



**TEXAS BOARD  
OF  
PARDONS AND PAROLES**

**Number: BPP-DIR. 141.308**

**Date: December 20, 2018**

**Page: 1 of 2**

**Supersedes: None**

## **BOARD DIRECTIVE**

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**SUBJECT: PERSONAL BODY ALARMS**

**PURPOSE:** To establish a procedure for Board Members and employees of the Texas Board of Pardons and Paroles to wear a personal body alarm while on duty at a correctional facility.

**AUTHORITY:** Texas Government Code Sections 508.035(d), 498.004, and 511.001(2)

**DISCUSSION:** In order to fulfill the mission of the Texas Board of Pardons and Paroles (Board), Board Members and employees are required to interact with offenders housed in correctional facilities throughout the state to conduct the business of the Board. While these facilities are staffed by Correctional Officers and staff, there are times when Board Members and employees meet with or interview offenders in offices or other locations without Correctional Officers or staff being present. To enhance the safety of the Board Members and employees during these meetings or interviews, the Board will provide personal body alarm devices (Device) to the Board Members and employees who request the Device.

**DEFINITION:** Correctional Facility – a facility operated by or contracted with a city, municipality, county, the Texas Department of Criminal Justice Correctional Institutions Division (TDCJ CID), or the federal government, that is designed for the confinement of persons arrested for, charged with, or convicted of a criminal offense.

Personal Body Alarm – a small electronic device that when activated by pulling a pin emits a loud siren-like alarm sound.

**PROCEDURE:**

- I. A Board Member or employee may wear the Device issued by the Board on a TDCJ CID unit. For non-TDCJ CID facilities, e.g., county jails and federal institutions, the Presiding Officer may authorize the Board Administrator to request permission, from the correctional facility Director or their designee, for a Board Member or employee to wear the Device while conducting Board business at their facility.

If the Board Member or employee elects to wear the Device, the appropriate acknowledgment form must be completed and maintained by the appropriate supervisor (see Attachment A).

- II. A Board Member or employee shall only activate the Device if the Board Member or employee is in fear of imminent bodily injury or harm. When the Device is activated, whether intentional or accidental, the Board Member or employee shall immediately notify the correctional facility Director or designee, and submit an incident report form to the appropriate supervisor (see Attachment B).
  
- III. If the Device is lost or stolen inside the correctional facility or on the correctional facility property outside the walls of the correctional facility, the Board Member or employee shall immediately notify the correctional facility Director or their designee as well as the appropriate supervisor. If the Device is lost or stolen elsewhere, the Board Member or employee shall immediately notify the appropriate supervisor.

**SIGNED THIS, THE 20<sup>TH</sup> DAY OF DECEMBER, 2018.**

**DAVID GUTIÉRREZ, PRESIDING OFFICER (CHAIR)**

*\*Signature on file.*



**TEXAS BOARD OF PARDONS AND PAROLES**  
**PERSONAL BODY ALARM ACKNOWLEDGMENT FORM**

On this date I was assigned a personal body alarm and have been instructed in the proper usage. I acknowledge receipt of Board Directive BPP-DIR. 141.308 Personal Body Alarms. I further acknowledge that I have read this directive and agree to adhere to the procedures outlined in this directive.

I understand that I am responsible and accountable for this alarm until departure, resignation or termination from the Board. At such time that I am no longer serving as a Board Member or employed by the Board, I agree to return the alarm. In the event the alarm is lost, stolen or damaged while assigned to me, I agree to reimburse the agency for the cost of the alarm.

I understand that unauthorized use of the alarm may result in disciplinary action in accordance with PD22-General Rules of Conduct and Disciplinary Action Guidelines for Employees.

\_\_\_\_\_  
Board Member/Employee Printed Name and Title

\_\_\_\_\_  
Board Member/Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

**Alarm Assign Date** \_\_\_\_\_

**Alarm Return Date** \_\_\_\_\_

Alarm Reimbursement - Money orders should be made payable to TDCJ and should be enclosed with an IOC stating what the reimbursement is for. The Index Code and PCA should be included on the IOC. The IOC and money order should be mailed to: TDCJ Cashier's Office, P.O. Box 4015, Huntsville, Texas 77342.

**Original: Supervisory File**  
**Copy: Employee**

<b>Texas Board of Pardons and Paroles Personal Body Alarm Incident Report</b>	
To be completed by the Board Member/employee and submitted to the appropriate supervisor and the Facility Director before the end of the workday.	
Board Member/Employee Name:	
Witness(es) involved:	
<b>Incident Information</b>	
Type of Activation: <input type="checkbox"/> Intentional <input type="checkbox"/> Accidental	
Date:	Time:
Location:	
Description of incident (provide specific details of the incident to include the reason for activation and the offender's name and TDCJ-CID/SID number, if applicable):	
Board Member/Employee Signature: (insert electronic signature in text box below)	