworker Notified: ____________________________________________.

Inmate Notified of Decision: _________________________________________.
State of Nevada Department of Corrections
Religious/Dietary Accommodation Challenge Form

NOTIS Updated: 

Grievance Filed: 

Warden's Final Decision: 

Grievance Results Filed:

☐ Formal -

☐ Informal -

Faith Declaration Forms and Religious Diet Accommodation Request Forms:
(List all forms and dates)

Date: 

Date: 

Date: 

Date: 

Date: 

Page 2