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**FOR** :

**SUBJECT** :

**DATE** :

**CONTROL NO.** :

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**PURPOSE:** A. REFERRAL \_\_\_\_\_ HIGH RISK \_\_\_\_\_  
 B. ADMISSION \_\_\_\_\_ HIGH PROFILE \_\_\_\_\_  
 C. NAME OF HOSPITAL: \_\_\_\_\_

**NAME OF PDL:**

In compliance with Memorandum Order No. 45, herewith are the following information as needed:

**1. List of escort guards:**

- |    |     |
|----|-----|
| 1. | 6.  |
| 2. | 7.  |
| 3. | 8.  |
| 4. | 9.  |
| 5. | 10. |


\*\* Hospital Inspectorate to Escort Guards for Outside Hospitalization of PDL

**2. List of Authorized Visitors:** Please see attached List from Overseer Office.

**SECURITY PLAN**


Reference: MEMORANDUM ORDER NO. ODC-NO-06-01-2014 dated 17 June 2014 by the Director General of Corrections.

1. This office shall provide necessary escort guards upon request of the Chief NBP Hospital after the completion of pertinent documents regarding the referral of subject PDL to hospital outside NBP;
2. Escort guards shall comply the duly approved PDL PASSES signed by the Chief Superintendent. A copy of PDL PASSES, shall furnished the Gate 4 officers in order for the PDL patient to be brought of the

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Maximum Security Compound (MaxSeCom) and to be conveyed to out the hospital indicated in the passes under proper guards;

3. Prior to the departure at the premises of Gate 4, MaxSeCom, the following shall be complied by the escort guards, to wit:
  - a. Inspect the ambulance/vehicle to ensure that no contrabands are stashed at the said vehicle;
  - b. Thoroughly frisked and search subject PDL including his belongings;
  - c. Handcuffed subject PDL; and
  - d. If subject PDL patient is classified as high risk, the Escort In-Charge shall request for assistance and back-up during the transport of PDL patient. Likewise, additional escort guards shall be deployed to the hospital upon admission.
4. Upon arrival at the hospital outside NBP, the escort in-charge shall subsequently coordinate to the hospital security officers for further and proper security arrangement;
5. Upon admission, the escort in-charge shall conduct inspection on the room/ward assigned to PDL patient to ensure the safety of PDL and prevent him from escape;
6. During PDL admission, the number of escort guards that must be provided should be:
  - a. Six (6) Escort Personnel detailed on Twenty Four (24) hours duty;
  - b. Twelve (12) to Fifteen (15) Escort Officers, if the admitted PDL patient is classified as high risk/high profile PDL;
  - c. A Hospital Inspectorate from the Escort Group is detailed to inspect the attendance and ensure that escort guards are complying with the order.
7. PDL patient should be restrained in the room and not to be allowed to roam around within the premises of hospital;
8. No PDL patient should be brought out from the room and be transferred to other hospital for the purpose of further laboratory examination, unless there is an approved pass from NBP Superintendent;
9. Only authorized and registered visitors listed in the visitors list issued by the Overseer Office are allowed to visit PDL patient. Visitor should log-in in the logbook for proper documentation;
10. Closely observe and monitor the visitor's movement while visiting subject PDL;

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11. Conduct routine inspection on the bed bunks of PDL patient including his belongings;
12. PDL patient are not allowed to use any communication device, including their visitors while visiting the PDL. Cellular phones and the likes should be surrendered by the visitors to the guard on duty upon entry to the room;
13. Escort shall report to the BUCOR OPCEN through telephone any untoward event that may arise during their duty;
14. Official logbook is duly provided for documentation of all events that transpires during PDL admission; and
15. Incoming escort personnel shall always coordinate with hospital security guards to avoid confusion and misunderstanding.

Submitted by:

\_\_\_\_\_  
Chief, Escort Group

Approved by:

\_\_\_\_\_  
Superintendent, New Bilibid Prison

Note: Undertaking shall be filled-up by the escort guards upon deployment and departure of subject PDL to hospital)


UNDERTAKING

**ESCORT PROCEDURE AND POLICIES**

The undersigned Escort personnel hereby attest that the listed Escort Procedures and Policies hereunder as approved by higher authorities will be strictly adhered to and complied with:

1. THAT WE WILL FOLLOW WHAT IS STATED in reference to the Bureau of Corrections Operating Manual, Book II CODE OF ORDERS, Part V ESCORT PROCEDURES, Section 13 Other Security Procedures, Letter a. Medical Referrals, states:

The inmate is to be confined in a hospital and may be handcuffed to the bed if he is ambulatory and there is a risk that he may escape.

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Note: The copies of a PDL's medical records or any documents pertaining thereto are being handled by the Medical Staff of NBP Hospital who accompanies the Escort Guards every time an inmate is transported outside NBP.


2. THAT WE WILL FOLLOW and secure, The Duty Detail Order Form;
3. THAT Details and particulars during our tour of duty, shall be properly recorded in our Official Logbook, with the Inspectorate affixing his signature of his time and date of inspection;
4. THAT WE WILL immediately report to the Chief, Escort Group concerns regarding details and particulars during our tour of duty;
5. THAT AS, Escort Personnel, we will report to duty in complete Type A/BDA Uniform and with duly issued service firearm and handcuffs;
6. THAT WE WILL ONLY ALLOW those who are listed as authorized visitors from the Overseer's Office to visit the PDL-patient and not to allow the use of mobile phones;
7. While in transit, the PDL/s shall not be allowed to stop at any place and/or contact any person along the way to destination or upon return to the place of confinement; and
8. LASTLY, we will abide by that without proper clearance and due authorization from higher authorities of Bureau of Corrections an PDL shall not be brought out of the hospital premises where he is presently confined.

WE HEREBY CERTIFY that we are properly brief with the above mentioned escort procedures and policies.

- |   |  |
|---|--|
| 1. _____<br>Signature Over Printed Name | 6. _____<br>Signature Over Printed Name  |
| 2. _____<br>Signature Over Printed Name | 7. _____<br>Signature Over Printed Name  |
| 3. _____<br>Signature Over Printed Name | 8. _____<br>Signature Over Printed Name  |
| 4. _____<br>Signature Over Printed Name | 9. _____<br>Signature Over Printed Name  |
| 5. _____<br>Signature Over Printed Name | 10. _____<br>Signature Over Printed Name |

I HEREBY CERTIFY THAT THE ABOVE-MENTIONED ESCORT GUARDS WERE PERSONALLY BRIEFED AND ORIENTED BY THE UNDERSIGNED.

\_\_\_\_\_  
 Chief  
 Escort Group

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I HEREBY APPROVED THE ABOVE SECURITY PLANS AND POLICIES THAT WILL BE COMPLY DURING HOSPITAL PDL ADMISSION BY THE ESCORT PERSONNEL.

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Superintendent  
New Bilibid Prison