2025 SENATE JUDICIARY

SB 2352

2025 SENATE STANDING COMMITTEE MINUTES

Judiciary Committee

Peace Garden Room, State Capitol

SB 2352 2/11/2025

Relating to authorization for children of inmates to reside at the Heart River correctional center.

10:59 a.m. Chair Larson opened the hearing.

Members present:

Chair Larson, Vice Chairman Paulson, Senators: Castaneda, Cory, Luick, Myrdal, Braunberger.

Senator Myrdal absent.

Discussion Topics:

- Child-parent bonding of inmates
- Funding sources for the nursery program
- Residential child safety
- Staff training and qualifications
- Recidivism reduction through family integration
- Liability immunity provisions for caregivers

10:59 a.m. Senator Dick Dever introduced the bill and submitted testimony in favor #37115.

11:19 a.m. Cheryl A. Thomas, Women's Services Manager of ND DOCR, testified in favor and submitted testimony #36938 and #37122.

11:47 a.m. Chelsea Floor, Director of Burleigh County Human Service Zone, testified in favor and submitted testimony #37113.

11:50 a.m. Audry Somicle testified in favor.

11:52 a.m. Nicholas Schindler testified in favor.

11:54 a.m. Colby Braun, Director for the Department of Corrections, testified in favor.

11:56 a.m. Jaclyn Hall, Executive Director of the ND Association for Justice, testified in opposition and submitted testimony #36961.

12:00 p.m. Chair Larson closed the hearing.

Kendra McCann, Committee Clerk

SENATE JUDICIARY COMMITTEE SENATOR DIANE LARSON, CHAIR February 11, 2025

CHERYL THOMAS, WOMEN'S SERVICES MANAGER PRESENTING TESTIMONY IN SUPPORT OF SENATE BILL 2352

Chair Larson and members of the Senate Judiciary Committee, my name is

Cheryl Thomas, and I am the Women's Services Manager for the North Dakota

Department of Corrections and Rehabilitation (DOCR). As stated in my January 15,

2025, testimony, there is significant research that supports a mother and their babies

bond starting during gestation and continuing to grow after birth. I stand before you

today to provide testimony in support of Senate Bill 2352 which will authorize the

children of incarcerated women to reside at the Heart River Correctional Center

(HRCC). The DOCR is offering an amendment to SB 2352 which will codify that the

policies established by the director must consider the residential safety of the child, the

length of time in which the child may reside within the facility, and treatment or other

penological objectives. This will create and enact a new subsection to section North

Dakota Century Code §54-23.3-04 and amend and reenact North Dakota Century Code

§32-12.2-02, relating to limitation of liability for children residing at HRCC.

The DOCR will make the wellbeing of any infant within its facility priority. The plan is to have the nursery program within one unit of the designed women's facility, which is within the secure perimeter of the facility. This apartment is a secure unit and

¹ Team, S. (2024, March 13). The Mom - Baby Bond: The Science Behind the Magic. Retrieved from soulside: https://www.getsoulside.com/blog/the-mom-baby-bond-the-science-behind-the-magic

will be staff supervised 24 hours a day, 7 days a week. This unit will allow us to use the bedroom as either housing for a resident or a nursery program depending on our population needs. Please note that the draft policy of the Nursery Program is included in your handouts. The policy states that the program is from the birth of the child to 18 months of age. There is a comprehensive application and review process for participation in the nursery program. An incarcerated mother must meet the following criteria to be eligible to participate in the Nursery Program. The incarcerated mother must be: Pregnant at admission at the Heart River Correctional Center (HRCC) and expecting to give birth while housed at the HRCC. The incarcerated mother must affirm they will be the primary caregiver of the child upon their release. Parole Board Review or Good Time Release Date is within 18 months of the birth of the baby. The incarcerated mother must receive immediate and ongoing medical and mental health clearance to participate in the program. The incarcerated mother must be up to date and willing to continue to receive immunizations as recommended by the State. The incarcerated mother must agree to have their child receive immunizations as recommended by the State. The child's father must agree for the child to live with the incarcerated mother at HRCC. Attempts, conspiracy or solicitation to commit certain offenses, past history, including prior convictions may restrict participation in the program. Any incarcerated individuals pending charges and mental health history shall be taken into consideration. Registerable offenses, such as sex offenses or offenders against children shall not participate in the nursery program. If a mother is removed from the program the child will be placed with the emergency/community caregiver. In preparation of the nursery program and after we had the building concept, I met with the Director of Children and Family Services as well as the Director of Zone Operations and shared our plans and an initial layout of the apartments with them, both were in support of this program.

The DOCR already has the following procedures in place, as a majority of DOCR residents have addiction needs. The DOCR conducts urinalysis testing for illegal substances upon arrival and most residents have a clean urinalysis test due to spending time in county jail for criminal proceedings. Parole violators, unlike other placements to the DOCR, come directly to the assigned facility from the community. Parole violators may have a higher rate of positive urinalysis tests for illegal substances. If a resident is pregnant and testing positive for illegal substances, the DOCR would file a 960 report with the local Human Service Zone. All births would take place within a hospital setting, where hospital personnel treat all patients the same. If there is concern that the mother had used while pregnant, the hospital would be made aware and the hospital follows policies for testing the baby and mother. If the baby tests positive for substances the hospital would contact the local Human Service Zone, which is the same process a hospital would follow, if the mother was a DOCR resident or not. The DOCR would work with the hospital and local Human Service Zones to ensure the safety and the best care for the infant, which may not be with the incarcerated mother.

A fiscal note has been provided for this bill in the amount of \$100,000 for the 2027-2029 biennium, as the nursery will not be open until after the new facility is opened, which is scheduled for the fall of 2027. The \$100,000 would cover initial operational costs of items such as cribs, mattresses, rocking chairs, swings, highchairs, and other items that will remain in the apartment. The DOCR anticipates a fiscal note of

\$70,000 for the 2029-2031 biennium which would fund eight infants in this program. The apartment setting can house up to 24 mothers, which will allow a mother and her child to have their own room. I previously stated in verbal testimony that Missouri had a fiscal note of \$500,000 to open their nursery. What I was unclear on was that this amount was also being used to remodel an existing building. With the new women's facilities being built, costs of this nature are not applicable. It should also be noted that the cost of maintaining a nursery unit is often lower than the expense of housing children in a child welfare setting. Currently the State pays foster parents \$870 a month for one child in foster care from infancy to 4 years of age, this would be \$10,440 for 12 months. After the nursery program is established, it is projected that the cost of supporting a mother, and her baby for 12 months, will be less than half of what the State pays for 12 months in foster care. Please note additional cost savings, as a child residing with their incarcerated mother at HRCC, would not require the use of the Child Care Assistance program, which pays for child care costs of children in foster care. Medicaid coverage for a child in foster care or in the care of their mother that is incarcerated with the DOCR would not have any difference in care coverage. There would also be no additional cost of training for incarcerated mothers or nursery caregivers, as the DOCR already provides comprehensive training in mandating reporting, infant, child and adult CPR, AED and First Aid. The DOCR would collaborate with the Department of Health and Human Services, which includes the Human Service Zones, to ensure proper training for all caregivers within the facility.

Improving outcomes for mothers will also reduce future incarceration costs associated with reoffending. In my previous testimony I provided recidivism rates of

some of the already established nurseries in other states. New York state started their program in 1901, Washington state, started their program in 1999, resulting in a decrease in recidivism by 3 to 5 percent. Nebraska opened their nursery program in 1994, has seen a 10 percent decrease in recidivism, Indiana opened their nursery program in 2008, and saw a 16 percent decrease in recidivism, due to these programs. In addition to those recidivism rates, I also have some numbers to share. In the state of Illinois, between 2007 and 2016, only three of 78 nursery program participants returned to prison. In Ohio, in a five-year period, seven out of 74 nursery program participants returned to prison. In West Virginia, no nursery program participants that completed the program returned to prison. In California, their nursery opened in 2011 and since opening only two mothers have returned to prison. And in Delaware, in a one-year period, 23 participants completed the nursery program and only one returned to prison.

A fundamental goal of the DOCR is rehabilitation. Authorizing the DOCR to allow incarcerated mothers to keep their child after birth to 18 months, aligns with this purpose by helping women maintain familial bonds and empowering them to become better parents and citizens upon their release. More than 95 percent of the current DOCR incarcerated population return to our communities. This program supports goals of the North Dakota Department of Health and Human Services and the Child and Family Services Divisions, as well as the Federal Families First Act and the goal of minimizing out of home placement of children by keeping a mother and a child together. The DOCR is committed to the ongoing open collaboration with other State and community partners to ensure this nursery program maintains the safety and wellbeing of the children in their mother's care.

Approving SB 2352 would allow the DOCR in the continuation of building this nursery program and the foundation and building blocks for the DOCR to support our incarcerated women population and ultimately their children, creating the opportunity to end generational incarceration. I urge this committee to consider the long-term benefits that a prison nursery program can offer. They provide a unique opportunity to support incarcerated mothers in their journey toward rehabilitation, while promoting the well-being of their children. The evidence shows that these programs foster stronger families, reduce recidivism, and can ultimately lead to a safer community. ²

Thank you for your time and for considering this important matter. I will stand to answer any questions. Thank you.

² Goshin, Lorie S, Byrne, Mary W, Blanchard-Lewis, Barbara (2014, June) *Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery*. https://pmc.ncbi.nlm.nih.gov/articles/PMC4655430/



Jaclyn Hall, Executive Director jaclyn@ndaj.org

Madam Chair Larson and members of the Senate Judiciary Committee, my name is Jaclyn Hall, I am the Executive Director of the North Dakota Association for Justice. Today, I am here to testify in opposition to SB2352. This legislation was already introduced as SB2115 and was defeated in January.

NDAJ is still opposed to SB2352 as the language in this legislation has not changed from when it was SB2115. will provide immunity for the Department of Corrections for newborns and children residing and utilizing overnight visitation at Heart River Correctional Center unless the injury was affirmatively caused by the negligent act of the employee at DOCR.

Affirmatively is defined as: acting in a deliberate or unequivocal way.

The Department of Corrections (DOCR) needs to be held accountable for newborns in their prisons and transition centers for several important reasons related to the safety, well-being, and rights of both the infants and their incarcerated parents. Holding the DOCR accountable helps ensure the ethical treatment of these vulnerable individuals, as well as upholding broader societal and legal responsibilities. Some key points for liability include:

Duty of Care and Child Welfare

Even in prison settings, the DOCR has a fundamental duty of care toward the safety and well-being of all individuals, including children. Newborns are particularly vulnerable and require proper care, nutrition, medical attention, and a safe environment. The DOCR is responsible for providing these essential needs to the infant while they are within its custody, much like how parents or guardians are held accountable for their child's welfare outside of incarceration.

Legal and Human Rights Protections

Newborns, like all individuals, have basic legal and human rights that must be protected, regardless of their parents' incarceration. Prisons are often high stress and not conducive to nurturing the parent – child bond. These newborns and children have the right to safety, adequate care, and a healthy environment. If the DOCR fails to meet these basic legal responsibilities, they should be held liable under both domestic and



When an incarcerated parent is allowed to stay with their newborn, the DOCR has a responsibility to help facilitate a positive bond and ensure the parent has the proper resources and guidance to care for the child. This is part of the broader rehabilitative process that aims to strengthen family relationships, which can help reduce recidivism and improve outcomes for both the parent and the child after release. If the DOCR fails to provide adequate resources or opportunities for this, they may be seen as failing to meet their obligation to assist in rehabilitation and maintaining family integrity.

Ensuring Proper Transition and Aftercare

When an infant is born in prison or a transition center, the DOCR should also ensure that there are proper plans in place for the child's transition after the parent is released or if the child is moved out of the prison. Failing to make appropriate arrangements for the child's transition back to the community could have serious consequences on the child's stability, attachment, and long-term welfare. If immunity exists, can we ensure they meet the necessary standards for preparing both the parent and the child for reentry into society.

Prevention of Child Abuse or Neglect

Prison environments can create situations where neglect or abuse can occur, either by other prisoners or by the stress of the environment itself. If an inmate were to hurt the child, or assault an overnight teenager, where is the liability? Who will protect these children when employees are immune from liability unless they directly cause injury? The DOCR must be held accountable to ensure there is no risk of abuse, either physical or emotional, to infants or children within its care. If the department fails to adequately protect these vulnerable children, it should be held liable for any harm caused.

Public Accountability and Ethical Responsibility

Finally, holding the DOCR accountable for the well-being of infants within their care reinforces ethical standards in the criminal justice system. It sets a precedent that the treatment of incarcerated parents and their children is an important issue for society, demanding that the government and prison



systems take responsibility for ensuring humane and just conditions for all individuals, including those born in custody.

Conclusion

Placing newborns and young children in a correctional facility creates several liability concerns due to the unique and sensitive nature of the environment.

Holding the Department of Corrections accountable for the well-being of newborns in their custody is essential to ensure the protection of the child's rights and to maintain ethical standards within the justice system. Staff training, establishing security standards, adhering to child welfare laws and creating a secure environment for these young children are essential. They also are not setup, so supporting immunity provisions are premature.

Immunity does not ensure these children will be cared for at the level they deserve. The DOCR has a responsibility to create environments where infants can be cared for appropriately, and where the safety and emotional health of both the child and the incarcerated parent are prioritized. If the DOCR fails in this duty, it must be held accountable for the consequences that arise.

Please consider a Do Not Pass on SB 2352. DOCR has not created the processes to ensure these young children and infants will be safe, so providing immunity is premature.

Testimony Prepared for the

The North Dakota Senate Judiciary Committee

Senate Bill 2352 Related to the Authorization for Children of Inmates to Reside at the Heart River Correctional Center and Relating to Limitation of Liability for Children Residing at the Heart River Correctional Center

February 11th, 2025

By: Chelsea Flory, Burleigh County Human Service Zone Director

Chair Larson, and members of the North Dakota Senate Judiciary Committee, my name is Cheslea Flory, and I am the Director for the Burleigh County Human Service Zone, which includes the county of Burleigh. In addition, I am a member of the North Dakota Human Service Zone Director Association. I am here today to provide testimony in support of Senate bill 2352 relating to the authorization for children of inmates to reside at the Heart River Correctional Center and relating to limitation of liability for children residing at the Heart River Correctional Center.

Human Service Zones are mandated to provide child welfare services, including child protection services, foster care and in home case management, as well as receiving Child in Need of Services (CHINS) referrals. It is through these duties that we interact with residents of Department of Correction and Rehabilitation (DOCR) facilities, as well as their children. Often, we serve as the legal custodian for children with incarcerated parents and as the custodian we work with the family towards the goal of reunification. These active efforts could include conducting family visits both virtually and within the correctional facilities, engagement regarding consent for medical needs or service planning and providing parents with parenting education based on the needs of the child and family.

Additionally, Human Service Zones are responsible for administering economic assistance programs for the state of North Dakota. Zones have been collaborating with DOCR to facilitate outreach efforts to include support with application for economic assistance programs, to ensure the residents have an opportunity for continuum of services to avoid any gaps in medical coverage, as well as securing additional economic assistance benefits, they may be eligible for.

SB 2352 allows for an opportunity where residents can care for their children in a safe and supportive environment. This practice would support the family bond and connection while providing active parenting opportunities where skills can be assessed, and education can be provided that could support the overall goal of building safe and healthy families. Through conversation with DOCR and Heart River Correctional Center (HRCC), it is my understanding that this option for children to reside at HRCC applies to children birth to eighteen months old, and residents wishing to participate in this are selected by an agency committee through an application process.

The North Dakota Human Service Zone Director Association is in support of the fundamental aspects of this proposed bill and would look for ongoing collaboration between the Department of Health and Human Services (DHHS), DOCR and HRCC regarding the development and review of policy and procedures relating to this. It would be crucial that HRCC have clear policy, procedure and training related to the safety of the children. This could include necessary checks of registries relating to offenses against children, as well as specific training such as safe sleep, pediatric CPR and mandated reporting of abuse and neglect to name a few.

In conclusion, our association looks forward to opportunity for collaboration regarding policy and procedure development, review and implementation to ensure desired outcomes for all parties. Thank you for your consideration.

25.1336.01000

Sixty-ninth Legislative Assembly of North Dakota

PROPOSED AMENDMENTS TO SENATE BILL NO. 2352

Introduced by

Senators Dever, Hogan, Magrum, Mathern

- 1 A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North
- 2 Dakota Century Code, relating to authorization for children of inmates to reside at the Heart
- 3 River correctional center; and to amend and reenact section 32-12.2-02 of the North Dakota
- 4 Century Code, relating to limitation of liability for children residing at the Heart River correctional
- 5 center.

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6 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- SECTION 1. AMENDMENT. Section 32-12.2-02 of the North Dakota Century Code is
 amended and reenacted as follows:
 - 32-12.2-02. Liability of the state Limitations Statute of limitations. (Effective through July 31, 2027)
 - The state may only be held liable for money damages for an injury proximately caused by the negligence or wrongful act or omission of a state employee acting within the employee's scope of employment under circumstances in which the employee would be personally liable to a claimant in accordance with the laws of this state, or an injury caused from some condition or use of tangible property under circumstances in which the state, if a private person, would be liable to the claimant. No claim may be brought against the state or a state employee acting within the employee's scope of employment except a claim authorized under this chapter or otherwise authorized by the legislative assembly. The enactment of a law, rule, or regulation to protect any person's health, safety, property, or welfare does not create a duty of care on the part of the state, its employees, or its agents, if that duty would not otherwise exist.
 - The liability of the state under this chapter is limited to a total of three hundred seventy-five thousand dollars per person and one million dollars for any number of claims arising from any single occurrence. The state may not be held liable, or be

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ordered to indemnify a state employee held liable, for punitive or exemplary damages. Any amount of a judgment against the state in excess of the one million dollar limit imposed under this subsection may be paid only if the legislative assembly adopts an appropriation authorizing payment of all or a portion of that amount. A claimant may present proof of the judgment to the director of the office of management and budget who shall include within the proposed budget for the office of management and budget a request for payment for the portion of the judgment in excess of the limit under this section at the next regular session of the legislative assembly after the judgment is rendered. The liability limits under this subsection must be adjusted annually as follows:

- a. On July 1, 2023, a total of four hundred six thousand two hundred and fifty dollars per person and one million six hundred twenty-five thousand dollars for any single occurrence.
- b. On July 1, 2024, a total of four hundred thirty-seven thousand five hundred dollars per person and one million seven hundred fifty thousand dollars for any single occurrence.
- c. On July 1, 2025, a total of four hundred sixty-eight thousand seven hundred fifty dollars per person and one million eight hundred seventy-five thousand dollars per occurrence.
- d. On July 1, 2026, a total of five hundred thousand dollars per person and two million dollars per occurrence.
- 3. Neither the state nor a state employee may be held liable under this chapter for any of the following claims:
 - A claim based upon an act or omission of a state employee exercising due care in the execution of a valid or invalid statute or rule.
 - b. A claim based upon a decision to exercise or perform or a failure to exercise or perform a discretionary function or duty on the part of the state or its employees, regardless of whether the discretion involved is abused or whether the statute, order, rule, or resolution under which the discretionary function or duty is performed is valid or invalid. Discretionary acts include acts, errors, or omissions

1		in th	e design of any public project but do not include the drafting of plans and
2		spe	cifications that are provided to a contractor to construct a public project.
3	C.	A cla	aim resulting from the decision to undertake or the refusal to undertake any
4		legis	slative or quasi-legislative act, including the decision to adopt or the refusal to
5		ado	pt any statute, order, rule, or resolution.
6	d.	A cla	aim resulting from a decision to undertake or a refusal to undertake any
7		judi	cial or quasi-judicial act, including a decision to grant, to grant with conditions,
8		to re	efuse to grant, or to revoke any license, permit, order, or other administrative
9		арр	roval or denial.
10	e.	A cl	aim relating to injury directly or indirectly caused by a person who is not
11		emp	ployed by the state.
12	f.	A cl	aim relating to injury directly or indirectly caused by the performance or
13		non	performance of a public duty, including:
14		(1)	Inspecting, licensing, approving, mitigating, warning, abating, or failing to so
15			act regarding compliance with or the violation of any law, rule, regulation, or
16			any condition affecting health or safety.
17		(2)	Enforcing, monitoring, or failing to enforce or monitor conditions of
18			sentencing, parole, probation, or juvenile supervision.
19		(3)	Providing or failing to provide law enforcement services in the ordinary
20			course of a state's law enforcement operations.
21	g.	"Pu	blic duty" does not include action of the state or a state employee under
22		circ	umstances in which a special relationship can be established between the
23		stat	e and the injured party. A special relationship is demonstrated if all of the
24		follo	owing elements exist:
25		(1)	Direct contact between the state and the injured party.
26		(2)	An assumption by the state, by means of promises or actions, of an
27			affirmative duty to act on behalf of the party who allegedly was injured.
28		(3)	Knowledge on the part of the state that inaction of the state could lead to
29			harm.

1		(4) The injured party's justifiable reliance on the state's affirmative undertaking,
2		occurrence of the injury while the injured party was under the direct control
3		of the state, or the state action increases the risk of harm.
4	h.	A claim resulting from the assessment and collection of taxes.
5	i.	A claim resulting from snow or ice conditions, water, or debris on a highway or on
6		a public sidewalk that does not abut a state-owned building or parking lot, except
7		when the condition is affirmatively caused by the negligent act of a state
8		employee.
9	j.	A claim resulting from any injury caused by a wild animal in its natural state.
10	k.	A claim resulting from the condition of unimproved real property owned or leased
11		by the state.
12	1.	A claim resulting from the loss of benefits or compensation due under a program
13		of public assistance.
14	m.	A claim resulting from the reasonable care and treatment, or lack of care and
15		treatment, of a person at a state institution where reasonable use of available
16		appropriations has been made to provide care.
17	n.	A claim resulting from damage to the property of a patientresident or inmate of a
18		state institution.
19	0.	A claim resulting from any injury to a resident or an inmate of a state institution if
20		the injury is caused by another resident or inmate of that institution.
21	p.	A claim resulting from environmental contamination, except to the extent that
22		federal environmental law permits the claim.
23	q.	A claim resulting from a natural disaster, an act of God, a military action, or an act
24		or omission taken as part of a disaster relief effort.
25	r.	A claim for damage to property owned by the state.
26	S.	A claim for liability assumed under contract, except this exclusion does not apply
27		to liability arising from a state employee's operation of a rental vehicle if the loss
28		is not covered by the state employee's personal insurance or by the vehicle renta
29		company.

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- Sixty-ninth Legislative Assembly 1 A claim resulting from an injury to a child residing at the Heart River correctional t. 2 center, except when the injury is affirmatively caused by the negligent act of a 3 state employee. 4 An action brought under this chapter must be commenced within the period provided 4. 5 in section 28-01-22.1. 6 5. This chapter does not create or allow any claim that does not exist at common law or 7 has not otherwise been created by law as of April 22, 1995. 8 Liability of the state - Limitations - Statute of limitations. (Effective after July 31, 9 2027) 10 1. The state may only be held liable for money damages for an injury proximately caused 11
 - by the negligence or wrongful act or omission of a state employee acting within the employee's scope of employment under circumstances in which the employee would be personally liable to a claimant in accordance with the laws of this state, or an injury caused from some condition or use of tangible property under circumstances in which the state, if a private person, would be liable to the claimant. No claim may be brought against the state or a state employee acting within the employee's scope of employment except a claim authorized under this chapter or otherwise authorized by the legislative assembly. The enactment of a law, rule, or regulation to protect any person's health, safety, property, or welfare does not create a duty of care on the part of the state, its employees, or its agents, if that duty would not otherwise exist.
 - 2. The liability of the state under this chapter is limited to a total of two hundred fifty thousand dollars per person and one million dollars for any number of claims arising from any single occurrence. The state may not be held liable, or be ordered to indemnify a state employee held liable, for punitive or exemplary damages. Any amount of a judgment against the state in excess of the one million dollar limit imposed under this subsection may be paid only if the legislative assembly adopts an appropriation authorizing payment of all or a portion of that amount. A claimant may present proof of the judgment to the director of the office of management and budget who shall include within the proposed budget for the office of management and budget a request for payment for the portion of the judgment in excess of the limit under this

1		sect	ion a	t the next regular session of the legislative assembly after the judgment is
2		rend	dered.	
3	3.	Neit	her th	ne state nor a state employee may be held liable under this chapter for any of
4		the	follow	ving claims:
5		a.	A cla	aim based upon an act or omission of a state employee exercising due care
6			in th	ne execution of a valid or invalid statute or rule.
7		b.	A cla	aim based upon a decision to exercise or perform or a failure to exercise or
8			perf	form a discretionary function or duty on the part of the state or its employees,
9			rega	ardless of whether the discretion involved is abused or whether the statute,
10			orde	er, rule, or resolution under which the discretionary function or duty is
11			perf	formed is valid or invalid. Discretionary acts include acts, errors, or omissions
12			in th	ne design of any public project but do not include the drafting of plans and
13			spe	cifications that are provided to a contractor to construct a public project.
14		C.	A cl	aim resulting from the decision to undertake or the refusal to undertake any
15			legi	slative or quasi-legislative act, including the decision to adopt or the refusal to
16			ado	pt any statute, order, rule, or resolution.
17		d.	A cl	aim resulting from a decision to undertake or a refusal to undertake any
18			judi	cial or quasi-judicial act, including a decision to grant, to grant with conditions,
19			to re	efuse to grant, or to revoke any license, permit, order, or other administrative
20			арр	roval or denial.
21		e.	A cl	aim relating to injury directly or indirectly caused by a person who is not
22			emp	ployed by the state.
23		f.	A cl	aim relating to injury directly or indirectly caused by the performance or
24			non	performance of a public duty, including:
25			(1)	Inspecting, licensing, approving, mitigating, warning, abating, or failing to so
26				act regarding compliance with or the violation of any law, rule, regulation, or
27				any condition affecting health or safety.
28			(2)	Enforcing, monitoring, or failing to enforce or monitor conditions of
29				sentencing, parole, probation, or juvenile supervision.
30			(3)	Providing or failing to provide law enforcement services in the ordinary
31				course of a state's law enforcement operations.

1	g.	"Public duty" does not include action of the state or a state employee under
2		circumstances in which a special relationship can be established between the
3		state and the injured party. A special relationship is demonstrated if all of the
4		following elements exist:
5		(1) Direct contact between the state and the injured party.
6		(2) An assumption by the state, by means of promises or actions, of an
7		affirmative duty to act on behalf of the party who allegedly was injured.
8		(3) Knowledge on the part of the state that inaction of the state could lead to
9		harm.
10		(4) The injured party's justifiable reliance on the state's affirmative undertaking,
11		occurrence of the injury while the injured party was under the direct control
12		of the state, or the state action increases the risk of harm.
13	h.	A claim resulting from the assessment and collection of taxes.
14	i.	A claim resulting from snow or ice conditions, water, or debris on a highway or on
15		a public sidewalk that does not abut a state-owned building or parking lot, except
16		when the condition is affirmatively caused by the negligent act of a state
17		employee.
18	j.	A claim resulting from any injury caused by a wild animal in its natural state.
19	k.	A claim resulting from the condition of unimproved real property owned or leased
20		by the state.
21	l.	A claim resulting from the loss of benefits or compensation due under a program
22		of public assistance.
23	m.	A claim resulting from the reasonable care and treatment, or lack of care and
24		treatment, of a person at a state institution where reasonable use of available
25		appropriations has been made to provide care.
26	n.	A claim resulting from damage to the property of a patientresident or inmate of a
27		state institution.
28	0.	A claim resulting from any injury to a resident or an inmate of a state institution if
29		the injury is caused by another resident or inmate of that institution.
30	p.	A claim resulting from environmental contamination, except to the extent that
31		federal environmental law permits the claim

Sixty-ninth Legislative Assembly

1		q.	A claim resulting from a natural disaster, an act of God, a military action, or an act					
2			or omission taken as part of a disaster relief effort.					
3		r.	A claim for damage to property owned by the state.					
4		S.	A claim for liability assumed under contract, except this exclusion does not apply					
5			to liability arising from a state employee's operation of a rental vehicle if the loss					
6			is not covered by the state employee's personal insurance or by the vehicle rental					
7			company.					
8		<u>t.</u>	A claim resulting from an injury to a child residing at the Heart River correctional					
9			center, except when the injury is affirmatively caused by the negligent act of a					
10			state employee.					
11	4.	An a	action brought under this chapter must be commenced within the period provided					
12		in s	ection 28-01-22.1.					
13	5.	This	This chapter does not create or allow any claim that does not exist at common law or					
14		has	not otherwise been created by law as of April 22, 1995.					
15	SEC	TIOI	V 2. A new subsection to section 54-23.3-04 of the North Dakota Century Code is					
16	created	and e	enacted as follows:					
17		<u>To 6</u>	employ personnel and establish policies and procedures to authorize a child of a					
18		<u>fem</u>	ale inmate to reside at the Heart River correctional center under the care and					
19		gen	eral control of the female inmate. Policies established by the director must consider					
20		the	residential safety of the child, the length of time in which the child may reside within					
21		the	facility, and treatment or other penological objectives.					



Corrections and Rehabilitation

POLICY NUMBER AND SECURITY:

3A-28 – One of the following can be placed after the policy number:

- This policy has no confidential or exempt information.
- This policy may contain confidential or exempt information; please consult with the Records Coordinator prior to disclosure.

RELATED STANDARDS (such as ACA/ACI/ACRS/PREA):

		, to tto	ст — у.	
POLICY & PROC	CEDURES			
RELATED REFERENCES:				
Appendices:				
Manuals:				
Related DOCR Training:				
Note:				
DIVISION: Division of Adult Services	FACILITY/WORK GRO Heart River Corrections		TOPIC: Nursery Program	
Effective Date:				
				e
	Summary of Revis	sion or R	evisions	
New policy written by Chery	/I Thomas.			
				

- d. The incarcerated mother must receive immediate and ongoing medical and mental health clearance to participate in the program.
- e. The incarcerated mother must be up to date and willing to continue to receive immunizations as recommended by the State.
- f. The incarcerated mother must agree to have their child receive immunizations as recommended by the State.
- g. The child's father must be in agreement for the child to live with the incarcerated mother at HRCC.
- h. The incarcerated mother with the following offenses will require additional review and approval from Director of the Department Corrections and Rehabilitation:
 - 1.) 12.1-16 Homicide (includes murder and manslaughter)
 - 2.) 12.1-17-02 Aggravated Assaults
 - 3.) 12.1-17-01.2 Domestic Violence
 - 4.) 12.1-17-03 Reckless Endangerment
 - 5.) 12.1-17-04, 07 & 07.1 Terrorizing, Harassment, Stalking
 - 6.) 12.1-18 Kidnapping Felonious restraint
 - 7.) 12.1-20 Sex Offenses
 - 8.) 12.1-27.2 Sexual Performance by Children
 - 9.) 12.1-29 Prostitution
 - 10.) 12.1-36 Female Genital Mutilation
 - 11.) 12.1-40 Human Trafficking
 - 12.) 14-09-22 Abuse of a child
 - 13.) 14-09-22.1 Neglect of child
 - 14.) No contact or protection orders with the child.
 - 15.) Sex Offender registration requirement.
 - 16.) Offender Against Children registration requirement.
- Attempts, conspiracy or solicitation to commit these offenses.
 Past history, including prior convictions, may also restrict participation. Any incarcerated individuals pending charges and

 Upon receipt of the above forms, the Nursery Program Committee will review all submitted applications for review and approval into the program.

C. Care of the child:

- 1. The incarcerated mother will be responsible for the care of their child.
- 2. The incarcerated mother must provide for the daily needs of their child, such as waking, dressing their child and the following:

a. Feeding:

- An incarcerated mother may breast feed with medical approval.
 - a.) Breast feeding may be done as necessary.
 - b.) Proper hygiene must be followed.
 - c.) Bottle preparations including formula, milk, water and sanitation of equipment and proper storage of all food products.
 - d.) Introduction to cereal and food other than breast milk or formula will follow the Dietary Guidelines for the Americans and the American Academy of Pediatrics.
- 2.) Food, formula, milk and water will be provided by HRCC.
- b. Bathing, the infant and child soap, shampoo and other hygiene products, such as diapers will be provided by HRCC.

c. Laundry:

- Child clothing will be provided by HRCC.
- 2.) Laundry facilities and detergent for the child, will be available.
- d. The Nursery Program Coordinator will address any other additional needs of the incarcerated mother or child.
- e. Sleeping arrangements:
 - HRCC will provide approved cribs.
 - The child will sleep in the same room as it's incarcerated mother.
- f. Child's property:

3A-28, Nursery Program - Page 5 of 9

- 3. The incarcerated mother must notify staff if she is leaving the unit with or without their child and provide staff with who is caring for the child.
- Incarcerated mothers and their child are encouraged to be outside each day, when weather permits. The child must be in appropriate outside clothing during corresponding weather.
- 5. The child may go to activities and special events with their incarcerated mother, as approved by the Nursery Program Coordinator.
- 6. Incarcerated mother and their child may participate in visitation.
- 7. Incarcerated mothers and their child must follow the family visitation rules and regulations as any other visitor. Items allowed in visitation are as follows:
 - Two bottles
 - b. Four diapers and wipes
 - c. Pacifier
 - d. Blanket
 - e. One personal toy
- 8. Children are not allowed in the following areas:
 - Incarcerated mothers programming or classes that are assigned by the case planning committee.
 - b. Incarcerated mother's medical appointments or procedures.
- A child may be restricted from areas within HRCC.

F. Nursery Caregivers:

- 1. HRCC will provide the opportunity for Nursery Caregiver positions as institutional work.
- Nursery Caregivers must complete a job application and successfully complete an interview with an interview committee.
- 3. Nursery Caregivers must have a high school diploma or GED.
- Nursery Caregivers must have a maintain a good institutional behavior.
- Nursery Caregivers must complete all training, as designated by the Nursery Program Coordinator.
- Nursery Caregiver positions will not be in direct conflict of assigned case planned programs.

- b. Physical altercations of any kind between program participants or other incarcerated individuals, DOCR employees.
- c. Placement of the incarcerated mother into the Special Assistance Unit (SAU).
- d. Failure to participate in programming, work, education or behavioral expectations.
- 3. The incarcerated mother will be notified in writing by the Nursery Program Committee and signed off by the Warden, regarding removal from the program.
- 4. The incarcerated mother will be removed from the Nursery Program and returned to the appropriate housing assignment.
- 5. The child will be cared for by a Nursery Caregiver, as assigned.
- 6. The child will be picked up from the facility within 24 hours of the incarcerated mother's removal.
- 6. **SIGNATURE:** This policy with procedures and applicable manuals becomes effective when signed by the Director of the Department of Corrections and Rehabilitation.

Colby Braun, Director, ND DO	CR	Date

2027 - 2029					
Biennium					
Item	Number of items	Item cost	Projected Cost	Actual cost	Comments
Crib	8	250	2000		initial cost
Mattress & pad	8	100	800		initial cost
Rocking chair	8	200	1600		initial cost
Swing	2	100	200		initial cost
Boucey chair	4	50	200		initial cost
High chair	4	100	400		initial cost
Diapers		840	6720		on going cost
Wipes		300	2400		on going cost
Formula		1500	12000		ongoing cost
Play mat	8	50	400		initial cost
Clothing	8	600	4800		ongoing cost
Bottles & nipples		100	800		ongoing cost
Bottle cleaner and sanitizer	8	70	560		initial cost
Burp cloths	8	20	160		ongoing cost
Nursing pillow	8	50	400		initial cost
Bedding & Blankets		200	1600		initial cost
Infant carseats & stroller	8	200	1600		initial cost
Toddler car seat	8	300	2400		DOCR would buy and let mom leave with carseat - forever carseat
Misc costs		500	4000		ongoing cost - extras (swaddle blankets), bibs, OTC medicines, diaper rash creams, shampoo, soap, sippy cups, spoons, forks, dishes, pacificers

Changing table pads	4	40	160		initial cost
Changing table cover	8	20	160		initial cost
Age appropriate toys			1000		initial costs
Diaper bag	8 (50	400		ongoing cost
Bath toys	8	20	160		ongoing cost
Sound machine	8	60	480		initial cost
Baby Monitors	8	100	800		initial cost
Diaper pail	8	60	480		initial cost
Daiper pail refills	8	100	100		ongoing cost
Infant bathtub	4	50	200		initial cost
Infant towels	8	20 .	160		initial cost
Infant washcloths	8	20	160		initial cost
Baby grooming kits	8	20	160		ongoing cost
Laundry Detergent	- N	20	240		ongoing cost
			47700	per year	
			95400 for biennium		
* per baby comments are	also per one year				
* changing tables will be p design	art of building				
* no additional training cos					
* \$870 is the current mont	hly rate of a 0-4 year	old in fost	er care.		
* no Child Care Assistance	costs				

2029 - 2031					
Biennium					
Item	Number of items	Item cost	Projected Cost	Actual	Comments
Diapers		840	6720		on going cost
Wipes		300	2400		on going cost
Formula		1500	12000		ongoing cost
Clothing	8	600	4800		ongoing cost
Bottles & nipples		100	800		ongoing cost
Burp cloths	8	20	160		ongoing cost
Toddler car seat	8	300	2400		do we buy and let mom leave with carseat - forever carseat
Misc costs		500	4000		ongoing cost - extras (swaddle blankets), bibs, OTC medicines, diaper rash creams, shampoo, soap, sippy cups, spoons, forks, dishes, pacificers
Diaper bag	8	50	400		ongoing cost
Bath toys	8	20	160		ongoing cost
Daiper pail refills	8	100	100		ongoing cost
Baby grooming kits	8	20	160		ongoing cost
Laundry Detergent		20	240		ongoing cost
			34340	per year	
			68680 for be	innium	
* per baby comments ; year	are also per one				
* changing tables will b	oe part of building	design			
* no additional training	costs				
* \$870 is the current m	onthly rate of a 0-	4 year old in	foster care.		
* no Child Care Assista	ance costs				

Training Requirements for Mothers, Nursery Caregivers & Staff	Type of training	Cost
CPR & AED for infant, children & adult	in person	0
First Aid	in person	0
Naloxone Administration	online or in person	0
Blood Born Pathogens/Universal Precautions	online	0
Fire Safety	online	0
Mandated Reporting	online	0
Babysitting class (Morton Co. Extension)	in person	0
Safe Sleeping	in person	0
Parenting Class (PIO)	in person	0
Early Childhood Training	in person	0
** Will consult with ND Child Care Aware		

2025 SENATE STANDING COMMITTEE MINUTES

Judiciary Committee

Peace Garden Room, State Capitol

SB 2352 2/12/2025

Relating to authorization for children of inmates to reside at the Heart River correctional center.

9:00 a.m. Chair Larson opened the meeting.

Members present:

Chair Larson, Vice Chairman Paulson, Senators: Castaneda, Cory, Luick, Myrdal, Braunberger.

Discussion Topics:

- Risk management consultation
- Age specification for children
- Intent clarification
- Document distribution issues

9:01 a.m. Senator Paulson introduced proposed amendment and submitted testimony #38353.

9:04 a.m. Senator Paulson moved amendment LC# 25.1336.01001.

9:04 a.m. Senator Myrdal seconded.

9:04 a.m. Voice Vote - Motion Passed.

9:09 a.m. Senator Braunberger moved a Do Pass as amended and rerefer to Appropriation committee.

9:09 a.m. Senator Luick seconded the motion.

Senators	Vote
Senator Diane Larson	Υ
Senator Bob Paulson	Υ
Senator Ryan Braunberger	Υ
Senator Jose L. Casteneda	Υ
Senator Claire Cory	N
Senator Larry Luick	Υ
Senator Janne Myrdal	Υ

Motion Passed 6-1-0.

9:12 a.m. Senator Paulson will carry the bill.

9:12 a.m. Chair Larson closed the hearing.

Senate Judiciary Committee SB 2352 2/12/2025 Page 2

Kendra McCann, Committee Clerk

25.1336.01001 Title.02000

Sixty-ninth Legislative Assembly of North Dakota Prepared by the Legislative Council staff for Senator Paulson February 11, 2025

PROPOSED AMENDMENTS TO

2,12,25

SENATE BILL NO. 2352

Introduced by

Senators Dever, Hogan, Magrum, Mathern

- 1 A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North
- 2 Dakota Century Code, relating to authorization for children of inmates to reside at the Heart
- 3 River correctional center; and to amend and reenact section 32-12.2-02 of the North Dakota
- 4 Century Code, relating to limitation of liability for children residing at the Heart River correctional
- 5 center.

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6 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

7 SECTION 1. AMENDMENT. Section 32-12.2-02 of the North Dakota Century Code is amended and reenacted as follows:

32-12.2-02. Liability of the state - Limitations - Statute of limitations. (Effective through July 31, 2027)

1. The state may only be held liable for money damages for an injury proximately caused by the negligence or wrongful act or omission of a state employee acting within the employee's scope of employment under circumstances in which the employee would be personally liable to a claimant in accordance with the laws of this state, or an injury caused from some condition or use of tangible property under circumstances in which the state, if a private person, would be liable to the claimant. No claim may be brought against the state or a state employee acting within the employee's scope of employment except a claim authorized under this chapter or otherwise authorized by the legislative assembly. The enactment of a law, rule, or regulation to protect any

- person's health, safety, property, or welfare does not create a duty of care on the part of the state, its employees, or its agents, if that duty would not otherwise exist.
- The liability of the state under this chapter is limited to a total of three hundred seventy five thousand dollars per person and one million dollars for any number of claims arising from any single occurrence. The state may not be held liable, or be ordered to indemnify a state employee held liable, for punitive or exemplary damages. Any amount of a judgment against the state in excess of the one million dollar limit imposed under this subsection may be paid only if the legislative assembly adopts an appropriation authorizing payment of all or a portion of that amount. A claimant may present proof of the judgment to the director of the office of management and budget who shall include within the proposed budget for the office of management and budget a request for payment for the portion of the judgment in excess of the limit under this section at the next regular session of the legislative assembly after the judgment is rendered. The liability limits under this subsection must be adjusted annually as follows:
 - a. On July 1, 2023, a total of four hundred six thousand two hundred and fifty dollars per person and one million six hundred twenty-five thousand dollars for any single-occurrence.
 - On July 1, 2024, a total of four hundred thirty-seven thousand five hundred dollars per person and one million seven hundred fifty thousand dollars for any single occurrence.
- c. On July 1, 2025, a total of four hundred sixty-eight thousand seven hundred fifty dollars per person and one million eight hundred seventy-five thousand dollars per-occurrence.
 - d. On July 1, 2026, a total of five hundred thousand dollars per person and two million dollars per occurrence.
 - Neither the state nor a state employee may be held liable under this chapter for any of the following claims:
 - a. A claim based upon an act or omission of a state employee exercising due care in the execution of a valid or invalid statute or rule.

Sixty-ninth Legislative Assembly

JB 3018

1	——b.	A claim based upon a decision to exercise or perform or a failure to exercise or
2		perform a discretionary function or duty on the part of the state or its employees,
3		regardless of whether the discretion involved is abused or whether the statute,
4		order, rule, or resolution under which the discretionary function or duty is
5		performed is valid or invalid. Discretionary acts include acts, errors, or omissions
6		in the design of any public project but do not include the drafting of plans and
7		specifications that are provided to a contractor to construct a public project.
8	C.	A claim resulting from the decision to undertake or the refusal to undertake any
9		legislative or quasi-legislative act, including the decision to adopt or the refusal to
10		adopt any statute, order, rule, or resolution.
11	d.	A claim resulting from a decision to undertake or a refusal to undertake any
12		judicial or quasi-judicial act, including a decision to grant, to grant with conditions,
13		to refuse to grant, or to revoke any license, permit, order, or other administrative
14		approval or denial.
15	е.	A claim relating to injury directly or indirectly caused by a person who is not
16		employed by the state.
17	f.	A claim relating to injury directly or indirectly caused by the performance or
18		nonperformance of a public duty, including:
19		(1) Inspecting, licensing, approving, mitigating, warning, abating, or failing to so
20		act regarding compliance with or the violation of any law, rule, regulation, or
21		any condition affecting health-or safety.
22		(2) Enforcing, monitoring, or failing to enforce or monitor conditions of
23		sentencing, parole, probation, or juvenile supervision.
24	1000	(3) Providing or failing to provide law enforcement services in the ordinary
25		course of a state's law enforcement operations.
26	g.	"Public duty" does not include action of the state or a state employee under
27		circumstances in which a special relationship can be established between the
28		state and the injured party. A special relationship is demonstrated if all of the
29		following elements exist:
30		(1) Direct contact between the state and the injured party.

1		(2) An assumption by the state, by means of promises or actions, of an
2	*	affirmative duty to act on behalf of the party who allegedly was injured.
3	-	(3) Knowledge on the part of the state that inaction of the state could lead to
4		harm.
5	-	(4) The injured party's justifiable reliance on the state's affirmative undertaking,
6		occurrence of the injury while the injured party was under the direct control
7		of the state, or the state action increases the risk of harm.
8	——————————————————————————————————————	A claim resulting from the assessment and collection of taxes.
9	i.	A claim resulting from snew or ice conditions, water, or debris on a highway or on
10		a public sidewalk that does not abut a state-owned building or parking lot, except
11		when the condition is affirmatively caused by the negligent act of a state
12		employee.
13	j.	A claim resulting from any injury caused by a wild animal in its natural state.
14		A claim resulting from the condition of unimproved real property owned or leased
15		by the state.
16	<u> </u>	A claim resulting from the loss of benefits or compensation due under a program
17		of public assistance.
18	m.	A claim resulting from the reasonable care and treatment, or lack of care and
19		treatment, of a person at a state institution where reasonable use of available
20		appropriations has been made to provide care.
21	n.	A claim resulting from damage to the property of a patient resident or inmate of a
22		state institution.
23	0.	A claim resulting from any injury to a resident or an inmate of a state institution if
24		the injury is caused by another resident or inmate of that institution.
25	———р.	A claim resulting from environmental contamination, except to the extent that
26		federal environmental law permits the claim.
27	q.	A claim resulting from a natural disaster, an act of God, a military action, or an act
28		or omission taken as part of a disaster relief effort.
29	r.	A claim for damage to property owned by the state.
30		A claim for liability assumed under contract, except this exclusion does not apply
31		to-liability arising from a state employee's operation of a rental vehicle if the loss



1 is not covered by the state employee's personal insurance or by the vehicle rental 2 company. 3 A claim resulting from an injury to a child residing at the Heart River correctional 4 center, except when the injury is affirmatively caused by the negligent act of a 5 state employee. 6 An action brought under this chapter must be commenced within the period provided 7 in section 28-01-22.1. 8 This chapter does not create or allow any claim that does not exist at common law or 9 has not otherwise been created by law as of April 22, 1995. 10 Liability of the state - Limitations - Statute of limitations. (Effective after July 31, 11 2027) 12 The state may only be held liable for money damages for an injury proximately caused 13 by the negligence or wrongful act or omission of a state employee acting within the 14 employee's scope of employment under circumstances in which the employee would 15 be personally liable to a claimant in accordance with the laws of this state, or an injury 16 caused from some condition or use of tangible property under circumstances in which 17 the state, if a private person, would be liable to the claimant. No claim may be brought 18 against the state or a state employee acting within the employee's scope of 19 employment except a claim authorized under this chapter or otherwise authorized by 20 the legislative assembly. The enactment of a law, rule, or regulation to protect any 21 person's health, safety, property, or welfare does not create a duty of care on the part 22 of the state, its employees, or its agents, if that duty would not otherwise exist. 23 The liability of the state under this chapter is limited to a total of two hundred fifty 24 thousand dollars per person and one million dollars for any number of claims arising 25 from any single occurrence. The state may not be held liable, or be ordered to 26 indemnify a state employee held liable, for punitive or exemplary damages. Any 27 amount of a judgment against the state in excess of the one million dollar limit 28 imposed under this subsection may be paid only if the legislative assembly adopts an 29 appropriation authorizing payment of all or a portion of that amount. A claimant may 30 present proof of the judgment to the director of the office of management and budget 31

who shall include within the proposed budget for the office of management and budget

AB 6008

1	a request for payment for the portion of the judgment in excess of the limit under this
2	section at the next regular session of the legislative assembly after the judgment is
3	rendered.
4	3. Neither the state nor a state employee may be held liable under this chapter for any of
5	the following claims:
6	a. A claim based upon an act or omission of a state employee exercising due care
7	in the execution of a valid or invalid statute or rule.
8	b. A claim based upon a decision to exercise or perform or a failure to exercise or
9	perform a discretionary function or duty on the part of the state or its employees,
10	regardless of whether the discretion involved is abused or whether the statute,
11	order, rule, or resolution under which the discretionary function or duty is
12	performed is valid or invalid. Discretionary acts include acts, errors, or omissions
13	in the design of any public project but do not include the drafting of plans and
14	specifications that are provided to a contractor to construct a public project.
15	c. A claim resulting from the decision to undertake or the refusal to undertake any
16	legislative or quasi-legislative act, including the decision to adopt or the refusal to
17	adopt any statute, order, rule, or resolution.
18	d. A claim resulting from a decision to undertake or a refusal to undertake any
19	judicial or quasi-judicial act, including a decision to grant, to grant with conditions,
20	to refuse to grant, or to revoke any license, permit, order, or other administrative
21	approval or denial.
22	e. A claim relating to injury directly or indirectly caused by a person who is not
23	employed-by the state.
24	f. A claim relating to injury directly or indirectly caused by the performance or
25	nonperformance of a public duty, including:
26	(1) Inspecting, licensing, approving, mitigating, warning, abating, or failing to so
27	act regarding compliance with or the violation of any law, rule, regulation, or
28	any condition affecting health or safety.
29	(2) Enforcing, monitoring, or failing to enforce or monitor conditions of
30	sentencing, parole, probation, or juvenile supervision.

1	(3) Providing or failing to provide law enforcement services in the ordinary
2	course of a state's law enforcement operations.
3	g. "Public duty" does not include action of the state or a state employee under
4	circumstances in which a special relationship can be established between the
5	state and the injured party. A special relationship is demonstrated if all of the
6	following-elements-exist:
7	(1) Direct contact between the state and the injured party.
8	(2) An assumption by the state, by means of promises or actions, of an
9	affirmative duty to act on behalf of the party who allegedly was injured.
10	(3) Knowledge on the part of the state that inaction of the state could lead to
11	harm.
12	(4) The injured party's justifiable reliance on the state's affirmative undertaking,
13	occurrence of the injury while the injured party was under the direct control
14	of the state, or the state action increases the risk of harm.
15	h. A claim resulting from the assessment and collection of taxes.
16	i. A claim resulting from snow or ice conditions, water, or debris on a highway or on
17	a public sidewalk that does not abut a state-owned building or parking lot, except
18	when the condition is affirmatively caused by the negligent act of a state
19	employee.
20	j. A claim resulting from any injury caused by a wild animal in its natural state.
21	k. A claim resulting from the condition of unimproved real property owned or leased
22	by the state.
23	I. A claim resulting from the loss of benefits or compensation due under a program
24	of public assistance.
25	m. A claim resulting from the reasonable care and treatment, or lack of care and
26	treatment, of a person at a state institution where reasonable use of available
27	appropriations has been made to provide care.
28	n. A claim resulting from damage to the property of a patientresident or inmate of a
29	state institution.
30	O. A claim resulting from any injury to a resident or an inmate of a state institution if
31	the injury is caused by another resident or inmate of that institution.



1	p. A claim resulting from environmental contamination, except to the extent that
2	federal environmental law permits the claim.
3	q. A claim resulting from a natural disaster, an act of God, a military action, or an act
4	or omission taken as part of a disaster relief effort.
5	r. A claim for damage to property owned by the state.
6	s. A claim for liability assumed under contract, except this exclusion does not apply
7	to liability arising from a state employee's operation of a rental vehicle if the loss
8	is not covered by the state employee's personal insurance or by the vehicle rental
9	company.
10	t. A claim resulting from an injury to a child residing at the Heart River correctional
11	center, except when the injury is affirmatively caused by the negligent act of a
12	state employee.
13	4. An action brought under this chapter must be commenced within the period provided
14	in section 28-01-22.1.
15	5. This chapter does not create or allow any claim that does not exist at common law
16	or has not otherwise been created by law as of April 22, 1995.
17	SECTION 1. A new subsection to section 54-23.3-04 of the North Dakota Century Code is
18	created and enacted as follows:
19	To employ personnel and establish policies and procedures to authorize a child of a
20	female inmate to reside at the Heart River correctional center under the care and
21	general control of the female inmate if the child is eighteen months of age or younger.
22	The policies must include considerations of the residential safety of the child, the
23	length of time the child may reside within the facility, and treatment or other
24	penological interest.

Module ID: s_stcomrep_25_008 Carrier: Paulson Insert LC: 25.1336.01001 Title: 02000

REPORT OF STANDING COMMITTEE SB 2352

Judiciary Committee (Sen. Larson, Chairman) recommends AMENDMENTS (25.1336.01001) and when so amended, recommends DO PASS and BE REREFERRED to the Appropriations Committee (6 YEAS, 1 NAY, 0 ABSENT AND NOT VOTING). SB 2352 was placed on the Sixth order on the calendar. This bill does not affect workforce development.

25.1336.01001 Title.02000 Prepared by the Legislative Council staff for Senator Paulson February 11, 2025

Sixty-ninth Legislative Assembly of North Dakota

PROPOSED AMENDMENTS TO

SENATE BILL NO. 2352

Introduced by

Senators Dever, Hogan, Magrum, Mathern

- 1 A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North
- 2 Dakota Century Code, relating to authorization for children of inmates to reside at the Heart
- 3 River correctional center; and to amend and reenact section 32-12.2-02 of the North Dakota
- 4 Century Code, relating to limitation of liability for children residing at the Heart River correctional
- 5 center.

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6 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- 7 SECTION 1. AMENDMENT. Section 32-12.2-02 of the North Dakota Century Code is amended and reenacted as follows:
 - 32-12.2-02. Liability of the state Limitations Statute of limitations. (Effective through July 31, 2027)
 - 1. The state may only be held liable for money damages for an injury proximately caused by the negligence or wrongful act or omission of a state employee acting within the employee's scope of employment under circumstances in which the employee would be personally liable to a claimant in accordance with the laws of this state, or an injury caused from some condition or use of tangible property under circumstances in which the state, if a private person, would be liable to the claimant. No claim may be brought against the state or a state employee acting within the employee's scope of employment except a claim authorized under this chapter or otherwise authorized by the legislative assembly. The enactment of a law, rule, or regulation to protect any

- person's health, safety, property, or welfare does not create a duty of care on the part of the state, its employees, or its agents, if that duty would not otherwise exist.
- 2. The liability of the state under this chapter is limited to a total of three hundred-seventy-five thousand dollars per person and one million dollars for any number of claims arising from any single occurrence. The state may not be held liable, or be ordered to indemnify a state employee held liable, for punitive or exemplary damages. Any amount of a judgment against the state in excess of the one million dollar limit imposed under this subsection may be paid only if the legislative assembly adopts an appropriation authorizing payment of all or a portion of that amount. A claimant may present proof of the judgment to the director of the office of management and budget who shall include within the proposed budget for the office of management and budget a request for payment for the portion of the judgment in excess of the limit under this section at the next regular session of the legislative assembly after the judgment is rendered. The liability limits under this subsection must be adjusted annually as follows:
- a. On July 1, 2023, a total of four hundred six thousand two hundred and fifty dollars per person and one million six hundred twenty-five thousand dollars for any single occurrence.
- b. On July 1, 2024, a total of four hundred thirty-seven thousand five hundred dollars per person and one million seven hundred fifty thousand dollars for any single occurrence.
- c. On July 1, 2025, a total of four hundred sixty-eight thousand seven hundred fifty dollars per person and one million eight hundred seventy-five thousand dollars per occurrence.
 - d. On July 1, 2026, a total of five hundred thousand dollars per person and two-million dollars per occurrence.
 - 3. Neither the state nor a state employee may be held liable under this chapter for any of the following claims:
 - a. A claim based upon an act or omission of a state employee exercising due care in the execution of a valid or invalid statute or rule.

1	————b.	A claim based upon a decision to exercise or perform or a failure to exercise or
2		perform a discretionary function or duty on the part of the state or its employees,
3		regardless of whether the discretion involved is abused or whether the statute,
4		order, rule, or resolution under which the discretionary function or duty is-
5		performed is valid or invalid. Discretionary acts include acts, errors, or omissions
6		in the design of any public project but do not include the drafting of plans and
7		specifications that are provided to a contractor to construct a public project.
8	с.	A claim resulting from the decision to undertake or the refusal to undertake any
9		legislative or quasi-legislative act, including the decision to adopt or the refusal to-
10		adopt any statute, order, rule, or resolution.
11	————d.	A claim resulting from a decision to undertake or a refusal to undertake any
12		judicial or quasi-judicial act, including a decision to grant, to grant with conditions,
13		to refuse to grant, or to revoke any license, permit, order, or other administrative
14		approval or denial.
15	е.	A claim relating to injury directly or indirectly caused by a person who is not
16		employed by the state.
17	f.	A claim relating to injury directly or indirectly caused by the performance or
18		nonperformance of a public duty, including:
19		(1) Inspecting, licensing, approving, mitigating, warning, abating, or failing to so-
20		act regarding compliance with or the violation of any law, rule, regulation, or
21		any condition affecting health or safety.
22		(2) Enforcing, monitoring, or failing to enforce or monitor conditions of
23		sentencing, parole, probation, or juvenile supervision.
24		(3) Providing or failing to provide law enforcement services in the ordinary
25		course of a state's law enforcement operations.
26	g.	"Public duty" does not include action of the state or a state employee under
27		circumstances in which a special relationship can be established between the
28		state and the injured party. A special relationship is demonstrated if all of the
29		following elements exist:
30		(1) Direct contact between the state and the injured party.

1		(2) An assumption by the state, by means of promises or actions, of an
2		affirmative duty to act on behalf of the party who allegedly was injured.
3		(3) Knowledge on the part of the state that inaction of the state could lead to
4		harm.
5		(4) The injured party's justifiable reliance on the state's affirmative undertaking,
6		occurrence of the injury while the injured party was under the direct control-
7		of the state, or the state action increases the risk of harm.
8	————h.	A claim resulting from the assessment and collection of taxes.
9	i.	A claim resulting from snow or ice conditions, water, or debris on a highway or on
10		a public sidewalk that does not abut a state-owned building or parking lot, except-
11		when the condition is affirmatively caused by the negligent act of a state
12		employee.
13	j.	A claim resulting from any injury caused by a wild animal in its natural state.
14	——————————————————————————————————————	A claim resulting from the condition of unimproved real property owned or leased
15		by the state.
16		A claim resulting from the loss of benefits or compensation due under a program
17		of public assistance.
18	m.	A claim resulting from the reasonable care and treatment, or lack of care and
19		treatment, of a person at a state institution where reasonable use of available
20		appropriations has been made to provide care.
21	n.	A claim resulting from damage to the property of a patientresident or inmate of a
22		state institution.
23	Θ.	A claim resulting from any injury to a resident or an inmate of a state institution if
24		the injury is caused by another resident or inmate of that institution.
25	р.	A claim resulting from environmental contamination, except to the extent that
26		federal environmental law permits the claim.
27	q.	A claim resulting from a natural disaster, an act of God, a military action, or an act
28		or omission taken as part of a disaster relief effort.
29	r.	A claim for damage to property owned by the state.
30		A claim for liability assumed under contract, except this exclusion does not apply
31		to liability arising from a state employee's operation of a rental vehicle if the loss-

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who shall include within the proposed budget for the office of management and budget

1	a request for payment for the portion of the judgment in excess of the limit under this
2	section at the next regular session of the legislative assembly after the judgment is
3	rendered.
4	3. Neither the state nor a state employee may be held liable under this chapter for any of
5	the following claims:
6	a. A claim based upon an act or omission of a state employee exercising due care
7	in the execution of a valid or invalid statute or rule.
8	b. A claim based upon a decision to exercise or perform or a failure to exercise or
9	perform a discretionary function or duty on the part of the state or its employees,
10	regardless of whether the discretion involved is abused or whether the statute,
11	order, rule, or resolution under which the discretionary function or duty is
12	performed is valid or invalid. Discretionary acts include acts, errors, or omissions
13	in the design of any public project but do not include the drafting of plans and
14	specifications that are provided to a contractor to construct a public project.
15	c. A claim resulting from the decision to undertake or the refusal to undertake any
16	legislative or quasi-legislative act, including the decision to adopt or the refusal to-
17	adopt any statute, order, rule, or resolution.
18	d. A claim resulting from a decision to undertake or a refusal to undertake any
19	judicial or quasi-judicial act, including a decision to grant, to grant with conditions,
20	to refuse to grant, or to revoke any license, permit, order, or other administrative
21	approval or denial.
22	e. A claim relating to injury directly or indirectly caused by a person who is not
23	employed by the state.
24	f. A claim relating to injury directly or indirectly caused by the performance or
25	nonperformance of a public duty, including:
26	(1) Inspecting, licensing, approving, mitigating, warning, abating, or failing to so-
27	act regarding compliance with or the violation of any law, rule, regulation, or
28	any condition affecting health or safety.
29	(2) Enforcing, monitoring, or failing to enforce or monitor conditions of
30	sentencing, parole, probation, or juvenile supervision.

1	(3) Providing or failing to provide law enforcement services in the ordinary
2	course of a state's law enforcement operations.
3	g. "Public duty" does not include action of the state or a state employee under-
4	circumstances in which a special relationship can be established between the
5	state and the injured party. A special relationship is demonstrated if all of the
6	following elements exist:
7	(1) Direct contact between the state and the injured party.
8	(2) An assumption by the state, by means of promises or actions, of an
9	affirmative duty to act on behalf of the party who allegedly was injured.
10	(3) Knowledge on the part of the state that inaction of the state could lead to
11	harm.
12	(4) The injured party's justifiable reliance on the state's affirmative undertaking,
13	occurrence of the injury while the injured party was under the direct control-
14	of the state, or the state action increases the risk of harm.
15	h. A claim resulting from the assessment and collection of taxes.
16	i. A claim resulting from snow or ice conditions, water, or debris on a highway or on-
17	a public sidewalk that does not abut a state-owned building or parking lot, except-
18	when the condition is affirmatively caused by the negligent act of a state-
19	employee.
20	j. A claim resulting from any injury caused by a wild animal in its natural state.
21	k. A claim resulting from the condition of unimproved real property owned or leased-
22	by the state.
23	I. A claim resulting from the loss of benefits or compensation due under a program
24	of public assistance.
25	m. A claim resulting from the reasonable care and treatment, or lack of care and
26	treatment, of a person at a state institution where reasonable use of available
27	appropriations has been made to provide care.
28	n. A claim resulting from damage to the property of a patientresident or inmate of a
29	state institution.
30	o. A claim resulting from any injury to a resident or an inmate of a state institution if
31	the injury is caused by another resident or inmate of that institution.

1	p. A claim resulting from environmental contamination, except to the extent that
2	federal environmental law permits the claim.
3	q. A claim resulting from a natural disaster, an act of God, a military action, or an act
4	or omission taken as part of a disaster relief effort.
5	r. A claim for damage to property owned by the state.
6	s. A claim for liability assumed under contract, except this exclusion does not apply
7	to liability arising from a state employee's operation of a rental vehicle if the loss
8	is not covered by the state employee's personal insurance or by the vehicle rental
9	company.
10	t. A claim resulting from an injury to a child residing at the Heart River correctional
11	center, except when the injury is affirmatively caused by the negligent act of a
12	state employee.
13	4. An action brought under this chapter must be commenced within the period provided
14	in section 28-01-22.1.
15	5. This chapter does not create or allow any claim that does not exist at common law
16	or has not otherwise been created by law as of April 22, 1995.
17	SECTION 1. A new subsection to section 54-23.3-04 of the North Dakota Century Code is
18	created and enacted as follows:
19	To employ personnel and establish policies and procedures to authorize a child of a
20	female inmate to reside at the Heart River correctional center under the care and
21	general control of the female inmate if the child is eighteen months of age or younger.
22	The policies must include considerations of the residential safety of the child, the
23	length of time the child may reside within the facility, and treatment or other
24	penological interest.

2025 SENATE APPROPRIATIONS

SB 2352

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations - Human Resources Division

Harvest Room, State Capitol

SB 2352 2/17/2025

Relating to authorization for children of inmates to reside at the Heart River Correctional Center.

9:50 a.m. Chairman Dever opened the hearing.

Members Present: Chairman Dever, Senators Cleary, Magrum and Mathern

Members Absent: Senator Davison

Discussion Topics:

Nurseries in Prison

Mother Child Attachment

9:50 a.m. Cheryl Thomas, Women's Service Manager, Department of Corrections and Rehabilitation (DOCR), testified in favor.

10:15 a.m. Senator Mathern moved Do Pass.

10:15 a.m. Senator Cleary seconded the motion.

Senators	Vote
Senator Dick Dever	Υ
Senator Sean Cleary	Υ
Senator Kyle Davison	Α
Senator Jeffrey J. Magrum	Υ
Senator Tim Mathern	Υ

Motion passed 4-0-1.

Chairman Dever will carry the bill.

10:17 a.m. Chairman Dever closed the hearing.

Joan Bares, Committee Clerk

2025 SENATE STANDING COMMITTEE MINUTES

Appropriations Committee

Harvest Room, State Capitol

SB 2352 2/17/2025 3:29 p.m.

A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North Dakota Century Code, relating to authorization for children of inmates to reside at the Heart River correctional center.

3:29 p.m. Chairman Bekkedahl opened the hearing.

Members Present: Chairman Bekkedahl, Vice-Chairman Erbele, and Senators Burckhard, Cleary, Conley, Davison, Dever, Dwyer, Magrum, Mathern, Schaible, Sorvaag, Thomas, Wanzek.

Members Absent: Senators Meyer, Sickler.

Discussion Topics:

- Child Age Limits
- Committee Action
- 3:30 p.m. Senator Dever introduced the bill.
- 3:34 p.m. Senator Dever moved a Do Pass.
- 3:34 p.m. Senator Mathern seconded the motion.

Senators	Vote
Senator Brad Bekkedahl	Υ
Senator Robert Erbele	Υ
Senator Randy A. Burckhard	Υ
Senator Sean Cleary	Υ
Senator Cole Conley	Υ
Senator Kyle Davison	Υ
Senator Dick Dever	Υ
Senator Michael Dwyer	Υ
Senator Jeffery J. Magrum	Υ
Senator Tim Mathern	Υ
Senator Scott Meyer	Α
Senator Donald Schaible	Υ
Senator Jonathan Sickler	Α
Senator Ronald Sorvaag	Υ
Senator Paul J. Thomas	N
Senator Terry M. Wanzek	Υ

Motion Passed 13-1-2.

Senate Appropriations Committee SB 2352 02/17/2025 3:29 p.m. Page 2

Senator Paulson will carry the bill.

3:38 p.m. Chairman Bekkedahl closed the hearing.

Elizabeth Reiten, Committee Clerk

REPORT OF STANDING COMMITTEE ENGROSSED SB 2352 (25.1336.02000)

Module ID: s_stcomrep_28_021

Carrier: Paulson

Appropriations Committee (Sen. Bekkedahl, Chairman) recommends **DO PASS** (13 YEAS, 1 NAY, 2 ABSENT OR EXCUSED AND NOT VOTING). SB 2352 was placed on the Eleventh order on the calendar. This bill does not affect workforce development.

2025 HOUSE JUDICIARY SB 2352 The following testimony was uploaded for a meeting on March 05, 2025, prior to the meeting's cancellation: #38565, #38573, #38589, #38696, #38728, and #38735.

Legislative Testimony in Support of SB 2352

Provided to: House Education Committee

Date: March 3, 2025 **By:** Janet Bassingthwaite

As an early childhood specialist with experience working with at-risk populations through early intervention programs such as Right Track, Early Intervention services, Early Childhood Special Education, Head Start/Early Head Start, and child care programs I urge you to support SB 2352.

Research in mother-child connections has overwhelmingly shown the importance of this time for the mother and the child's development. Being able to have guidance on parenting in a safe and structured environment while being provided coaching on establishing nurturing interactions, reading cues, meeting needs, creating routines, and offering developmentally appropriate experiences will have significant social, psychological, and economic benefits in the long game.

Important research-based considerations:

- Promoting healthy child development and secure attachment- Byrne, Goshin, and Joestl (2010)
- Reducing recidivism and enhancing rehabilitation- Goshin & Byrne (2009)
- Improving maternal mental health of mothers, in turn provides better outcomes for the child.-Carlson (2001)
- Cost-effective approach as it takes the pressure off the foster care system- Moran, Jolley, and Wright (2016)

I support SB 2352 and encourage you to do the same.

Janet Bassingthwaite

I Support SB 2352! Allowing young children to be with their mothers at the Heart River Correctional Center, during the mother's incarceration, is not only important for the children, but also the mothers. In the first 18 months of a child's life, bonding with their mother is irreplaceable and will affect them for the rest of their life. Being able to be fed and nurtured by their own mother can never be replaced by another adult. Children know when their mother is part of their life from the first day. It may seem that a child is too young to know, but that is not the case, and the health of the child physically and emotionally will show up as they get older, if there is not a strong bond developed from Day 1. Abandonment issues are far too prevalent in our children when they have been taken from their mother during the beginning of their life.

It would be a safe environment, supervised by staff. Not only will the mother learn how to care for their child, but living together during those early months will prepare both for a life together when their mother is released. It would establish a nurturing relationship that can continue as the child grows.

As a mother of four, I can't imagine how I could recover the relationship with my children if I had been unable to live with them during their first 18 months. Being able to nurse(feed) my children at birth and during those first 18 months was important for my health and well as my child. The healing, both emotionally and physically, by having those important months caring for my child, created a relationship that continues throughout our lives. Being present during those early milestones is priceless.

In order to give the best chance to a mother and her child to have a healthy, stable life, it is necessary to be together during those first 18 months of a child's life. That is why I support SB 2352 and I ask you to support it too!!

Kathleen Atkinson, osb 701.426.8747

Committee Testimony for Senate Bill 2352 House Education Committee

Mister Chair and Members of the Education Committee.

Thank you for considering my testimony. I serve as the Executive Director of *Ministry on the Margins*, an ecumenical, volunteer-based program serving over 1600 people a week. Along with a food pantry, street outreach, and emergency sheltering; we're involved with spiritual groups in the men's penitentiary, women's penitentiary and Missouri River Correctional Center, the *Free Through Recovery* Program, a Families of the Incarcerated Support Group, and the DOCR Children of the Incarcerated Initiative. I've been blessed to do this work full time for 12 years.

It is an often-used phrase, "I was raised in a totally different world then her." However, I remember the moment I was sitting in the North Dakota Women's Prison and knew – knew very deeply – that I was conceived into a different world than the woman before me. My mother didn't smoke, drink, or use drugs while she was pregnant with me. She watched her nourishment; had comfortable housing and a supportive spouse while I was being formed in her womb. I was born in a hospital, mom was assisted in mothering skills, I was cared for and carried home to the song "I will take you home Kathleen." I began my life connected to family.

Senate Bill 2352 offers the opportunity for a child whose growth in the womb happens while his or her mother is in prison to also have a strong start in life (maybe a different song). SB 2352 recognizes that because mom is incarcerated, this baby and mother probably have better maternal care than ever with medical attention, housing, nutrition, non-abuse, and drug/alcohol free. This bill continues a hopeful trajectory of success by allowing mother-baby bonding to continue post birth, immediately wrapping both in formation for good mothering skills.

If the baby is born with Fetal Alcohol Syndrome or other challenges, early intervention can happen without delay. If the mother is victim of generational patterns of neglectful parenting, new skills can be taught. Financial costs within the foster care system can be saved. Financial costs and the burden of transportation for mother-baby visits can be saved. Financial costs of deferred intervention can be saved.

And as a person who has accompanied women as they try to re-enter society from prison, I can attest to the overwhelming panic and failure that accompanies re-entry, especially when it is done unprepared with a baby in arms. A baby that had been taken from his/her mother at the time of birth, begun the journey of growth separated from this primary connection, and subsequently removed from whoever had been providing early nurturing and given to another new person – a stranger called mom.

Senate Bill 2352 is not primarily for the woman who gives birth while incarcerated. It is for the vulnerable new life born into a totally different world than you and me, and an investment in *THEIR* future.

I ask you to support this legislation.

HOUSE EDUCATION COMMITTEE REPRESENTATIVE PAT HEINERT, CHAIR MARCH 5, 2025

CHERYL THOMAS, WOMEN'S SERVICES MANAGER PRESENTING TESTIMONY IN SUPPORT OF SENATE BILL 2352

Chair Heinert and members of the House Education Committee, my name is

Cheryl Thomas, and I am the Women's Services Manager for the North Dakota

Department of Corrections and Rehabilitation (DOCR). The DOCR has made

tremendous gains regarding our incarcerated women's population by implementing

gender responsive and trauma informed care, along with having a deeper

understanding that women's pathways into incarceration are much different than men.

We also know that relationships are critical to women, as women's identities are often

relationally based. Women are often the main care givers of their children, as most

incarcerated women are parents to children under the age of 18. From 1991 to 2016,

there was a 96 percent increase in incarcerated mothers. There is significant research
that supports a mother and their babies bond starting during gestation and continuing to
grow after birth. More than 52 percent of women reported living with their minor

children at the time of their arrest. Women are also more likely to lead a single-parent
household, as 39 percent of incarcerated mothers of minors lived with their children with

¹ Ghandnoosh, Ph.D., N., Stammen, E., & Muhitch, K. (2021, November 17). *Parents in Prison*. Retrieved from The Sentencing Project: https://www.sentencingproject.org/policy-brief/parents-in-prison/

² Team, S. (2024, March 13). The Mom - Baby Bond: The Science Behind the Magic. Retrieved from soulside: https://www.getsoulside.com/blog/the-mom-baby-bond-the-science-behind-the-magic

no spouse. ³ I stand before you today to provide testimony in support of Senate Bill 2352 which will authorize the children of incarcerated women to reside at the Heart River Correctional Center (HRCC). This will create and enact a new subsection to section North Dakota Century Code § 54-23.3-04 which would allow the DOCR to employ personnel and establish policies and procedures to authorize a child of a female inmate to reside at the HRCC under the care and general control of the female inmate if the child is 18 months of age or younger. The policies must include considerations of the residential safety of the child, the length of time the child may reside within the facility, and treatment or other penological interests.

In my career, I have been on the front lines of child welfare, working at the county level within Foster Care case management, In-home, which at the time was called Wrap-Around case management, as well as in Child Protection Services. I stayed working within child welfare as a case manager at Prairie Learning Center, formally a boys group home in Raleigh, ND. Almost 17 years ago I joined the DOCR, working for the Division of Juvenile Services (DJS). My last three years have been as the Women's Services Manager, where I also lead the Children of Incarcerated Parents Initiative (COIPI) for the department. Through these positions, I have witnessed the impact that an out-of-home placement of a child can have on the child and family. Children affected by parental incarceration are at a higher risk of adverse childhood experiences (ACEs), insecure attachment, social stigma, unstable family relationships, physical and mental

³ Both sides of the bars: How mass incarceration punishes families | Prison Policy Initiative

health issues and low educational attainment.⁴ I have also seen the impact of having an incarcerated parent on her children. Contact between incarcerated parent(s) and their children can help reduce risk factors for the children affected by parental incarceration as well as reducing recidivism for the incarcerated parent, as more than 40 percent of incarcerated parents lived with their children prior to their incarceration.⁵

Prison nursery programs, where incarcerated mothers can care for their child within a correctional facility, have proven to offer significant benefits to both the mothers and their children. When an incarcerated mother can care for her child, it has a profound positive effect on a mother's mental health and rehabilitation. Incarcerated mothers often face overwhelming challenges related to separation from their children, which can intensify feelings of hopelessness and depression. Allowing mothers to bond with their infants in a supportive environment gives them a sense of purpose and responsibility, which can help reduce recidivism rates. Studies show that incarcerated mothers who are able to maintain a connection with their children are more likely to succeed upon reentry into the community. There are currently 12 states that have a nursery within their women's correctional facilities and three more, including North Dakota, in the process of planning or expanding their current program. New York state started their program in 1901, Washington state, started their program in 1999, resulting

⁴ Turney, Kristin (2018, June). *Adverse childhood experiences among children of incarcerated parents*. Retrieved from Children and Youth Services Review:

https://www.sciencedirect.com/science/article/pii/S0190740918300525

⁵ Martin, Eric (2017, March 01). *Hidden Consequences: The Impact of Incarceration on Dependent Children*. Retrieved from National Institute of Justice Journal: https://nij.ojp.gov/topics/articles/hidden-consequences-impact-incarceration-dependent-children

⁶ John, C. (2018, March 04). *Parenting in prison: Ohio nursery offers inmate moms, chilren a chance to bond.* Retrieved from Cleveland.com:

https://www.cleveland.com/metro/2018/03/parenting_behind_bars_ohios_pr.html

in a decrease in recidivism by 3 to 5 percent. Nebraska opened their nursery program in 1994, has seen a 10 percent decrease in recidivism, Indiana opened their nursery program in 2008, and saw a 16 percent decrease in recidivism, due to these programs. In addition to those recidivism rates, in the state of Illinois, between 2007 and 2016, only three of 78 nursery program participants returned to prison. In Ohio, in a five-year period, seven out of 74 nursery program participants returned to prison. In West Virginia, no nursery program participants that completed the program returned to prison. In California, their nursery opened in 2011 and since opening only two mothers have returned to prison. And in Delaware, in a one-year period, 23 participants completed the nursery program and only one returned to prison.

Children raised in a nursery program are provided with an opportunity to form an early attachment to their mother, which is crucial for their emotional and cognitive development. Research consistently highlights the importance of maternal bonding during the early stages of life. Having a nursery at HRCC would decrease a child's likelihood of separation trauma, avoiding the harmful effects of being placed away from their mother.

The DOCR will make the wellbeing of any infant within its facility the priority. The plan is to have the nursery program within one unit of the designed women's facility, which is inside the secure perimeter of the facility. Please note that the draft policy of the Nursery Program and facility drawings are included in your handouts. This apartment is a secure unit and will be staff supervised 24 hours a day, 7 days a week. This unit will allow the DOCR to use the apartment unit as either housing for a resident or a nursery program depending on our population needs. The policy states that the

program starts from the birth of the child to 18 months of age. There is a comprehensive application and review process for participation in the nursery program. An incarcerated mother must meet the following criteria to be eligible to participate in the Nursery Program. The incarcerated mother must be pregnant at admission at the Heart River Correctional Center (HRCC) and expecting to give birth while housed at the HRCC. The incarcerated mother must affirm they will be the primary caregiver of the child upon their release. Parole Board Review or Good Time Release Date is within 18 months of the birth of the baby. The incarcerated mother must receive immediate and ongoing medical and mental health clearance to participate in the program. The incarcerated mother will follow immunizations requirements, including exemptions, as recommended by the State, for both her and her child. The child's father must agree for the child to live with the incarcerated mother at HRCC. Attempts, conspiracy or solicitation to commit certain offenses, past history, including prior convictions may restrict participation in the program. Any incarcerated individual's pending charges and mental health history shall be taken into consideration. Registerable offenses, such as sex offenses or offenders against children shall not participate in the nursery program. If a mother is removed from the program the child will be placed with the emergency/community caregiver.

In preparation of the nursery program and after the building concept was designed, I met with the Director of Children and Family Services as well as the Director of Zone Operations and shared our plans and an initial layout of the apartments with them, both were in support of this program. On going conversations with the ND Department of Health and Human Services, including CFS, Economic Assistance,

Medicaid and Early Childhood Development are being held in preparation and in support of this nursery program.

The DOCR already has the following procedures in place, as a majority of DOCR residents have addiction needs. The DOCR conducts urinalysis testing for illegal substances upon arrival and most residents have a clean urinalysis test due to spending time in county jail for criminal proceedings. Parole violators, unlike other placements to the DOCR, come directly to the assigned facility from the community. Parole violators may have a higher rate of positive urinalysis tests for illegal substances. If a resident is pregnant and tests positive for illegal substances, the DOCR would file a 960 report with the local Human Service Zone. All births will take place within a hospital setting, where hospital personnel treat all patients the same. If there is concern that the mother had used illegal substances while pregnant, the hospital would be made aware and the hospital follows policies for testing the baby and mother. If the baby tests positive for substances the hospital will contact the local Human Service Zone, which is the same process a hospital would follow, if the mother was a DOCR resident or not. The DOCR will work with the hospital and local Human Service Zones to ensure the safety and the best care for the infant, which may or may not be with the incarcerated mother.

A fiscal note has been provided in the handouts for this bill, in the amount of \$100,000 for the 2027-2029 biennium, as the nursery will not be open until after the new facility is opened, which is scheduled for the fall of 2027. The \$100,000 will cover initial operational costs of items such as cribs, mattresses, rocking chairs, swings, highchairs, and other items that will remain in the apartment. The DOCR anticipates a fiscal note of \$70,000 for the 2029-2031 biennium which will fund eight infants in this program. The

apartment setting can house up to 24 mothers, which will allow a mother and her child to have their own room. It should also be noted that the cost of maintaining a nursery unit is often lower than the expense of housing children in a child welfare setting. Currently the State of ND pays foster parents \$870 a month for one child in foster care from infancy to 4 years of age, this would be \$10,440 for 12 months. After the nursery program is established, it is projected that the cost of supporting a mother, and her baby for 12 months, will be less than half of what the State of ND pays for 12 months in foster care. Please note additional cost savings, as a child residing with their incarcerated mother at HRCC would not require the use of the Child Care Assistance program, which pays for childcare costs of children in foster care. Medicaid coverage for a child in foster care or in the care of their mother that is incarcerated with the DOCR would not have any difference in care coverage. There would also be no additional cost of training for incarcerated mothers or nursery caregivers, as the DOCR already provides comprehensive training in mandating reporting, infant, child and adult CPR, AED and First Aid. The DOCR will continue to collaborate with the Department of Health and Human Services, which includes the Human Service Zones, to ensure proper training for all caregivers within the facility.

A fundamental goal of the DOCR is rehabilitation. Authorizing the DOCR to allow incarcerated mothers to keep their child after birth up to 18 months, aligns with this purpose by helping women maintain familial bonds and empowering them to become better parents and citizens upon their release. More than 95 percent of the current DOCR incarcerated population return to our communities. This program supports goals of the North Dakota Department of Health and Human Services and the Child and

Family Services Divisions, as well as the Federal Families First Act and the goal of minimizing out of home placement of children by keeping a mother and a child together. The DOCR is committed to the ongoing open collaboration with other State and community partners to ensure this nursery program maintains the safety and wellbeing of the children in their mother's care.

Approving SB 2352 would allow the DOCR to continue building this nursery program and the foundation for the DOCR to support our incarcerated women population and ultimately their children, creating the opportunity to end generational incarceration. I urge this committee to consider the long-term benefits that a prison nursery program can offer. They provide a unique opportunity to support incarcerated mothers in their journey toward rehabilitation, while promoting the well-being of their children. The evidence shows that these programs foster stronger families, reduce recidivism, and can ultimately lead to a safer community.⁷

Thank you for your time and for considering this important matter. I will stand to answer any questions. Thank you.

⁷ Goshin, Lorie S, Byrne, Mary W, Blanchard-Lewis, Barbara (2014, June) Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery. https://pmc.ncbi.nlm.nih.gov/articles/PMC4655430/

SB 2352

House Education Committee

Testimony of Theresa E Hays, Criminal Justice and Social Work Student

February 5, 2025

Mr. Chairman and Members of the Committee:

I am here today to testify in support of SB 2352, which would allow children under eighteen months old to reside with their mothers in Heart River Correctional Center. During my studies as a social work student, I have had the opportunity to learn how to support family units. As a criminal justice student, I have had the chance to learn from thousands of years of incarceration and aspects in it that hurts or helps the community.

Heart River Correctional Center has done a great job working with their residents on life skills while incarcerated, making no doubt in my mind that they are the right people to bring a program in to help mothers learn life skills while caring for their babies. There have been other testimonies on the bonds a mother has with her child during those first few months and how it would greatly benefit the mother and the child. It has been said multiple times, "If you want to change the world, start with your family." If there are changes to strengthen the family unit, think about how that could help the community, the city, and the state.

Children of incarcerated parents struggle most at a young age, not just because of the bond, but the lack of understanding on why their parent is gone. Their chances of failing exams are twice as high as those of children who have never had a parent incarcerated (Cassan, 2017). There are suspensions, classroom disruptions, and a draw to aggression. Children of incarcerated parents are more likely to have borderline personality disorder as well as to be aggressive to peers, have assaults happen to them, struggle with substance abuse, and be incarcerated themselves. There was a study conducted where children who lived with their mother in prison

nurseries were compared to children who were separated from their mothers due to incarceration. This study was conducted by three experts with their doctorates in nursing from Columbia University. Children who spent time with their mother in a prison nursery had significantly lower struggles with anxious/depressed, aggression, and withdrawn behaviors than those with an incarcerated parent separated at birth (Goshin et al., 2014). This leads to the conclusion that children who live in nurseries with their mothers have better outcomes than those who do not.

The actions of these children have done do not just affect their family unit but affect how they react around their peers. These children go to our schools. Their relationships with their parents while incarcerated will be affect the academic and behaviors a child has at their school. This is whether they are disruptive or a good friend. The study shows that peers are more supportive and struggle less. The mothers are more involved, and the children are more likely to strive for relationships and education (Cassan, 2017). This opens the door for completing high school education. With the completion of a high school diploma, a child's rates of homelessness and incarceration go down. While this seems like a stretch, seventy percent of those incarnated do not have a high school diploma (Tapia et al., 2020). All of this comes around to the family unit from day one and how we, as a community, will help those who have to climb mountains.

Having children in a nursery with incarcerated mothers in other States has proven to help families and the community. The question should not be, should we implement a nursery, but why has it taken us this long to have this conversation? Thank you for taking the time to read through my testimony, and I urge a strong do pass on Senate Bill 2352.



Representing the Diocese of Fargo and the Diocese of Bismarck

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To: House Judiciary Committee

From: David Tamisiea, Executive Director

Date: March 5, 2025

Re: Senate Bill 2352 - Children of Inmates to Reside at the Heart River

Correctional Center

The North Dakota Catholic Conference supports Senate Bill 2352. It is estimated that about 2,000 prisoners in American correctional facilities give birth each year. Many more are incarcerated after their child is born.

As Pope St. John Paul II wrote in his 1998 Apostolic Letter on the Dignity and Vocation of Women:

"Motherhood involves a special communion with the mystery of life, as it develops in the woman's womb. The mother is filled with wonder at this mystery of life, and 'understands' with unique intuition what is happening inside her. In the light of the 'beginning', the mother accepts and loves as a person the child she is carrying in her womb."

The importance of this bond between mother and child is seen in research conducted in states that have prison nurseries. Studies indicate that women who are allowed to stay with their babies while incarcerated have lower recidivism rates¹, and their children have lower rates of severe anxiety and depression.²

Incarceration does not remove a woman's — a mother's — inherent dignity and worth. Nor does it negate the child's inherent need for bonding. Senate Bill 2352 is ultimately a pro-family, pro-life, and pro-woman bill.

We respectfully ask for a **Do Pass** recommendation on Senate Bill 2352.

¹ Carlson, J. R. (2018). Prison Nurseries: A Way to Reduce Recidivism. The Prison Journal, 98(6), 760-775. https://doi.org/10.1177/0032885518812694

² Goshin, Lorie S et al. "Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery." The Prison journal vol. 94,2 (2014): 139-158. doi:10.1177/0032885514524692

2025 HOUSE STANDING COMMITTEE MINUTES

Judiciary Committee Room JW327B, State Capitol

SB 2352 3/11/2025

Relating to authorization for children of inmates to reside at the Heart River correctional center.

9:01 a.m. Chairman Klemin opened the hearing.

Members Present: Chairman Klemin, Vice-Chairman Karls, Vice-Chairman Vetter, Representatives Christianson, Hoverson, Johnston, McLeod, S. Olson, Satrom, Tveit, VanWinkle, Wolff, Schneider

Members Absent: Representative Henderson

Discussion Topics:

- North Dakota recidivism rate
- Liability of children within the Heart River correctional center
- Average sentence time for women

9:01 a.m. Senator Dick Dever, North Dakota Senator for District 32, introduced the bill.

- 9:24 a.m. Cheryl Thomas, Women's Service Manager at North Dakota Department of Corrections and Rehabilitations, testified in favor and provided testimony #40123 and #40483.
- 9:51 a.m. David Tamisiea, Executive Director of the North Dakota Catholic Conference, testified in favor and provided testimony #40295.
- 9:56 a.m. Dennis Meier, Director of Three Rivers Human Service Zone, testified in favor and provided testimony #39694.
- 10:01 a.m. Missi Baranko, Executive Director of USpireND, testified in favor and provided testimony #39920.
- 10:07 a.m. Jaclyn Hall, Executive Director of North Dakota Association for Justice, testified in opposition.

Additional written testimony:

Adam Matz, Grand Forks, North Dakota, submitted testimony in favor #39703.

Mark Jorritsma, Executive Director of North Dakota Family Alliance Legislative Action, submitted testimony in favor #40324.

Katelyn Rivinius, Bismarck, North Dakota, submitted testimony in favor #40020.

10:13 a.m. Chairman Klemin closed the hearing.

Wyatt Armstrong, Committee Clerk



Testimony Prepared for the House Judiciary Committee March 11, 2025

SB 2352 – Related to the authorization for children of inmates to reside at Heart River Correctional Center

Dennis Meier, Three Rivers Human Service Zone Director

Chair Klemin, and members of the House Judiciary Committee, my name is Dennis Meier. I am the Director for the Three Rivers Human Service Zone, which includes the counties of Morton, Sioux, and Grant. In addition, I am a member of the North Dakota Human Service Zone Director Association. I am here today to provide testimony in support of SB 2352 relating to the authorization for children of inmates to reside at the Heart River Correctional Center.

Human Service Zones are mandated to provide child welfare services, including child protection, foster care, in-home case management, and referral intakes for the Child in Need of Services program (or CHINS). Zones also administer economic assistance programs for the state of North Dakota. It is through these duties that we interact with residents of correctional facilities and their children. For example, we partner with the Department of Corrections to support outreach efforts that help returning citizens successfully transition back into their communities. These efforts include zone support with applications for economic assistance, which helps prevent gaps in medical coverage. Often, zones serve as the legal custodian for children with incarcerated parents.

Senate Bill 2352 provides an opportunity for residents to care for their children in a supportive environment while strengthening parenting competencies. By developing policies that support child safety, and by planning for collaboration between inmates and service providers, facility personnel, and other stakeholders, SB 2352 also supports the Department of Corrections and Rehabilitation (DOCR) in its efforts to take a restorative approach to criminal justice.

Through conversation with DOCR and Heart River Correctional Center (HRCC) personnel, my understanding is that the intention of this bill is to allow a child to reside with their mother until she is discharged from the facility, if the child is eighteen months of age or younger. A resident who wishes to participate in this opportunity will be selected by an agency committee through an application process. This process would ensure that selected residents are experiencing good mental and behavioral health. These steps would help ensure that a participating resident can provide safe caregiving and positive engagement for her child.

The North Dakota Human Service Zone Director Association is in support of the fundamental aspects of this proposed bill. However, we would look for ongoing collaboration between North Dakota Health and Human Services, DOCR, and HRCC regarding the development and review of policy and procedures relating to this matter.

As the director of an agency that administers child protection services to include assessing reported allegations of abuse or neglect, it is crucial that before this program is launched, HRCC has established clear policies, procedures, and training requirements to ensure child safety. We encourage all necessary checks of registries relating to offenses against children, both for HRCC employees and for any residents tasked with a caregiving role or responsibility. Likewise, we advocate for all employees and caregiving residents to meet training requirements on safe sleeping, pediatric CPR, and mandated reporting of abuse and neglect.

As the director of an agency that is dedicated to child safety and family preservation, I firmly believe that SB 2352 is an incredible opportunity to build a strong, enduring relationship between child and parent, and that this will decrease the likelihood of future involvement in the child welfare system.

In conclusion, our association looks forward to the opportunity for collaboration regarding policy development, review, and implementation of this program. Thank you for your consideration.

Dear House Judiciary Committee Members,

As a concerned citizen of the state of North Dakota, I support SB 2352 which will support incarcerated mothers continued connection and support of their infants. Children should not suffer from the moral errors made by their parents. Mothers are often the primary caretaker for their children and should be provided with the means to support their infants while being held accountable for their behavior, without compromising their infants' early development. Though I'd like to see this support extend beyond the 18 months of age, I commend the authors of this bill for considering the welfare of one of our most vulnerable populations, children.

Respectfully,

Adam K. Matz



Senate Bill 2352
House Judiciary
March 11, 2025
Representative Klemin, Chair

Chairman Klemin and Members of the House Judiciary Committee, my name is Missi Baranko and I am the Executive Director of USpireND, a nonprofit organization in North Dakota that serves children, families and child care providers.

I am testifying in support of SB2352. One of our main programs, Healthy Families ND, has been working with parents for over 25 years. In 2019, we also began offering Healthy Families home visiting services to incarcerated pregnant women. We knew incarcerated mothers often faced significant stress and health challenges and the Healthy Families program could provide essential support, helping them manage their health and well-being during and after pregnancy. We also understand the importance of maintaining and strengthening the bond between a mother and her child, during pregnancy and after giving birth.

We are grateful to the staff, at the multiple facilities we have worked in, for inviting and allowing Health Families ND to come into the facility to provide support and services to the women facing pregnancy along with incarceration.

Over the last 6 years of providing these services we have been blessed to walk alongside many women as they journey through their pregnancy, supporting them with birth plans, having tough conversations about who will care for their child, and encouraging them to consider options such as breastfeeding and pumping.

Although we know that being part of our Healthy Families ND program makes a difference for the mom and baby, we also see first hand how challenging it is when an incarcerated mother has to be separated from her baby after giving birth. Typically when we work with mom's who are expecting, it is a time of joy and excitement as they near their due date, but with mom's who are incarcerated it can feel like an impending doom as they know they may only have 24 to 48 hours after giving birth with their child before they are separated. The mother often experiences intense feelings of grief, guilt and helplessness. It is heart wrenching as she is unable to provide the immediate care and bonding that is crucial for her and the baby's health.





The baby misses out on essential bonding time, which we know through research is important for emotional and psychological development, impacting the baby's sense of security and attachment.

It has been our hope for North Dakota to become a place where we recognize that by supporting incarcerated mothers and their babies, we will be breaking the cycle of intergenerational incarceration. Children will grow up with a strong bond to their mothers and mothers will be supported as they make positive changes in their lives, focusing on being a mom along with the rehabilitation and reintegration into society. The presence of a nursey program provides a supportive environment where mothers can learn hands-on parenting skills, receive mental health support and prepare for a successful transition, with their child, into the community.

We look forward to the day when we can provide our Healthy Families ND services to support incarcerated moms from pregnancy, through participation in a prison nursery program and all the way to their release and reintegration into the community with their babies!

I urge you to vote yes on SB2352. Thank you!

Missi Baranko

Executive Director, USpireND

Musi Baranka

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House Judiciary Committee
Testimony Presented Katelyn Rivinius, Social Work Student
Email: katelynrivinius@gmail.com
March 11, 2025

Sir Chairman Larwence and members of the House Judiciary

Committee, my name is Katelyn Rivinius. I am a social work student and a citizen of Bismarck. I am testifying in favor of senate bill 2352.

Senate bill 2352 will give the Heart River Correctional Center the chance to start a program that will give inmates the opportunity to care for their children if the child is eighteen months of age or younger. This bill does count for the safety of the child, the treatment needs of the inmate and length of time that the child may reside with the facility.

In any child development class, students are taught the bond that a mother and child experience during the first few years of a child's life, is a critical part of development not only for the child but for the mother as well. This bill would give the Correctional Center the chance to try and motivate mothers with young children to get out of the correctional center with new life skills and parenting skills that could prevent them from re-entry after they are released.

These women will be in our community as our neighbors when they are released which is why this presents an opportunity for growth and learning that will make these women more successful members of society.

This bill presents an opportunity for reunify women in our correctional center with their children.

Thank you for your time and consideration, I am happy to answer any questions.

HOUSE JUDICIARY COMMITTEE REPRESENTATIVE Lawrence Klemin, CHAIR MARCH 11, 2025

CHERYL THOMAS, WOMEN'S SERVICES MANAGER PRESENTING TESTIMONY IN SUPPORT OF SENATE BILL 2352

Chair Klemin and members of the House Judiciary Committee, my name is

Cheryl Thomas, and I am the Women's Services Manager for the North Dakota

Department of Corrections and Rehabilitation (DOCR). The DOCR has made

tremendous gains regarding our incarcerated women's population by implementing

gender responsive and trauma informed care, along with having a deeper

understanding that women's pathways into incarceration are much different than men.

We also know that relationships are critical to women, as women's identities are often

relationally based. Women are often the main care givers of their children, as most

incarcerated women are parents to children under the age of 18. From 1991 to 2016,

there was a 96 percent increase in incarcerated mothers. There is significant research
that supports a mother and their babies bond starting during gestation and continuing to
grow after birth. More than 52 percent of women reported living with their minor

children at the time of their arrest. Women are also more likely to lead a single-parent
household, as 39 percent of incarcerated mothers of minors lived with their children with

¹ Ghandnoosh, Ph.D., N., Stammen, E., & Muhitch, K. (2021, November 17). *Parents in Prison*. Retrieved from The Sentencing Project: https://www.sentencingproject.org/policy-brief/parents-in-prison/

² Team, S. (2024, March 13). The Mom - Baby Bond: The Science Behind the Magic. Retrieved from soulside: https://www.getsoulside.com/blog/the-mom-baby-bond-the-science-behind-the-magic

no spouse. ³ I stand before you today to provide testimony in support of Senate Bill 2352 which will authorize the children of incarcerated women to reside at the Heart River Correctional Center (HRCC). This will create and enact a new subsection to section North Dakota Century Code § 54-23.3-04 which would allow the DOCR to employ personnel and establish policies and procedures to authorize a child of a female inmate to reside at the HRCC under the care and general control of the female inmate if the child is 18 months of age or younger. The policies must include considerations of the residential safety of the child, the length of time the child may reside within the facility, and treatment or other penological interests.

In my career, I have been on the front lines of child welfare, working at the county level within Foster Care case management, In-home, which at the time was called Wrap-Around case management, as well as in Child Protection Services. I stayed working within child welfare as a case manager at Prairie Learning Center, formally a boys group home in Raleigh, ND. Almost 17 years ago I joined the DOCR, working for the Division of Juvenile Services (DJS). My last three years have been as the Women's Services Manager, where I also lead the Children of Incarcerated Parents Initiative (COIPI) for the department. Through these positions, I have witnessed the impact that an out-of-home placement of a child can have on the child and family. Children affected by parental incarceration are at a higher risk of adverse childhood experiences (ACEs), insecure attachment, social stigma, unstable family relationships, physical and mental

³ Both sides of the bars: How mass incarceration punishes families | Prison Policy Initiative

health issues and low educational attainment.⁴ I have also seen the impact of having an incarcerated parent on her children. Contact between incarcerated parent(s) and their children can help reduce risk factors for the children affected by parental incarceration as well as reducing recidivism for the incarcerated parent, as more than 40 percent of incarcerated parents lived with their children prior to their incarceration.⁵

Prison nursery programs, where incarcerated mothers can care for their child within a correctional facility, have proven to offer significant benefits to both the mothers and their children. When an incarcerated mother can care for her child, it has a profound positive effect on a mother's mental health and rehabilitation. Incarcerated mothers often face overwhelming challenges related to separation from their children, which can intensify feelings of hopelessness and depression. Allowing mothers to bond with their infants in a supportive environment gives them a sense of purpose and responsibility, which can help reduce recidivism rates. Studies show that incarcerated mothers who are able to maintain a connection with their children are more likely to succeed upon reentry into the community. There are currently 12 states that have a nursery within their women's correctional facilities and three more, including North Dakota, in the process of planning or expanding their current program. New York state started their program in 1901, Washington state, started their program in 1999, resulting

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⁴ Turney, Kristin (2018, June). *Adverse childhood experiences among children of incarcerated parents*. Retrieved from Children and Youth Services Review:

https://www.sciencedirect.com/science/article/pii/S0190740918300525

⁵ Martin, Eric (2017, March 01). *Hidden Consequences: The Impact of Incarceration on Dependent Children*. Retrieved from National Institute of Justice Journal: https://nij.ojp.gov/topics/articles/hidden-consequences-impact-incarceration-dependent-children

⁶ John, C. (2018, March 04). *Parenting in prison: Ohio nursery offers inmate moms, chilren a chance to bond.* Retrieved from Cleveland.com:

in a decrease in recidivism by 3 to 5 percent. Nebraska opened their nursery program in 1994, has seen a 10 percent decrease in recidivism, Indiana opened their nursery program in 2008, and saw a 16 percent decrease in recidivism, due to these programs. In addition to those recidivism rates, in the state of Illinois, between 2007 and 2016, only three of 78 nursery program participants returned to prison. In Ohio, in a five-year period, seven out of 74 nursery program participants returned to prison. In West Virginia, no nursery program participants that completed the program returned to prison. In California, their nursery opened in 2011 and since opening only two mothers have returned to prison. And in Delaware, in a one-year period, 23 participants completed the nursery program and only one returned to prison.

Children raised in a nursery program are provided with an opportunity to form an early attachment to their mother, which is crucial for their emotional and cognitive development. Research consistently highlights the importance of maternal bonding during the early stages of life. Having a nursery at HRCC would decrease a child's likelihood of separation trauma, avoiding the harmful effects of being placed away from their mother.

The DOCR will make the wellbeing of any infant within its facility the priority. The plan is to have the nursery program within one unit of the designed women's facility, which is inside the secure perimeter of the facility. Please note that the draft policy of the Nursery Program and facility drawings are included in your handouts. This apartment is a secure unit and will be staff supervised 24 hours a day, 7 days a week. This unit will allow the DOCR to use the apartment unit as either housing for a resident or a nursery program depending on our population needs. The policy states that the

program starts from the birth of the child to 18 months of age. There is a comprehensive application and review process for participation in the nursery program. An incarcerated mother must meet the following criteria to be eligible to participate in the Nursery Program. The incarcerated mother must be pregnant at admission at the Heart River Correctional Center (HRCC) and expecting to give birth while housed at the HRCC. The incarcerated mother must affirm they will be the primary caregiver of the child upon their release. Parole Board Review or Good Time Release Date is within 18 months of the birth of the baby. The incarcerated mother must receive immediate and ongoing medical and mental health clearance to participate in the program. The incarcerated mother will follow immunizations requirements, including exemptions, as recommended by the State, for both her and her child. The child's father must agree for the child to live with the incarcerated mother at HRCC. Attempts, conspiracy or solicitation to commit certain offenses, past history, including prior convictions may restrict participation in the program. Any incarcerated individual's pending charges and mental health history shall be taken into consideration. Registerable offenses, such as sex offenses or offenders against children shall not participate in the nursery program. If a mother is removed from the program the child will be placed with the emergency/community caregiver.

In preparation of the nursery program and after the building concept was designed, I met with the Director of Children and Family Services as well as the Director of Zone Operations and shared our plans and an initial layout of the apartments with them, both were in support of this program. On going conversations with the ND Department of Health and Human Services, including CFS, Economic Assistance,

Medicaid and Early Childhood Development are being held in preparation and in support of this nursery program.

The DOCR already has the following procedures in place, as a majority of DOCR residents have addiction needs. The DOCR conducts urinalysis testing for illegal substances upon arrival and most residents have a clean urinalysis test due to spending time in county jail for criminal proceedings. Parole violators, unlike other placements to the DOCR, come directly to the assigned facility from the community. Parole violators may have a higher rate of positive urinalysis tests for illegal substances. If a resident is pregnant and tests positive for illegal substances, the DOCR would file a 960 report with the local Human Service Zone. All births will take place within a hospital setting, where hospital personnel treat all patients the same. If there is concern that the mother had used illegal substances while pregnant, the hospital would be made aware and the hospital follows policies for testing the baby and mother. If the baby tests positive for substances the hospital will contact the local Human Service Zone, which is the same process a hospital would follow, if the mother was a DOCR resident or not. The DOCR will work with the hospital and local Human Service Zones to ensure the safety and the best care for the infant, which may or may not be with the incarcerated mother.

A fiscal note has been provided in the handouts for this bill, in the amount of \$100,000 for the 2027-2029 biennium, as the nursery will not be open until after the new facility is opened, which is scheduled for the fall of 2027. The \$100,000 will cover initial operational costs of items such as cribs, mattresses, rocking chairs, swings, highchairs, and other items that will remain in the apartment. The DOCR anticipates a fiscal note of \$70,000 for the 2029-2031 biennium which will fund eight infants in this program. The

apartment setting can house up to 24 mothers, which will allow a mother and her child to have their own room. It should also be noted that the cost of maintaining a nursery unit is often lower than the expense of housing children in a child welfare setting. Currently the State of ND pays foster parents \$870 a month for one child in foster care from infancy to 4 years of age, this would be \$10,440 for 12 months. After the nursery program is established, it is projected that the cost of supporting a mother, and her baby for 12 months, will be less than half of what the State of ND pays for 12 months in foster care. Please note additional cost savings, as a child residing with their incarcerated mother at HRCC would not require the use of the Child Care Assistance program, which pays for childcare costs of children in foster care. Medicaid coverage for a child in foster care or in the care of their mother that is incarcerated with the DOCR would not have any difference in care coverage. There would also be no additional cost of training for incarcerated mothers or nursery caregivers, as the DOCR already provides comprehensive training in mandating reporting, infant, child and adult CPR, AED and First Aid. The DOCR will continue to collaborate with the Department of Health and Human Services, which includes the Human Service Zones, to ensure proper training for all caregivers within the facility.

A fundamental goal of the DOCR is rehabilitation. Authorizing the DOCR to allow incarcerated mothers to keep their child after birth up to 18 months, aligns with this purpose by helping women maintain familial bonds and empowering them to become better parents and citizens upon their release. More than 95 percent of the current DOCR incarcerated population return to our communities. This program supports goals of the North Dakota Department of Health and Human Services and the Child and

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Approving SB 2352 would allow the DOCR to continue building this nursery program and the foundation for the DOCR to support our incarcerated women population and ultimately their children, creating the opportunity to end generational incarceration. I urge this committee to consider the long-term benefits that a prison nursery program can offer. They provide a unique opportunity to support incarcerated mothers in their journey toward rehabilitation, while promoting the well-being of their children. The evidence shows that these programs foster stronger families, reduce recidivism, and can ultimately lead to a safer community.⁷

Thank you for your time and for considering this important matter. I will stand to answer any questions. Thank you.

⁷ Goshin, Lorie S, Byrne, Mary W, Blanchard-Lewis, Barbara (2014, June) Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery. https://pmc.ncbi.nlm.nih.gov/articles/PMC4655430/



Representing the Diocese of Fargo and the Diocese of Bismarck

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To: House Judiciary Committee

From: David Tamisiea, Executive Director

Date: March 11, 2025

Re: Senate Bill 2352 - Children of Inmates to Reside at the Heart River

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"Motherhood involves a special communion with the mystery of life, as it develops in the woman's womb. The mother is filled with wonder at this mystery of life, and 'understands' with unique intuition what is happening inside her. In the light of the 'beginning', the mother accepts and loves as a person the child she is carrying in her womb."

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We respectfully ask for a **Do Pass** recommendation on Senate Bill 2352.

¹ Carlson, J. R. (2018). Prison Nurseries: A Way to Reduce Recidivism. The Prison Journal, 98(6), 760-775. https://doi.org/10.1177/0032885518812694

² Goshin, Lorie S et al. "Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery." The Prison journal vol. 94,2 (2014): 139-158. doi:10.1177/0032885514524692



Testimony in Support of Senate Bill 2352

Mark Jorritsma, Executive Director North Dakota Family Alliance Legislative Action March 11, 2025

Dear Chairman Klemin and honorable members of the House Judiciary Committee,

My name is Mark Jorritsma and I am the Executive Director of North Dakota Family Alliance Legislative Action. I am testifying on behalf of our organization in support of Senate Bill 2352 and respectfully request that you render a "DO PASS" on this bill.

SB 2352 is intended to allow for a young child of a female inmate at the Heart River Correctional Center to stay with his/her mother. We believe that allowing for this accomplishes a number of positive outcomes.

First, the mother-child bond is fundamental to the structure of the family, something that is being undermined more every day. If a mother is incarcerated, the family is already disrupted, but it is certainly beneficial to the extent that situation can be mitigated. One of the best reasons to keep an infant or young child with his/her mother is to establish a child's secure attachment to their mother and, in turn, provide as stable of a future family as possible under the circumstances.

Our second point is that residing together with their child can encourage and provide a concrete reason for a mother to make better personal choices that can result in a more positive future. The love a mother feels toward her child, particularly a very young child, can be a source of hope for the future and motivation to be the best version of herself that she can be.

Third, the bill allows for a level of operational freedom for the North Dakota Department of Corrections and Rehabilitation (NDDOCR) to structure this program. This gives them the opportunity to potentially integrate aspects such as parenting skills, support groups, drug rehabilitation, and personal growth/maturity training. If this bill becomes law, we would strongly encourage NDDOCR to look at other states that have implemented similar programs to determine the most beneficial way to handle these elements of the program. If done well,

allowing this parent-child relationship to grow and providing life skills to the mothers could truly help fulfil the "rehabilitation" part of our state prisons.

Finally, the problems with putting children in foster care are numerable and well documented, although sometimes it is the only option. However, to the extent that this program could keep children, especially young children, out of the foster care system or at least delay it, we see it as another positive outcome.

For the aforementioned reasons, North Dakota Family Alliance Legislative Action requests that you render a "DO PASS" on Senate Bill 2352. Thank you for the opportunity to provide this testimony, and feel free to contact us if you have any questions.

Mark Jorritsma
Executive Director
North Dakota Family Alliance Legislative Action



POLICY NUMBER AND SECURITY:

3A-28 – One of the following can be placed after the policy number:

- This policy has no confidential or exempt information.
- This policy may contain confidential or exempt information; please consult with the Records Coordinator prior to disclosure.

RELATED STANDARDS (such as ACA/ACI/ACRS/PREA):

POLICY & PROCEI	DURES			
RELATED REFERENCES:				
Appendices:				
Manuals:				
Related DOCR Training:				
•				
Note:				
	ACILITY/WORK GRO leart River Correction		TOPIC: Nursery Program	
Effective Date:				
	Summary of Revi	sion or R	Revisions	
New policy written by Cheryl	Thomas.			

- 1. **AUTHORITY:** Authority for this policy with procedures is found in chapters 32-12.2 and 54-23.3 of the North Dakota Century Code. (*This may be different depending on the policy*)
- 2. **APPLICABILITY:** This policy with procedures applies to all employees of the Department of Corrections and Rehabilitation. (This may be different depending on the policy)

DEFINITIONS:

- A. Incarcerated Mother: An adult in custody that is sentenced to the legal and physical custody of the Department of Corrections and Rehabilitation (DOCR) that is expecting a child.
- B. Nursey Program: A child and mothers' unit within the Heart River Correctional Center (HRCC) that allows an incarcerated mother to form attachments with their child while incarcerated.
- C. Nursery Caregiver: An adult in custody that is certified to provide care for children in the Nursery Program.
- D. Nursery Program Committee: A Heart River Correctional Center (HRCC) committee that reviews all applications for participate in the Nursey Program.
- E. Nursery Program Coordinator: A position that has oversite and coordination of the Nursery Program.
- F. Warden: The decision-making authority for their respective institutions.
- 4. **POLICY:** The department will offer opportunities for eligible pregnant incarcerated mothers to establish a healthy mother/child attachment while promoting positive parenting skills as well as providing an increased opportunity for successful re-entry to the community. This program supports the goal of the North Dakota Health & Human Services and the Child and Family Services division by keeping a mother and child together.

5. PROCEDURES:

A. Eligibility:

- Incarcerated mothers must meet the following criteria to be eligible to participate in the Nursery Program.
 - a. Pregnant before arriving at the Heart River Correctional Center (HRCC) and expecting to give birth while housed at the HRCC.
 - b. The incarcerated mother must affirm they will be the primary caregiver of the child upon their release.
 - Parole Board Review or Good Time Release Date is within 18 months of the birth of the baby.

- d. The incarcerated mother must receive immediate and ongoing medical and mental health clearance to participate in the program.
- e. The incarcerated mother will follow immunization requirements, including exemptions, as recommended by ND Health and Human Services.
- f. The incarcerated mother will follow immunization requirements, including exemptions, as recommended by ND Health and Human Services for her child.
- g. The child's father must be in agreement for the child to live with the incarcerated mother at HRCC.
- h. The incarcerated mother with the following offenses will require additional review and approval from Director of the Department Corrections and Rehabilitation:
 - 1.) 12.1-16 Homicide (includes murder and manslaughter)
 - 2.) 12.1-17-02 Aggravated Assaults
 - 3.) 12.1-17-01.2 Domestic Violence
 - 4.) 12.1-17-03 Reckless Endangerment
 - 5.) 12.1-17-04, 07 & 07.1 Terrorizing, Harassment, Stalking
 - 6.) 12.1-18 Kidnapping Felonious restraint
 - 7.) 12.1-20 Sex Offenses
 - 8.) 12.1-27.2 Sexual Performance by Children
 - 9.) 12.1-29 Prostitution
 - 10.) 12.1-36 Female Genital Mutilation
 - 11.) 12.1-40 Human Trafficking
 - 12.) 14-09-22 Abuse of a child
 - 13.) 14-09-22.1 Neglect of child
 - 14.) No contact or protection orders with the child.
 - 15.) Sex Offender registration requirement.
 - 16.) Offender Against Children registration requirement.
- Attempts, conspiracy or solicitation to commit these offenses. Past history, including prior convictions, may also restrict participation. Any incarcerated individuals pending charges and

3A-28, Nursery Program - Page 3 of 9

- mental health history may be taken into consideration for each applicant.
- An incarcerated mother must follow all general rules and regulations of HRCC and the Resident Handbook.
- An incarcerated mother is subject to the same disciplinary procedures as general population.

B. Application process:

- 1. HRCC will form a Nursery Program Committee to consist of the following positions:
 - Women's Services Manager
 - b. Deputy Warden
 - Nursery Program Coordinator
 - d. Director of Nursing
 - e. Health Authority
 - f. Treatment Coordinator
 - g. Unit Managers
 - Case managers
- The Nursery Program Committee will meet as needed to review applications.
- The Nursery Program Coordinator will make a written recommendation to the Warden.
- 4. If denied, the incarcerated mother may appeal the decision of the Warden to the Deputy Director of Adult Services.
- 5. The incarcerated mother must complete and turn in all necessary paperwork for program consideration:
 - Nursery Program Application
 - b. Waiver of Liability
 - c. Nursery Program Agreement
 - Release of Information
 - e. Emergency/Community Caregiver Application

 Upon receipt of the above forms, the Nursery Program Committee will review all submitted applications for review and approval into the program.

C. Care of the child:

- The incarcerated mother will be responsible for the care of their child.
- The incarcerated mother must provide for the daily needs of their child, such as waking, dressing their child and the following:

a. Feeding:

- 1.) An incarcerated mother may breast feed with medical approval.
 - a.) Breast feeding may be done as necessary.
 - b.) Proper hygiene must be followed.
 - Bottle preparations including formula, milk, water and sanitation of equipment and proper storage of all food products.
 - d.) Introduction to cereal and food other than breast milk or formula will follow the Dietary Guidelines for the Americans and the American Academy of Pediatrics.
- 2.) Food, formula, milk and water will be provided by HRCC.
- b. Bathing, the infant and child soap, shampoo and other hygiene products, such as diapers will be provided by HRCC.

c. Laundry:

- Child clothing will be provided by HRCC.
- Laundry facilities and detergent for the child, will be available.
- d. The Nursery Program Coordinator will address any other additional needs of the incarcerated mother or child.
- e. Sleeping arrangements:
 - HRCC will provide approved cribs.
 - The child will sleep in the same room as it's incarcerated mother.
- f. Child's property:

- The incarcerated mother is responsible for their child's property.
- 2.) The incarcerated mother is responsible to ensure their child's property is sanitized and properly stored.
- 3.) The child is not allowed any receive any piercings or wear jewelry while in the Nursery Program.
- The incarcerated mother will have the opportunity to apply for programs overseen by the ND Department of Health and Human Services, such as Women, Infants & Children (WIC) Program, Supplemental Nutrition Assistance Program (SNAP).
- 4. HRCC will provide opportunities for the incarcerated mother to securely maintain their child's records until release. These files may include the following:
 - a. Birth Certificate
 - Social Security Card
 - c. Immunization records
 - Insurance/Medicaid Card

D. Programming

- The incarcerated mother must attend classes offered in the nursery, to include enrichment classes for parents or children.
- Nursery participants are required to attend all workshops, guest speakers or seminars provided by the Nursery Program.
- 3. Nursery participants must be involved in assigned case planning programming.
- 4. The incarcerated mother must fulfill a half-time assignment off the unit, if medically approved. Assignments may include:
 - a. ABE/GED classes
 - Assigned groups
 - c. Institutional work

E. Mobility of the child:

- It is the incarcerated mother's responsibility to arrange care for their child upon leaving the unit.
- 2. The incarcerated mother must schedule for a Nursery Caregiver to care for their child prior to leaving the unit.

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- The incarcerated mother must notify staff if she is leaving the unit with or without their child and provide staff with who is caring for the child.
- Incarcerated mothers and their child are encouraged to be outside each day, when weather permits. The child must be in appropriate outside clothing during corresponding weather.
- The child may go to activities and special events with their incarcerated mother, as approved by the Nursery Program Coordinator.
- 6. Incarcerated mother and their child may participate in visitation.
- Incarcerated mothers and their child must follow the family visitation rules and regulations as any other visitor. Items allowed in visitation are as follows:
 - a. Two bottles
 - b. Four diapers and wipes
 - c. Pacifier
 - d. Blanket
 - e. One personal toy
- Children are not allowed in the following areas:
 - a. Incarcerated mothers programming or classes that are assigned by the case planning committee.
 - Incarcerated mother's medical appointments or procedures.
- A child may be restricted from areas within HRCC.

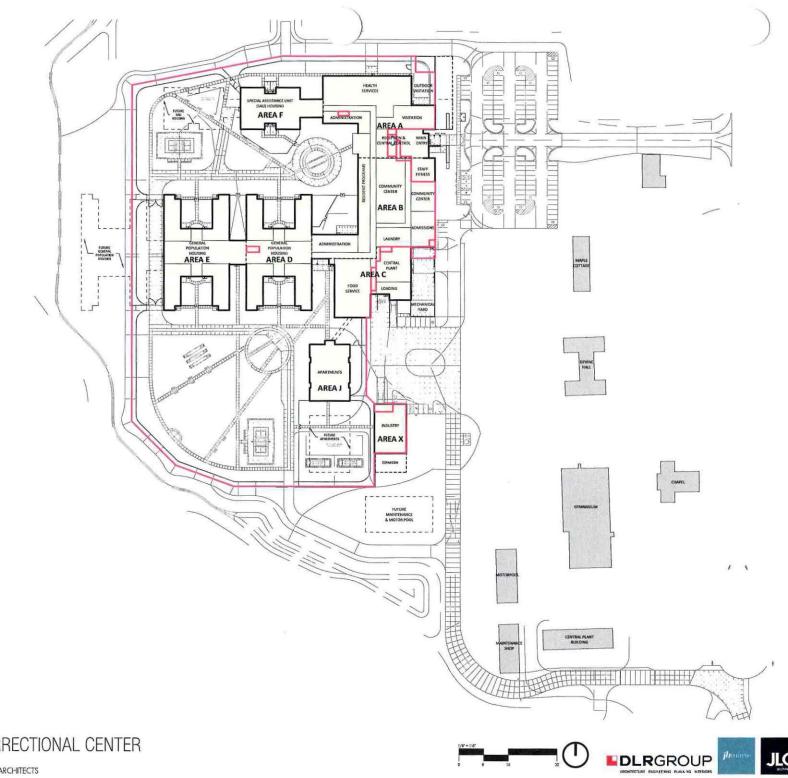
F. Nursery Caregivers:

- HRCC will provide the opportunity for Nursery Caregiver positions as institutional work.
- 2. Nursery Caregivers must complete a job application and successfully complete an interview with an interview committee.
- Nursery Caregivers must have a high school diploma or GED.
- 4. Nursery Caregivers must have a maintain a good institutional behavior.
- Nursery Caregivers must complete all training, as designated by the Nursery Program Coordinator.
- Nursery Caregiver positions will not be in direct conflict of assigned case planned programs.

- Nursery Caregivers must sign and follow a Nursery Caregiver Agreement.
- 8. Nursery Caregivers will generally not care for more than two children at a time. In the case of an emergency the Nursery Caregivers may be given approval to care for more than two children at a time, as assigned by the Nursery Program Coordinator.
- G. Medical care for the incarcerated mother and child:
 - The incarcerated mother will receive medical care from the DOCR and HRCC medical department or contracted providers.
 - 2. The incarcerated mother will sign their child up with ND Medicaid.
 - 3. The child will receive regular medical checkups and any other medical needs through a contracted pediatric medical provider.
 - The incarcerated mother will attend medical appointments of their child, along with HRCC staff.
 - HRCC will provide approved child car seats and transportation to and from these appointments.
 - b. In the event that a child needs to be hospitalized, the Warden must grant approval in order for the incarcerated mother to accompany the child.
 - Medications prescribed to the child will be provided by a community pharmacy.
 - d. Medication administration of the child:
 - Medication times will be observed and documented by HRCC staff.
 - Medications will be locked and stored by DOCR policy.
 - 3.) Over the counter medication, such as Tylenol or Ibuprofen, may be given according to ND Department of Health and Human Services instructions.
- H. Removal from the Nursery Program:
 - Voluntary requests for removal must be written by the incarcerated mother and submitted to the Nursery Program Coordinator.
 - Involuntary removal from the program may result from any of the following:
 - Suspicion of physical, sexual, emotional or mental abuse of neglect of the child.

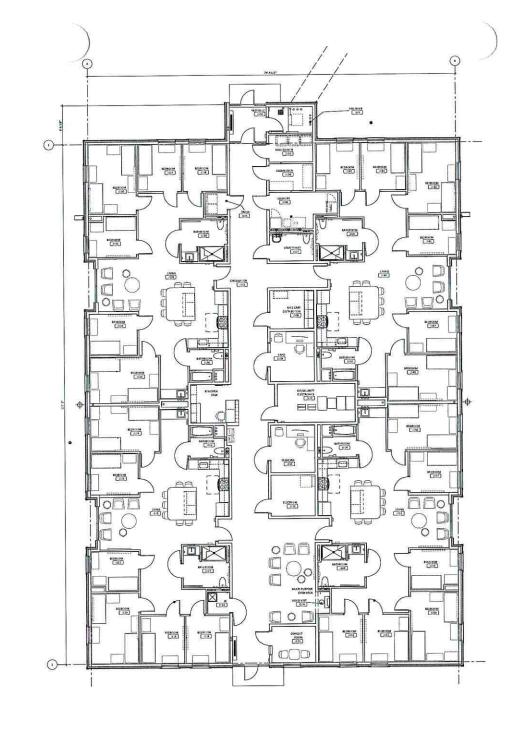
- b. Physical altercations of any kind between program participants or other incarcerated individuals, DOCR employees.
- c. Placement of the incarcerated mother into the Special Assistance Unit (SAU).
- Failure to participate in programming, work, education or behavioral expectations.
- 3. The incarcerated mother will be notified in writing by the Nursery Program Committee and signed off by the Warden, regarding removal from the program.
- 4. The incarcerated mother will be removed from the Nursery Program and returned to the appropriate housing assignment.
- 5. The child will be cared for by a Nursery Caregiver, as assigned.
- 6. The child will be picked up from the facility within 24 hours of the incarcerated mother's removal.
- 6. **SIGNATURE:** This policy with procedures and applicable manuals becomes effective when signed by the Director of the Department of Corrections and Rehabilitation.

Colby Braun, Director, ND DOCR	Date



HEART RIVER CORRECTIONAL CENTER ARCHITECTURAL SITE PLAN 2/26/25 | JLG 22286 | © 2025 JLG ARCHITECTS













2027 - 2029					
Biennium					
Item	Number of items	Item cost	Projected Cost	Actual cost	Comments
Crib	8	250	2000		initial cost
Mattress & pad	8	100	800		initial cost
Rocking chair	8	200	1600		initial cost
Swing	2	100	200		initial cost
Boucey chair	4	50	200		initial cost
High chair	4	100	400		initial cost
Diapers		840	6720		on going cost
Wipes		300	2400		on going cost
Formula		1500	12000		ongoing cost
Play mat	8	50	400		initial cost
Clothing	8	600	4800		ongoing cost
Bottles & nipples		100	800		ongoing cost
Bottle cleaner and sanitizer	8	70	560		initial cost
Burp cloths	8	20	160		ongoing cost
Nursing pillow	8	50	400		initial cost
Bedding & Blankets		200	1600		initial cost
Infant carseats & stroller	8	200	1600		initial cost
Toddler car seat	8	300	2400		DOCR would buy and let mom leave with carseat - forever carseat
Misc costs		500	4000		ongoing cost - extras (swaddle blankets), bibs, OTC medicines, diaper rash creams, shampoo, soap, sippy cups, spoons, forks, dishes, pacificers

Changing table pads	4	40	160		initial cost
Changing table cover	8	20	160		initial cost
Age appropriate toys			1000		initial costs
Diaper bag	8	50	400		ongoing cost
Bath toys	8	20	160		ongoing cost
Sound machine	8	60	480		initial cost
Baby Monitors	8	100	800		initial cost
Diaper pail	8	60	480		initial cost
Daiper pail refills	8	100	100		ongoing cost
Infant bathtub	4	50	200		initial cost
Infant towels	8	20	160		initial cost
Infant washcloths	8	20	160		initial cost
Baby grooming kits	8	20	160		ongoing cost
Laundry Detergent		20	240		ongoing cost
			47700	per year	
			95400 for b	iennium	
* per baby comments are al	so per one year				
* changing tables will be pa design	rt of building				
* no additional training cost	S				
* \$870 is the current month	ly rate of a 0-4 year	old in fost	er care.		
* no Child Care Assistance	costs				

2029 - 2031					
Biennium	1				
Item	Number of items	Item cost	Projected Cost	Actual cost	Comments
Diapers		840	6720		on going cost
Wipes		300	2400		on going cost
Formula		1500	12000		ongoing cost
Clothing	8	600	4800		ongoing cost
Bottles & nipples		100	800		ongoing cost
Burp cloths	8	20	160		ongoing cost
Toddler car seat	8	300	2400		do we buy and let mom leave with carseat - forever carseat
Misc costs		500	4000		ongoing cost - extras (swaddle blankets), bibs, OTC medicines, diaper rash creams, shampoo, soap, sippy cups, spoons, forks, dishes, pacificers
Diaper bag	8	50	400		ongoing cost
Bath toys	8	20	160		ongoing cost
Daiper pail refills	8	100	100		ongoing cost
Baby grooming kits	8	20	160		ongoing cost
Laundry Detergent		20	240		ongoing cost
			34340	per year	
			68680 for be	innium	
* per baby comments year	are also per one				
* changing tables will	be part of building	g design			
* no additional training	g costs				
* \$870 is the current m	nonthly rate of a 0	-4 year old in	foster care.		

Training Requirements for Mothers, Nursery Caregivers & Staff	Type of training	Cost
CPR & AED for infant, children & adult	in person	0
First Aid	in person	0
Naloxone Administration	online or in person	0
Blood Born Pathogens/Universal Precautions	online	0
Fire Safety	online	0
Mandated Reporting	online	0
Babysitting class (Morton Co. Extension)	in person	0
Safe Sleeping	in person	0
Parenting Class (PIO)	in person	0
Early Childhood Training	in person	0
** Will consult with ND Child Care Aware		

2025 HOUSE STANDING COMMITTEE MINUTES

Judiciary Committee Room JW327B, State Capitol

SB 2352 3/11/2025

A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North Dakota Century Code, relating to authorization for children of inmates to reside at the Heart River correctional center.

2:45 p.m. Chairman Klemin opened the hearing.

Members Present: Chairman Klemin, Vice-Chairman Karls, Representatives Christianson, Hoverson, Johnston, McLeod, S. Olson, Satrom, Tveit, Wolff, Schneider

Members Absent: Vice-Chairman Vetter, Representatives Henderson, VanWinkle

Discussion Topics:

- Construction of the Heart River correctional center
- Liability for harmed children within the correctional center

2:48 p.m. Representative Schneider moved a Do Pass and Rerefer to Appropriations.

2:48 p.m. Representative Satrom seconded the motion.

Representatives	Vote
Representative Lawrence R. Klemin	Υ
Representative Karen Karls	Υ
Representative Steve Vetter	Α
Representative Nels Christianson	Υ
Representative Donna Henderson	Α
Representative Jeff Hoverson	Υ
Representative Daniel Johnston	N
Representative Carrie McLeod	Υ
Representative SuAnn Olson	Υ
Representative Bernie Satrom	Υ
Representative Mary Schneider	Υ
Representative Bill Tveit	N
Representative Lori VanWinkle	Α
Representative Christina Wolff	N

2:55 p.m. Motion passed 8-3-3.

2:55 p.m. Representative Satrom will carry the bill.

2:55 p.m. Chairman Klemin closed the hearing.

Wyatt Armstrong, Committee Clerk

REPORT OF STANDING COMMITTEE ENGROSSED SB 2352 (25.1336.02000)

Module ID: h_stcomrep_37_009

Carrier: Satrom

Judiciary Committee (Rep. Klemin, Chairman) recommends **DO PASS** and **BE REREFERRED** to the **Appropriations Committee** (8 YEAS, 3 NAYS, 3 ABSENT OR EXCUSED AND NOT VOTING). SB 2352 was rereferred to the **Appropriations Committee**.

2025 HOUSE APPROPRIATIONS

SB 2352

2025 HOUSE STANDING COMMITTEE MINUTES

Appropriations Committee

Roughrider Room, State Capitol

SB 2352 3/20/2025

A BILL for an Act to create and enact a new subsection to section 54-23.3-04 of the North Dakota Century Code, relating to authorization for children of inmates to reside at the Heart River correctional center.

10:20 a.m. Chairman Vigesaa opened the meeting.

Members present: Chairman Vigesaa, Vice Chairman Kempenich, Representatives Anderson, Berg, Bosch, Fisher, Hanson, Louser, Martinson, Meier, Mitskog, Murphy, Nathe, Nelson, O'Brien, Pyle, Richter, Sanford, Stemen, Swiontek, Wagner

Members absent: Representatives Brandenburg, Monson

Discussion Topics:

Committee Action

10:20 a.m. Representative Vetter introduced the bill and answered questions.

10:28 a.m. Sheila Sandness, Legislative Council answered questions.

10:29 a.m. Cheryl Thomas, Women's Services Manager, Department of Corrections and Rehabilitation answered questions.

10:34 a.m. Representative Murphy moved Do Pass.

10:34 a.m. Representative Mitskog seconded the motion.

Roll Call Vote

Representatives	Vote
Representative Don Vigesaa	Υ
Representative Keith Kempenich	N
Representative Bert Anderson	Υ
Representative Mike Berg	Υ
Representative Glenn Bosch	Υ
Representative Mike Brandenburg	AB
Representative Jay Fisher	Υ
Representative Karla Rose Hanson	Υ
Representative Scott Louser	N
Representative Bob Martinson	N
Representative Lisa Meier	Υ
Representative Alisa Mitskog	Υ
Representative David Monson	AB
Representative Eric J. Murphy	Υ

House Appropriations Committee SB 2352 3/20/2025 Page 2

Representative Mike Nathe	Υ
Representative Jon O. Nelson	Υ
Representative Emily O'Brien	Υ
Representative Brandy L. Pyle	AB
Representative David Richter	Υ
Representative Mark Sanford	Υ
Representative Gregory Stemen	Υ
Representative Steve Swiontek	N
Representative Scott Wagner	Υ

Motion passed 16-4-3.

10:36 a.m. Representative Satrom will carry the bill.

10:37 a.m. Chairman Vigesaa closed the meeting.

Krystal Eberle, Committee Clerk

REPORT OF STANDING COMMITTEE ENGROSSED SB 2352 (25.1336.02000)

Module ID: h_stcomrep_44_008

Carrier: Satrom

Appropriations Committee (Rep. Vigesaa, Chairman) recommends **DO PASS** (16 YEAS, 4 NAYS, 3 ABSENT OR EXCUSED AND NOT VOTING). SB 2352 was placed on the Fourteenth order on the calendar.