

**State Board of Local and Regional Jails**  
**Calendar Year 2021**  
**Annual Report of**  
**Jail Death Reviews,**  
**Audits, and Inspections**

December 1, 2022

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## **ROLES AND RESPONSIBILITIES OF THE BOARD**

The State Board of Local and Regional Jails is established in Article 2 (§ 53.1-2 *et seq.*) of Chapter 1 of Title 53.1. The Board comprises nine members, with specific areas of expertise, appointed by the Governor.

The State Board of Local and Regional Jails is authorized to: establish operational and fiscal standards governing the operation of local and regional correctional facilities; establish minimum standards for health care services in local, regional, and community correctional facilities and procedures for enforcing such minimum standards; develop and implement policies and procedures for the review of the death of any inmate that the board determines warrants review that occurs in any local, regional, or community correctional facility; and establish minimum standards for the construction, equipment, administration, and operation of local correctional facilities and lockups.

## PURPOSE OF REPORT

The State Board of Local and Regional Jails (the Board) is statutorily obligated to report to the General Assembly and the Governor annually on the results of jail audits and inspections, as well as the circumstances surrounding the deaths of inmates in the custody of local correctional facilities. This report provides the detailed information required and as listed in the *Code* sections below.

### § 53.1-5. Powers and duties of Board.

*The Board shall have the following powers and duties:*

*7. To report annually on or before December 1 to the General Assembly and the Governor on the results of the inspections and audits of local, regional, or community correctional facilities conducted pursuant to § 53.1-68 and the reviews of the deaths of inmates that occur in any local, regional, or community correctional facility conducted pursuant to § 53.1-69.1. The report shall include (i) a summary of the results of such inspections, audits, and reviews, including any trends identified by such inspections, audits, and reviews and the frequency of violations of each standard established for local, regional, or community correctional facilities, and (ii) any recommendations for changes to the standards established for local, regional, or community correctional facilities or the policies and procedures for conducting reviews of the death of inmates to improve the operations, safety, and security of local, regional, or community correctional facilities.*

### § 53.1-69.1. Review of death of inmates in local correctional facilities.

*E. The Board shall publish an annual report summarizing the reviews conducted by the Board within that year. Such report shall include any trends or similarities among the deaths of inmates in local correctional facilities and present recommendations on policy changes to reduce the number of deaths in local correctional facilities. The Board shall publish such report on its website and submit the report to the Governor, the Chairmen of the Senate Committee on Rehabilitation and Social Services and the House Committee on Public Safety, the Chair of the House Committee for Courts of Justice, the Speaker of the House of Delegates, and the President pro tempore of the Senate.*

## **DATA SOURCES**

The information provided in this report comes from three primary sources:

- Facility Reports
- Investigative Reports
- Reports of Audits and Inspections

Following the death of an inmate, each facility is responsible for reporting the death and providing information relevant to the inmate's death. Thereafter, the Board's jail death investigators begin their analysis by obtaining and reviewing the following:

- Intake Records
- Medical/Mental Health Records
- Inmate Requests, Complaints, Grievances
- Inspection Notes
- Jail Reports, Records, Logs
- Inmate Records
- Video Footage
- Medical Examiner Reports
- Staff Interviews
- Witness Interviews
- Autopsy reports
- Third-party investigations, interviews, documents (locality, federal) when applicable
- Triennial Audits and Annual Life, Health, Safety Inspections

After obtaining and reviewing the aforementioned information, the death investigator compiles an investigative report to provide to the Jail Review Committee.

## ORGANIZATION OF REPORT

This report consists of four parts:

- **Part I** presents statutory authority for the review of inmate deaths in local correctional facilities and an overview of the Board's review process.
- **Part II** provides statistical data on inmate deaths in Virginia.
- **Part III** presents death review findings, identified trends, and proposed changes to policies and standards.
- **Part IV** summarizes jail audit and inspection results to include deficiencies, trends noted regarding deficiencies, and recommendations for training or other plans of action.

**PART I**  
***JAIL DEATH REVIEW***

The Board of Local and Regional Jails is responsible for reviewing the death of any inmate who was incarcerated in a local or regional jail at the time of their death to determine whether the circumstances surrounding the death violated the Board's minimum standards.

§ 53.1-69.1. Review of death of inmates in local correctional facilities.

- A. The Board shall have the power to review the death of any inmate who was incarcerated in a local correctional facility at the time of his death in order to determine (i) the circumstances surrounding the inmate's death, including identifying any act or omission by the facility or any employee or agent thereof that may have directly or indirectly contributed to the inmate's death, and (ii) whether the facility was in compliance with the regulations promulgated by the Board.*
- B. Any review conducted pursuant to this section shall be conducted in accordance with the policies and procedures for such review developed and implemented by the Board in accordance with subdivision 5 of § 53.1-5. In conducting a review pursuant to this section, the Board may exercise its power under § 53.1-6 to hold and conduct hearings, issue subpoenas, and administer oaths and take testimony thereunder. If the Board determines that it cannot adequately conduct any particular review pursuant to this section because of the conduct by the Board of another ongoing review, the Board may request that the Department assist in the conduct of such review. Department staff conducting a review pursuant to this section shall be considered agents of the Board.*
- C. If the Board determines during the conduct of any review pursuant to this section that it is necessary to review the operation of an entity other than the local correctional facility in order to complete the review, the Board shall request that the Office of the State Inspector General review the operation of such entity if such entity falls within the authority vested in the Office of the State Inspector General pursuant to Chapter 3.2 (§ 2.2-307 et seq.) of Title 2.2. Nothing in this section shall limit the authority of the Office of the State Inspector General to exercise any of the powers and duties set forth in Chapter 3.2 (§ 2.2-307 et seq.) of Title 2.2.*
- D. Upon completion of any review conducted pursuant to this section, the Board shall prepare a detailed report of the findings of any review, which shall be submitted to the Governor, the Speaker of the House of Delegates, and the President pro tempore of the Senate. Such report may contain recommendations for changes to the minimum standards for the construction, equipment, administration, and operation of local correctional facilities in order to prevent problems, abuses, and deficiencies in and improve the effectiveness of such facilities. In addition, the Board may issue any order authorized*

*under § 53.1-69 to correct any failure by the facility to comply with the Board's regulations. Except as otherwise required by law, the Board shall maintain the confidentiality of any confidential records or information obtained from a facility during the course of a review in accordance with state and federal law.*

*E. The Board shall publish an annual report summarizing the reviews conducted by the Board within that year. Such report shall include any trends or similarities among the deaths of inmates in local correctional facilities and present recommendations on policy changes to reduce the number of deaths in local correctional facilities. The Board shall publish such report on its website and submit the report to the Governor, the Chairmen of the Senate Committee on Rehabilitation and Social Services and the House Committee on Public Safety, the Chair of the House Committee for Courts of Justice, the Speaker of the House of Delegates, and the President pro tempore of the Senate.*

## ***Review Process***

1. The first step in the death review process is facility notification of the death to the Board's jail death investigators within 24 hours of the death. Notifications must be made using the designated Report of Inmate Death form.
2. Upon receiving notification of an inmate death, the assigned jail death investigator requests an Autopsy Report from the Medical Examiner's Office via the Department of Correction's Special Investigations Unit.
3. The Death Investigator then contacts the facility head to request and review any/all relevant information including:
  - a. Medical/Mental Health Records
  - b. Intake Records
  - c. Inmate Requests, Complaints, Grievances
  - d. Inspection Notes
  - e. Jail Reports, Records, Logs
  - f. Inmate Records
  - g. Video Footage
  - h. Medical Examiner Reports
  - i. Staff Interviews
  - j. Witness Interviews
  - k. Autopsy reports
  - l. Third-party investigations, interviews, documents (locality, federal) when applicable
  - m. Certification Audits, Inspections



- n. Any other documentation the jail death investigator deems relevant to their investigation
4. After the case investigation is complete, the jail death investigator prepares a detailed report and schedules an initial case discussion with the Board's Executive Director.
5. The Executive Director then places the completed case(s) on the agenda for the Jail Review Committee.
6. Following a thorough review of all relevant facts and circumstances surrounding each death, the Jail Review Committee will make one of the following case recommendations to the Full Board:
  - a. Close the case with a finding that no evidence was revealed that indicated that the facility was out of compliance with the regulations promulgated by the Board;
  - b. Close the case with a finding that the evidence indicated that the facility was out of compliance with the regulations; however, the facility had taken sufficient corrective actions such that no further measures were necessary; or
  - c. Recommend that the Board proceed with adjudication under the Administrative Process Act, Article 3 (§2.2-4018 *et seq.*).
7. If the case is closed, the assigned jail death investigator prepares a letter detailing the findings of the Committee's review. The letter is then reviewed and signed by the Chairman of the Board and submitted to the Governor, the Speaker of the House of Delegates, and the President pro tempore of the Senate in accordance with *Code of Virginia* §53.1-69.1, subsection D.

**PART II**  
***INMATE DEATHS IN VIRGINIA'S JAILS***

***Cause of Death Statistics***

**2018 Case Statistics**

28	-	Natural Causes
9	-	Suicides
6	-	Accidental Drug Overdoses
1	-	Other
<hr/>		
44	-	Total Cases (1/1/2018 - 12/31/2018)

**2019 Case Statistics**

27	-	Natural Causes
10	-	Suicides
2	-	Accidental Drug Overdoses
2	-	Undetermined Causes
<hr/>		
41	-	Total Cases (1/1/2019 – 12/31/2019)

**2020 Case Statistics**

22	-	Natural Causes
11	-	Suicides
7	-	Accident/Unknown/Death in Custody
<hr/>		
40	-	Total Cases (1/1/2020 – 12/31/2020)

**2021 Case Statistics**

37	-	Natural Causes
23	-	Suicides
1	-	Homicide
9	-	Accident/Overdose
7	-	Undetermined at time of publication
<hr/>		
77	-	Total Cases (1/1/2021 – 12/31/2021)

## ***2021 Deaths by Facility***

From January 1, 2021 through December 31, 2021, in-custody deaths occurred at the following facilities:

Accomack County Jail (1); Alexandria Detention Center (1); Arlington County Detention Center (1); Bristol City Jail (1); Blue Ridge Regional Jail Authority – Lynchburg (1); Central Virginia Regional Jail (1); Chesapeake Correctional Center (3); Chesterfield County Jail (3); Fairfax County Adult Detention Center (2); Hampton City Jail (3); Hampton Roads Regional Jail (4); Henrico County Jail West (2); Henrico County Jail Home Electronic Monitoring (1); Henry County Jail (1); Loudoun County Jail (2); Middle River Regional Jail (1); Montgomery County Jail (1); New River Valley Regional Jail (2); Newport News City Jail (4); Norfolk City Jail (1); Northwestern Regional Adult Detention Center (2); Page County Jail (1); Page County Home Electronic Monitoring (1); Pamunkey Regional Jail (1); Piedmont Regional Jail (2); Portsmouth City Jail (1); Prince William-Manassas Regional Adult Detention Center (2); Rappahannock Regional Jail (2); Riverside Regional Jail (7); Rockingham-Harrisonburg Regional Jail (4); Rappahannock-Shenandoah-Warren Regional Jail (1); Southwest Virginia Regional Jail Authority – Abingdon (3); Southwest Virginia Regional Jail Authority – Duffield (3); Southwest Virginia Regional Jail Authority – Haysi (1); Southwest Virginia Regional Jail Authority – Tazewell (1); Virginia Beach Correctional Center (4); Virginia Peninsula Regional Jail (1); and Western Virginia Regional Jail (3).

## **PART III**

### ***DEATH REVIEW FINDINGS***

#### ***Jail Deaths Reviewed in 2021***

The Board of Local and Regional Jails' Jail Death Review Committee met seven times during the 2021 calendar year. The January, February, and March meetings were not conducted due to the global pandemic. A total of 33 jail deaths were reviewed and in seven (7) instances facilities were determined to be out of compliance with the Minimum Standards for Jails and Lockups.

Deficiencies were identified as follows:

- **In one jail death, the facility was determined to be out of compliance with standard 6VAC15-40-120. Classification** – A. Written policy, procedure, and practice shall ensure the following: 1. Classification of inmates as to level of housing assignment and participation in correctional programs; 2. Separate living quarters for males, females, and juveniles; 3. Inmates are not segregated by race, color, creed or national origin; 4. Security permitting, equal access to all programs and activities, through separate scheduling, or other utilization of combined programs under supervision; and 5. Any exception to the above is documented. B. If the facility is using objective classification, then the provisions of this subsection shall be followed: 1. Classification is conducted upon intake and prior to final housing assignment; 2. Classification determines the custody level and housing assignment; 3. Classification is conducted through inmate interviews and the use of data collection instruments or forms, which are maintained on file; 4. Classification instruments enable objective evaluation and/or scoring of: a. Current offenses; b. Prior convictions; c. History of assaultive behavior; d. Escape history; e. Prior institutional adjustment; f. Court status and pending charges; g. Mental health or medical treatment history or needs; h. Identified stability factors; 5. The classification system includes administrative review of decisions and periodic reclassification and override procedures that are documented and maintained on file; 6. The classification system addresses both the potential security risks posed and treatment needs of the inmate; 7. Separate living quarters for males, females, and juveniles; and 8. Inmates are not segregated by race, color, creed, or national origin.
- **In six jail deaths, the facility was determined to be out of compliance with 6VAC15-40-360. Twenty-four-hour emergency medical and mental health care** - Written policy, procedure, and practice shall provide 24-hour emergency medical and mental health care availability.
- **In three jail deaths, the facility was determined to be out of compliance with 6VAC15-40-370. Receiving and medical screening of inmates** - Written policy, procedure, and practice shall provide that receiving and medical screening be performed

on all inmates upon admission to the facility. The medical screening shall: 1. Specify screening for current illnesses, health problems and conditions, and past history of communicable diseases; 2. Specify screening for current symptoms regarding the inmate's mental health, dental problems, allergies, present medications, special dietary requirements, and symptoms of venereal disease; 3. Include inquiry into past and present drug and alcohol abuse, mental health status, depression, suicidal tendencies, and skin condition; 4. For female inmates, include inquiry into possible pregnancy or gynecological problems; and 5. All inmates shall receive a tuberculosis (TB) skin test within seven days of admission to the facility.

- **In three jail deaths, the facility was determined to be out of compliance with 6VAC15-40-380. Inmate access to medical services** - Written policy, procedure, and practice shall be developed whereby inmates shall be informed, at the time of admission to the facility, of the procedures for gaining access to medical services.
- **In one jail death, the facility was determined to be out of compliance with 6VAC15-40-400. Management of pharmaceuticals** - Written procedures for the management of pharmaceuticals shall be established and approved by the medical authority or pharmacist, if applicable. Written policy, procedure, and practice shall provide for the proper management of pharmaceuticals, including receipt, storage, dispensing, and distribution of drugs. These procedures shall be reviewed every 12 months by the medical authority or pharmacist. Such reviews shall be documented.
- **In two jail deaths, the facility was determined to be out of compliance with 6VAC15-40-1045. Supervision of Inmates** - All inmate housing areas shall be inspected a minimum of twice per hour at random intervals between inspections. All inspections and unusual incidents shall be documented. No obstructions shall be placed in the bars or windows that would prevent the ability of staff to view inmates or the entire housing area.

### ***Corrective Actions Taken by Facilities***

- Enhanced policies and procedures, revised to address violations (e.g., expedite processes for calling 911 in case of a medical emergency).
- Additional training for staff (e.g., formal re-training of staff on safety procedures).
- Additional security staff to monitor inmates in mental health.
- Enhanced supervision (e.g., additional staff to observe inmates, additional checks for those with mental illnesses).
- Accountability of staff and administration.
- Enhanced medical care (e.g., hiring additional nurses).
- Replacement of health care contracted providers.
- Adequate assessment of offender medical and behavioral health needs (e.g., hiring additional mental health professionals to ensure proper screening, evaluations, and treatment).
- Administrative and clinical mortality reviews.
- Continuous Quality Improvement Program in health care services.
- Incorporation of internal audits by supervisory and administrative staff to ensure compliance with the Minimum Standards for Jails and Lockups.
- Routing roll-call reviews of the enhanced policies/procedures and standards.

## **PART IV**

### ***JAIL AUDITS AND INSPECTIONS***

#### ***Audit and Inspection Process***

Currently, two full time regulatory compliance inspectors conduct annual life, health, and safety inspections and triennial certification audits of local and regional jails and lockups. Their inspections and audits determine compliance with the Minimum Standards for Jails and Lockups, 6VAC15-40. If a deficiency is noted, the facility is required to submit a plan of correction to address the deficiency. The inspectors conduct a follow-up onsite visit to the facility to ensure that corrective actions have been taken.

#### ***Audit and Inspections Results***

The tables on the following pages detail the jail and lockup audit and inspection results and any deficiencies noted during the inspection or audit. The deficiencies column identifies the specific section of the Virginia Administrative Code that was determined to be out of compliance with the Minimum Standards. Please note that only the specific section number is noted in the table but all refer to 6VAC15, Chapter 40 (e.g., 6VAC15-40-400 is listed as 400 in the table). The full Board of Local and Regional Jails Compliance Documentation for Jails is included in Appendix A and offers a comprehensive explanation of what factors the jail inspectors evaluate to determine compliance with the Minimum Standards.

During the audits and inspections conducted in 2021, the most frequent deficiency cited was 6VAC15-40-395 Management of Sharps. This standard requires that written policy, procedure, and practice shall govern the control, storage, and use of sharps including at a minimum needles, scalpels, lancets, and dental tools. Eleven facilities were found to be deficient in this area. The second most frequently cited deficiency was 6VAC15-40-545, which addresses inmate food service workers. This standard requires that written policy, procedure, and practice shall ensure that a visual medical examination of each inmate assigned to food service occurs no more than 30 days prior to assignment and quarterly thereafter. It also states that each inmate food service worker shall be given a TB skin test prior to food service assignment. Eight facilities were found to be deficient in this area.

## 2021 Audit and Inspection Findings:

FACILITY	AUDIT/INSP	MONTH	DEFICIENCIES
ACCOMACK COUNTY	INSPECTION	September	395, 950, 1100, 1150
ALBEMARLE/CHARLOTTESVILLE RJ	INSPECTION	November	395, 545
ALEXANDRIA DETENTION CENTER	INSPECTION	October	No deficiencies observed
ALLEGHANY REGIONAL	INSPECTION	November	No deficiencies observed
ARLINGTON COUNTY	INSPECTION	May	540
BLACKSTONE TOWN LOCKUP	INSPECTION	August	No deficiencies observed
BOTETOURT-CRAIG COUNTY	INSPECTION	October	No deficiencies observed
BRISTOL CITY	INSPECTION	December	395
BRRJ - AMHERST	AUDIT	September	395, 545, 940, 945, 950, 1160
BRRJ - BEDFORD	INSPECTION	September	395, 545
BRRJ - CAMPBELL	INSPECTION	July	1045
BRRJ - HALIFAX	AUDIT	October	No deficiencies observed
BRRJ - LYNCHBURG	INSPECTION	October	No deficiencies observed
CAROLINE DET. CENTER ICE	INSPECTION	December	No deficiencies observed
CARROLL COUNTY LOCKUP	AUDIT	June	No deficiencies observed
CENTRAL VIRGINIA REGIONAL	AUDIT	May	No deficiencies observed
CHARLOTTE COUNTY	INSPECTION	August	910
CHESAPEAKE CITY	INSPECTION	July	No deficiencies observed
CHESTERFIELD COUNTY	INSPECTION	April	No deficiencies observed
CULPEPER COUNTY	INSPECTION	June	390, 395, 405, 945, 950
DANVILLE CITY	INSPECTION	June	No deficiencies observed
DANVILLE CITY ADC	INSPECTION	October	545
DINWIDDIE COUNTY LOCKUP	INSPECTION	June	No deficiencies observed
EASTERN SHORE REGIONAL	INSPECTION	September	393, 395, 450, 1080
ESSEX COUNTY LOCKUP	AUDIT	March	No deficiencies observed



FACILITY	AUDIT/INSP	MONTH	DEFICIENCIES
FAIRFAX COUNTY ADC	INSPECTION	November into December	370, 395, 545, 950, 1030
FARMVILLE DET. CENTER ICE	INSPECTION	July	No deficiencies observed
FAUQUIER COUNTY	INSPECTION	December	No deficiencies observed
FLOYD COUNTY LOCKUP	INSPECTION	August	No deficiencies observed
FLUVANNA COUNTY LOCKUP	INSPECTION	September	No deficiencies observed
FRANKLIN COUNTY	AUDIT	August	440
GALAX CITY LOCKUP	INSPECTION	August	No deficiencies observed
GLOUCESTER COUNTY	INSPECTION	June	No deficiencies observed
GRAYSON COUNTY LOCKUP	INSPECTION	August	No deficiencies observed
GREENE COUNTY LOCKUP	INSPECTION	August	No deficiencies observed
HAMPTON CITY	INSPECTION	May	No deficiencies observed
HAMPTON CITY CC	INSPECTION	May	No deficiencies observed
HAMPTON ROADS REGIONAL	AUDIT	July	No deficiencies observed
HENRICO COUNTY EAST	INSPECTION	July	No deficiencies observed
HENRICO COUNTY WEST	INSPECTION	July	No deficiencies observed
HENRY COUNTY	INSPECTION	June	No deficiencies observed
HIGHLAND COUNTY LOCKUP	INSPECTION	September	No deficiencies observed
LANCASTER COUNTY	INSPECTION	August	No deficiencies observed
LOUDOUN COUNTY	INSPECTION	November	No deficiencies observed
MADISON COUNTY LOCKUP	AUDIT	June	No deficiencies observed
MARTINSVILLE CITY JAIL AND ANNEX	AUDIT	August	No deficiencies observed
MEHERRIN RIVER REGIONAL ALBERTA	INSPECTION	October	1100
MIDDLE PENINSULA REGIONAL	AUDIT	March	540
MIDDLE RIVER REG. JAIL	INSPECTION	November	545, 950
MONTGOMERY COUNTY	INSPECTION	November	370, 395
NEW RIVER VALLEY REGIONAL	AUDIT	April	395, 450, 1080
NEWPORT NEWS CITY	AUDIT	July	No deficiencies observed
NEWPORT NEWS CITY FARM	AUDIT	July	No deficiencies observed
NORFOLK CITY	INSPECTION	April	395, 450
NORTHERN NECK REGIONAL	INSPECTION	March	393, 540, 1080
NORTHWESTERN REGIONAL	AUDIT	July	No deficiencies observed

FACILITY	AUDIT/INSP	MONTH	DEFICIENCIES
PAGE COUNTY	AUDIT	December	No deficiencies observed
PAMUNKEY REGIONAL	INSPECTION	May	No deficiencies observed
PATRICK COUNTY	AUDIT	March	No deficiencies observed
PIEDMONT REGIONAL	INSPECTION	May	No deficiencies observed
PITTSYLVANIA COUNTY	AUDIT	Jun	No deficiencies observed
PORTSMOUTH CITY JAIL AND ANNEX	INSPECTION	May	1080
PRINCE WM/MANASSAS RADC	INSPECTION	November	400, 450, 540, 740, 945
RAPPAHANNOCK REGIONAL	INSPECTION	April	No deficiencies observed
RICHMOND CITY	AUDIT	May	No deficiencies observed
RIVERSIDE REGIONAL	INSPECTION	March	540, 545
ROANOKE CITY	INSPECTION	April	1100
ROANOKE COUNTY	INSPECTION	June	400, 440
ROCKBRIDGE REGIONAL	INSPECTION	September	No deficiencies observed
ROCKINGHAM/HARRISONBURG REGIONAL JAIL	INSPECTION	November	1100
RSW REGIONAL JAIL	INSPECTION	December	420, 950
SMITHFIELD LOCKUP	INSPECTION	March	No deficiencies observed
SOUTHAMPTON COUNTY JAIL AND ANNEX	INSPECTION	June	No deficiencies observed
SOUTHSIDE REGIONAL	INSPECTION	August	No deficiencies observed
SURRY COUNTY LOCKUP	INSPECTION	September	1315
SUSSEX COUNTY	INSPECTION	May	No deficiencies observed
SWVRJA-ABINGDON	AUDIT	March into April	No deficiencies observed
SWVRJA-DUFFIELD	AUDIT	March	540, 1100
SWVRJA-HAYSI	AUDIT	April	No deficiencies observed
SWVRJA-TAZEWELL	INSPECTION	June	No deficiencies observed
VIRGINIA BEACH CORRECTIONAL	INSPECTION	December	540, 545, 940, 945, 950, 1030
VIRGINIA BEACH LOCKUP #2	INSPECTION	July	No deficiencies observed
VIRGINIA BEACH LOCKUP #3	INSPECTION	July	No deficiencies observed
VIRGINIA PENINSULA REGIONAL	INSPECTION	February	No deficiencies observed
WESTERN TIDEWATER REGIONAL	INSPECTION	July into August	1140
WESTERN VA REGIONAL	INSPECTION	June	No deficiencies observed
WYTHE COUNTY LOCKUP	AUDIT	June	No deficiencies observed

## ***Conclusion***

The Board of Local and Regional Jails (the Board) is responsible for developing and establishing operation and fiscal standards governing local and regional correctional facilities. The Board is also charged with offering recommendations for changes to those standards resulting from the findings of inspections, audits, and reviews. Of particular concern, based on the 2021 findings, are the health and mental health needs of inmates. These areas will be of particular focus in any upcoming standards revision.

## **Appendix:**

### **Compliance Documentation for Jails**

**6VAC15-40-5.** Compliance Documentation – The elements listed in the compliance documentation shall be interpreted as part of the standard. If facility policy exceeds the requirement of the standard, the facility will be held to the content of such policy.

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**6VAC15-40-10.** Definitions – See Definitions document.

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**6VAC15-40-20.** Responsibility – The primary responsibility for application of these standards shall be with the sheriff or chief executive officer of the jail or lockup.

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**6VAC15-40-30.** Requirement for Written Statement – The facility shall have a written statement and policy discussing its philosophy, goals and objectives. The written statement shall be reviewed every 12 months by administrative staff.

Compliance Documentation:

- Review written statement and policy
- Review documentation of 12 month administrative staff review
- Interview staff

Further Information: Refer to definition of twelve months.

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**6VAC15-40-40.** Policy and Procedures Manual – Written policy and procedures shall be maintained and available 24 hours a day to all staff. The facility's policies and procedures shall be reviewed every 12 months by administrative staff and updated to keep current with changes.

Compliance Documentation:

- Review policy and procedures manual
- • Review documentation of availability to staff
- • Review documentation of 12 month administrative staff review
- Interview staff

Further Information: Refer to definition of twelve months.

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**6VAC15-40-50.** Chief Executive Officer – Written policy shall provide that each facility shall be headed by a single chief executive officer to whom all employees and functional units are responsible.

Compliance Documentation:

- Review written policy
  - Review organizational chart
  - Interview staff
- 

**6VAC15-40-60.** Annual Report – A written annual report of the availability of services and programs to inmates shall be reviewed by the facility administrator and provided to the sentencing courts and may be provided to relevant community agencies.

Compliance Documentation:

- Review annual report
- Review documentation of facility administrator's review
- Review documentation of distribution to courts and community agencies
- Interview staff

Further Information: Refer to definition of annual.

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**6VAC15-40-70.** Release of Information – Written policies and procedures covering the release of information shall be developed in accordance with the Regulations Relating to Criminal History Record Information Use and Security (6VAC20-120-10 et seq.) as promulgated by the Criminal Justice Services Board.

Compliance Documentation:

- Review written policy and procedure
- Review dissemination log; Regulations require the following fields:  
a) Date of inquiry; (b) Requesting agency name and address; (c) Identifying name and number (either FBI or state identification number of record subject, or notification of "no record found"); (d) Name of requester within the agency requesting criminal history record information; and (e) Name of disseminator (officer or civilian who provides the criminal history record information to the requester)
- Interview staff

Further Information: Refer to definition of correctional status information. This information is not considered criminal record information and does not need to be recorded in a log. Refer to definition of criminal history record information.

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**6VAC15-40-80.** Current and Accurate Inmate Records – Written policy, procedure, and practice shall ensure that inmate records are current and accurate.

Compliance Documentation:

- Review written policy and procedures

- Review inmate records (see 6VAC15-40-90 for number of records to be reviewed)
- 

**6VAC15-40-90.** Content of Personal Inmate Records – Personal records shall be maintained on all inmates committed or assigned to the facility. Inmate records shall be kept confidential, securely maintained, and in good order to facilitate timely access by staff. Inmate records shall contain, but not be limited to:

1. Inmate data form;
2. Commitment form or court order, or both;
3. Records developed as a result of classification;
4. All disciplinary actions, or unusual incidents;
5. Work record and program involvement;
6. Copies of inmates' property expenditure records and receipts; and
7. Victim notification, if applicable.

Compliance Documentation:

- Review inmate records (can be paper files or automated records) –

Population	Records Reviewed
1-35	5 minimum
36-99	10 minimum
100-299	15 minimum
300-499	20 minimum
500 +	25 minimum
  - Observe records storage
  - Interview staff
- 

**6VAC15-40-100.** Daily Logs – The facility shall maintain a daily log(s) that records the following information:

1. Inmate count and location, to be verified with a minimum of one formal count per shift, observing flesh and movement;
2. Intake and release of inmates;
3. Entries and exits of physicians, attorneys, ministers, and other nonfacility personnel; and
4. Any unusual incidents that result in physical harm to, or threaten the safety of, any person or the security of the facility.

Compliance Documentation:

- Review daily count sheets
- Review intake and release records
- Review professional log
- Review incident reports/logs
- Interview staff

Further Information: The definition of shift will be at the discretion of each facility, e.g. 8, 10, 12 hours.

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**6VAC15-40-110.** Serious Incident Reports – A report setting forth in detail the pertinent facts of deaths, discharging of firearms, erroneous releases, escapes, fires requiring evacuation of inmates, hostage situations, and recapture of escapees shall be reported to the Local Facilities Supervisor of the Compliance and Accreditation Unit, Department of Corrections (DOC), or designee. The initial report shall be made within 24 hours and a full report submitted at the end of the investigation.

Compliance Documentation:

- Review serious incident reports
  - Review documentation verifying initial report made within 24 hours to the Local Facilities Supervisor
  - Interview staff or Local Facilities Supervisor
- 

**6VAC15-40-120.** Classification –

A. Written policy, procedure, and practice shall ensure the following:

1. Classification of inmates as to level of housing assignment and participation in correctional programs;
2. Separate living quarters for males, females and juveniles;
3. Inmates are not segregated by race, color, creed or national origin;
4. Security permitting, equal access to all programs and activities, through separate scheduling, or other utilization of combined programs under supervision; and
5. Any exception to the above is documented.

B. If the facility is using objective classification, then the provisions of this subsection shall be followed:

1. Classification is conducted upon intake and prior to final housing assignment;
2. Classification determines the custody level and housing assignment;
3. Classification is conducted through inmate interviews and the use of data collection instruments or forms, which are maintained on file;
4. Classification instruments enable objective evaluation and/or scoring of:
  - a. Current offenses.
  - b. Prior convictions.
  - c. History of assaultive behavior.
  - d. Escape history.
  - e. Prior institutional adjustment.
  - f. Court status and pending charges.
  - g. Mental health or medical treatment history or needs.
  - h. Identified stability factors.
5. The classification system includes administrative review of decisions and periodic reclassification and override procedures that are documented and maintained on file.
6. The classification system addresses both the potential security risks posed and treatment needs of the inmate.
7. Separate living quarters for males, females, and juveniles.



8. Inmates are not segregated by race, color, creed, or national origin.

Compliance Documentation:

- Review written policy and procedures
  - Review classification documents
  - Review eligibility requirements for Work Force (see §53.1- 128 - §53.1-131 of the Code of Virginia) and inmate worker program participants
  - Review any exceptions to the above
  - Observation of housing units
  - Interview staff/inmates
- 

**6VAC15-40-130.** Written Grievance Procedure – A written grievance procedure shall be developed and made available to all inmates with the following:

1. Inmates shall be given a grievance form after exhausting all prerequisites of the grievance procedure. Prerequisites shall be documented.
2. Grievances shall be responded to within nine work days of receipt.
3. Written responses, including the reason for the decision, shall be made to all grievances.
4. A review shall be made by a staff member not directly involved in the grievance.
5. All inmates shall have access to the grievance procedure with guaranty against reprisal.
6. All inmates shall be afforded the opportunity to appeal the decision.

Compliance Documentation:

- Review written procedure (all 6 elements must be included in the procedure)
  - Review documentation of prerequisites
  - Review grievances
  - Review appeals
  - Review inmate handbook
  - Interview staff/inmates
- 

**6VAC15-40-140.** Awareness of Programs – The facility administrator or designee shall make each inmate aware of available programs.

Compliance Documentation:

- Review inmate handbook/orientation/program schedule
  - Interview staff/inmates
- 

**6VAC15-40-150.** Inmate Exercise – Written policy, procedure, and practice shall provide that all inmates have access to physical exercise. Facilities with specified exercise areas shall provide inmate exercise a minimum of one hour per week. Facilities without specified exercise areas shall provide equipment or an area within the dayroom for inmates to exercise large muscle groups on a

daily basis. Shortage of staff shall not hinder inmate access to physical exercise. Exceptions for inclement weather or risk to security shall be documented. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review exercise documentation
  - Review documentation of exceptions (disciplinary segregation inmates are exempt)
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-155.** Access to Recreational Activities – Written policy, procedure, and practice shall provide inmates access to recreational activities.

Compliance Documentation:

- Review written policy and procedures
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-160.** Written Procedures for Release Program Eligibility Criteria – Written procedures outlining the eligibility criteria for participation in a work release, educational release, electronic monitoring, or rehabilitation release program shall be developed by each facility with a work release, educational release, electronic monitoring, or rehabilitation release program. Inmates shall meet the established eligibility requirements prior to being released to participate in the program.

Compliance Documentation (if applicable):

- Review written eligibility criteria/court order
  - Review court notification documentation
  - Review non-court ordered placement documentation (the court or commonwealth's attorney shall be notified in writing in accordance with §53.1-131 of the Code of Virginia)
  - Review work release, educational release, rehabilitation release (Code of Virginia §53.1-131) and electronic monitoring (Code of Virginia §53.1-131.2) case files
  - Regional jails must provide documentation of sheriff's delegation of authority for work release assignment or sheriff's approval
  - Interview staff
- 

**6VAC15-40-170.** Written Procedures for Accountability of Inmate Participants – Written procedures shall ensure the accountability of inmate participants and provide for supervision in the community. Such procedures shall include, at a minimum:

1. Provisions for a daily inmate count;

2. Methods for determining and identifying inmates who are authorized to leave the facility;
3. Provisions for a controlled sign-out and sign-in process; and
4. Provisions that require a minimum of one staff-initiated telephone contact per calendar week and a minimum of one random field visit per month or GPS monitoring shall be used to verify the inmate's location within the community.

Compliance Documentation (if applicable):

- Review written accountability/supervision procedures
  - Review sign-out/in logs
  - Review documentation of telephone contacts and random field visits/GPS monitoring
  - Interview staff
- 

**6VAC15-40-180.** Conditions for Inmate Participation in a Work Release Program- Inmate participation in a work release program shall conform to the following specific conditions unless ordered otherwise by an appropriate court:

1. Participation by the inmate shall be on a voluntary basis.
2. The following conditions shall be met where the employer has a federal contract.
  - a. Representatives of local union central bodies or similar labor union organizations shall have been consulted;
  - b. Employment shall not result in the displacement of employed workers, or be applied in skills, crafts or trades in which there is a surplus of available gainful labor in the locality, or impair existing contracts for services; and
  - c. Rates of pay and other conditions of employment shall not be less than those paid or provided for work of a similar nature in the locality in which the work is being performed.

Compliance Documentation (if applicable):

- Review documentation to determine whether an employer has a federal contract
- Review court order (if applicable)
- Interview staff/inmates

Further Information: Many facilities include the provisions in #2 within the employer agreement to ensure compliance with this standard.

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**6VAC15-40-190.** Conditions for Inmate Participation in Educational Release or Rehabilitation Release Programs – Inmate participation in an educational release or rehabilitation release program shall conform to the following specific conditions unless ordered otherwise by an appropriate court:

1. Participation by the inmate may be voluntary or court ordered;
2. Meetings or classes shall be on a regularly scheduled basis; and

3. Other conditions shall not be more restrictive on the inmate than those required by other participants.

Compliance Documentation (if applicable):

- Review court order, records and/or correspondence
  - Review inmate records
  - Interview staff
- 

**6VAC15-40-200.** Furlough – Inmate participants in a work release, educational release, or rehabilitation release program may be considered for furlough, as prescribed by the facility policy, not to exceed three days in length at any one time. Written procedures shall govern the granting of furloughs in accordance with the provisions of §53.1-132 of the Code of Virginia.

Compliance Documentation (if applicable):

- Review written policy and procedures
- Review facility records/logs
- Interview staff/inmates

Further Information: This standard does not apply to furloughs granted by the sentencing court for other reasons such as medical or funeral.

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**6VAC15-40-210.** Earnings – Written procedures shall be developed to ensure the accountability of all earnings received, disbursed, to whom and reason on behalf of the inmate participant. Procedures shall be in accordance with §53.1-131 of the Code of Virginia.

Compliance Documentation (if applicable):

- Review written accountability procedures
  - Interview staff/inmates
- 

**6VAC15-40-220.** Removing Inmate Participants from Program – Written procedures shall establish the criteria and process for removing inmate participants from the program.

1. Procedures shall include provisions for an impartial hearing for the inmate participants.
2. Procedures shall include provisions for appealing the removal.
3. Documentation shall reflect that this information was explained to all inmate participants upon assignment to the program.

Compliance Documentation (if applicable):

- Review written procedures (all 3 elements must be included in the procedure)
- Review documentation of removal/court order
- Interview staff/inmates

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**6VAC15-40-230.** Written Agreement with Director – Each facility having a work release, educational release, or rehabilitation release program that includes state offenders as defined in §53.1-20 of the Code of Virginia shall have a written agreement with the director, or his designee.

Compliance Documentation (if applicable):

- Review written agreement
- Interview staff

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**6VAC15-40-240.** Offender Participation in Compliance with Appropriate Criteria and Approval – State offenders assigned to a work release, educational release, or rehabilitation release program shall meet the appropriate criteria set forth by the Department of Corrections (DOC), be approved by the DOC Central Classification Services and the management review process pursuant to a written agreement as provided in accordance with §53.1-131 of the Code of Virginia.

Compliance Documentation (if applicable):

- Review letter of approval from Central Classification Services and/or facility's letter requesting inmate assignment to work release
- Review court order (if applicable)

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**6VAC15-40-250.** Participation in Religious Services or Counseling – Written policy, procedure, and practice shall allow inmates to participate voluntarily in available religious services or counseling of their choice during scheduled hours within the facility. The constitutional right to pursue any lawful and legitimate religious practice shall be guaranteed to all inmates consistent with maintaining the order and security of the facility.

Compliance Documentation:

- Review written policy and procedures
- Review schedule/logs
- Observation
- Interview staff/inmates

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**6VAC15-40-260.** Social Services and Volunteer Programs – Where volunteers provide direct services to inmates in the facility, written policies and procedure shall describe each available service or program. The facility shall secure and support available social services and volunteer programs from the community.

Compliance Documentation:

- Review written policy and procedures
- Review schedule/logs

- Interview staff/inmates
- 

**6VAC15-40-270.** Coordination of Volunteer Program – The volunteer program shall be coordinated and administered in accordance with written policies and procedures. Each volunteer shall sign a statement agreeing to abide by facility rules and regulations.

Compliance Documentation:

- Review written policy and procedures
  - Review signed volunteer statements
- 

**6VAC15-40-280.** Availability and Administration of Educational Services – Written policy, procedure, and practice shall govern the availability and administration of educational services for inmates, including a written agreement with the local school authority for the provision of special education. The facility administrator shall coordinate with local authorities for the provision of community services and resources utilized for this purpose, where available.

Compliance Documentation:

- Review written policy and procedures
  - Review written agreement for special educational services
  - Review written agreement with local authorities (if available)
  - Review educational program schedule
  - Interview staff/inmates
- 

**6VAC15-40-290.** Provisions of Reading Materials – The facility shall provide reading materials that include current periodicals.

Compliance Documentation:

- Review list of available periodicals (2 minimum: This can be newspapers, magazines or a combination of both)
  - Review inmate handbook/schedule
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-300.** Permission of Reading Materials – Reading materials, including newspapers, magazines and books, shall be permitted in the facility unless the material poses a threat to security or is not in compliance with other facility restrictions or guidelines.

Compliance Documentation:

- Review reading material
- Review documentation of denials (if applicable)
- Interview staff/inmates

Further Information: Facilities may impose restrictions as to obtaining material through such sources as publishers, book clubs or bookstores.

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**6VAC15-40-310.** Commissary Services – The facility shall make available to inmates commissary services where they may purchase from an approved list of items at a minimum of one time per week. Written policy and procedure shall describe the circumstances and duration under which inmates may be restricted from this privilege.

Compliance Documentation:

- Review written policy and procedures
- Review commissary list
- Review weekly commissary receipts
- Interview staff/inmates

Further Information: The commissary list should include, at a minimum, hygiene and food items. The authority for establishing stores in local correctional facilities operated by a sheriff is in §53.1-127.1 of the Code of Virginia, and the authority for regional jail administrators is in §53.1-115.2 of the Code of Virginia.

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**6VAC15-40-320.** Licensed Physician – A licensed physician shall supervise the facility's medical and health care services. Facilities that contract with private medical facilities or vendors shall maintain a current copy of the agreement, unless employed by the facility. **LHS**

Compliance Documentation:

- Review current license
- Review current copy of agreement (if applicable)
- Interview staff

Further Information: Refer to definition of current.

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**6VAC15-40-330.** Restrictions on Physician – No restrictions shall be imposed by the facility in the practice of medicine. However, administrative and security regulations applicable to facility personnel shall apply to medical personnel as well.

Compliance Documentation:

- Interview staff
- 

**6VAC15-40-340.** Health Care Provider and Licensing, Certification and Qualification of Health Care Personnel – Each facility shall have a minimum of one licensed or qualified health care provider who is accessible to inmates a

minimum of one time per week. Health care personnel shall meet appropriate and current licensing, certification, or qualification requirements. **LHS**

Compliance Documentation:

- Review current licensing/qualifications for health care provider
- Review schedule/documentation of accessibility to inmates
- Review current licensing/certification/qualification for in-house health care personnel
- Interview staff/inmates

Further Information: Refer to definition of current.

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**6VAC15-40-350.** Private Examination and Treatment of Inmates – Where in-house medical and health care services are provided, there shall be space for the private examination and treatment of inmates.

Compliance Documentation (if applicable):

- Observe medical examination and treatment area
  - Interview staff
- 

**6VAC15-40-360.** Twenty-Four Hour Emergency Medical and Mental Health Care – Written policy, procedure, and practice shall provide 24-hour emergency medical and mental health care availability. **LHS**

Compliance Documentation:

- Review written policy and procedure
  - Review incident reports (if applicable)
  - Interview staff
- 

**6VAC15-40-370.** Receiving and Medical Screening of Inmates – Written policy, procedure, and practice shall provide that receiving and medical screening be performed on all inmates upon admission to the facility. The medical screening shall:

1. Specify screening for current illnesses, health problems and conditions, and past history of communicable diseases;
2. Specify screening for current symptoms regarding the inmate's mental health, dental problems, allergies, present medications, special dietary requirements, and symptoms of venereal disease;
3. Include inquiry into past and present drug and alcohol abuse, mental health status, depression, suicidal tendencies, and skin condition;
4. For female inmates, include inquiry into possible pregnancy or gynecological problems; and
5. All inmates shall receive a tuberculosis (TB) skin test within seven days of admission. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review medical screening form (all 5 elements must be included on the form)



- Interview staff

Further Information: Refer to definition of medical screening. The screening may be conducted by the booking officer or health care personnel.

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**6VAC15-40-380.** Inmate Access to Medical Services – Written policy, procedure, and practice shall be developed whereby inmates shall be informed, at the time of admission to the facility, of the procedures for gaining access to medical services. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review inmate handbook/orientation
  - Interview staff/inmates
- 

**6VAC15-40-390.** Training and Competency of Staff – All security staff shall be trained and competent in rendering basic first aid and CPR by a recognized certifying agency. All training shall be documented. **LHS**

Compliance Documentation:

- Review current official training records (can be first aid/CPR cards, class roster or basic/in-service training curriculum)
- Interview staff

Further Information: Refer to definition of current.

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**6VAC15-40-393.** Universal Precautions – All staff who have contact with inmates shall be trained, competent, and knowledgeable in the use of universal precautions. All training shall be documented and completed every 12 months. **LHS**

Compliance Documentation:

- Review training records
- Interview staff

Further Information: Refer to definition of twelve months.

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**6VAC15-40-395.** Management of Sharps – Written policy, procedure, and practice shall govern the control, storage, and use of sharps including, at a minimum, needles, scalpels, lancets, and dental tools. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review inventory sheets
  - Observe storage area
  - Interview staff
- 

**6VAC15-40-400.** Management of Pharmaceuticals – Written procedures for the management of pharmaceuticals shall be established and approved by the medical authority or pharmacist, if applicable. Written policy, procedure, and practice shall provide for the proper management of pharmaceuticals, including receipt, storage, dispensing and distribution of drugs. These procedures shall be reviewed every 12 months by the medical authority or pharmacist. Such reviews shall be documented. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review medication administration records
- Review records for disposal of unused or expired medications
- Review medical authority 12 month review
- Observe storage area
- Interview staff

Further Information: Refer to definition of medical authority. Refer to definition of twelve months. The Virginia Board of Pharmacy Regulations address the requirements for handling of prescription drugs (18VAC110-20-590, Drugs in Correctional Institutions), and the return or exchange of prescription drugs (18VAC110-20-400, Returning of Drugs and Devices).

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**6VAC15-40-405.** Automated External Defibrillator (AED) – There shall be a minimum of one AED unit available in the facility. All security staff shall receive training in the operation of the unit. **LHS**

Compliance Documentation:

- Review current official training records
- Observation

Further Information: Refer to definition of current.

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**6VAC15-40-410.** Inmate Medical Records – The medical record for each inmate shall be kept separate from other facility records and shall include the following:

1. The completed screening form; and
2. All findings, diagnoses, treatments, dispositions, prescriptions, and administration of medication.

Compliance Documentation:

- Review inmate medical records (see 6VAC15-40-90 for number of records to be reviewed)
  - Observe inmate medical records storage
- 

**6VAC15-40-420.** Transfer of Summaries of Medical Record – Medical record summaries shall be transferred to the same facility to which the inmate is being transferred. Required information shall include: vital signs, current medications, current medical/dental problems, mental health screening, mental health problems, TB skin test date and results, special inmate needs/accommodations, pending medical appointments, medical dispositions, overall comments, health care provider/personnel signature and date, and any additional pertinent medical information such as lab work, x-rays, etc. **LHS**

Compliance Documentation:

- Review medical record summary sheets
- 

**6VAC15-40-430.** Medical or Pharmaceutical Testing for Experimental or Research Purposes – Written policy and practice shall prohibit medical or pharmaceutical testing for experimental or research purposes. **LHS**

Compliance Documentation:

- Review written policy
  - Interview staff/inmates
- 

**6VAC15-40-440.** Medical Care Provided by Personnel Other than Physician – Medical care provided by personnel other than a physician shall be pursuant to a written protocol or order. Protocols or orders shall be reviewed and signed by the supervising physician every 12 months. **LHS**

Compliance Documentation:

- Review written protocol or order
- Review documentation of 12 month review and approval by physician
- Interview staff

Further Information: Refer to definition of twelve months. The protocol or order may be for an individual inmate.

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**6VAC15-40-450.** Suicide Prevention and Intervention Plan – There shall be a written suicide prevention and intervention plan. These procedures shall be

reviewed and documented by an appropriate medical or mental health authority prior to implementation and every three years thereafter. These procedures shall be reviewed every 12 months by staff having contact with inmates. Such reviews shall be documented. **LHS**

Compliance Documentation:

- Review written suicide prevention and intervention plan
- Review approval by medical or mental health authority
- Review documentation of 12 month staff review
- Interview staff

Further Information: Refer to definition of twelve months.

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**6VAC15-40-470.** Medical Co-Payment – Jail medical treatment programs, wherein inmates pay a portion of the costs for medical services, shall be governed by written policy and procedure.

Compliance Documentation:

- Review written policy and procedures

Further Information: The Board of Corrections developed a model plan to serve as a guide for establishment of a medical treatment program per §53.1-133.01 of the Code of Virginia. This plan is available through the DOC Local Facilities Supervisor.

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**6VAC15-40-480.** Set Fees Required – Inmate payment for medical services shall be up to, but shall not exceed, those fees established by the Board of Corrections in the Model Plan for Jail Prisoner Medical Treatment Programs per §53.1-133.1 of the Code of Virginia.

Compliance Documentation:

- Review fee schedule
  - Interview staff/inmates
- 

**6VAC15-40-490.** Policy and Procedure Information – Written policy and procedure shall specify, at a minimum, the following information:

1. Medical services that are subject to fees;
2. Fee amounts;
3. Payment procedures;
4. Medical services that are provided at no cost;
5. Fee application to medical emergencies, chronic care and pre-existing conditions; and
6. Written notification to inmates of proposed fee changes.

Compliance Documentation:

- Review written policy and procedures
  - Interview staff
- 

**6VAC15-40-500.** Inmates Advised of Procedures – Inmates shall be advised of medical services fees and payment procedures at the time of admission/orientation.

Compliance Documentation:

- Review inmate handbook/orientation
  - Interview staff/inmates
- 

**6VAC15-40-510.** Ability to Pay – Written policy, procedure, and practice shall ensure that no inmate will be denied access to medically necessary services based upon ability to pay.

Compliance Documentation:

- Review written policy and procedures
  - Review inmate records
  - Interview staff/inmates
- 

**6VAC-40-520.** Acknowledgement in Writing – Medical services fee debits to inmate accounts shall be acknowledged by the inmate in writing. The acknowledgement shall be signed by a witness if the inmate refuses to sign.

Compliance Documentation:

- Review inmate records
  - Interview staff/inmates
- 

**6VAC15-40-530.** Accounting Procedures – A separate bank account or accounting process shall be established and used exclusively for the deposit and disbursement of medical services fees. Fee collection and disbursement shall be governed by generally accepted accounting principles.

Compliance Documentation:

- Review accounting process
  - Review inmate records
  - Review audit report (if available)
  - Interview staff
- 

**6VAC15-40-540.** Standards for Food Service Equipment and Personnel – Written policy, procedure, and practice shall ensure that the facility's food service equipment and personnel meet the established safety and protection standards and requirements as set forth by the State Board of Health's Food Regulations.

The facility shall have a Virginia Department of Health (VDH) inspection conducted every 12 months. Written reports of the VDH inspections shall be on file with the facility administrator. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review VDH inspection reports
- Review license/permit

Further Information: Refer to definition of twelve months.

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**6VAC15-40-545.** Standards for Inmate Food Service Workers – Written policy, procedure, and practice shall ensure that a visual medical examination of each inmate assigned to food service occurs no more than 30 days prior to assignment and quarterly thereafter. Each inmate shall be given a TB skin test prior to food service assignment. Such tests shall be documented. If an inmate tests positive for TB, that inmate shall not be granted assignment to food service. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of visual medical examination and TB skin test of inmates assigned to food service
- 

**6VAC15-40-550.** Food Service Program – Written policy, procedure, and practice shall ensure a food service program that meets the following:

1. The menu meets the dietary allowances as stated in the Recommended Dietary Allowances (RDA), National Academy of Sciences;
2. There is at least a one-week advance menu preparation;
3. Modifications in menus are based on inmates' medical or reasonable religious requirements. Medical or dental diets shall be prescribed by the facility's medical authority;
4. RDA evaluation of facility menus shall be completed by an independent registered dietitian or certified nutritionist every three years; and
5. Additional evaluations shall be completed when a substantive change in the menu or food service provider occurs. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review all menus
- Review menu modifications for medical and religious diets (if applicable)
- Review RDA evaluation of facility menus
- Review license/certification of dietician or nutritionist
- Review additional menu evaluations (if applicable)
- Interview staff

Further Information: DOC institutional menus may be used by the facility in lieu of RDA evaluations.

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**6VAC15-40-560.** Meals Prepared, Delivered, and Served Under Direct Supervision of Staff – Written policy, procedure, and practice shall ensure meals are prepared, delivered, and served under the direct supervision of staff. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Observation
  - Interview staff
- 

**6VAC15-40-570.** Records of Meals Served – Written policy, procedure, and practice shall ensure the records of meals served are kept a minimum of three years.

Compliance Documentation:

- Review written policy and procedures
  - Review menus
- 

**6VAC15-40-580.** Food Services Program Not a Disciplinary Measure – Written policy, procedure, and practice shall ensure food is not used as disciplinary measure. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of alternate meal usage (if applicable)
  - Interview staff/inmates
- 

**6VAC15-40-590.** Number and Spacing of Meals – Written policy, procedure, and practice shall provide for at least three meals daily with no more than 14 hours between evening meal and breakfast, and a minimum of two hot meals within every 24 hours.

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of times meals are served
  - Interview staff/inmates
- 

**6VAC15-40-600.** Correspondence Privileges – Written policy, procedure, and practice shall ensure that all inmates, regardless of their jail status, shall be afforded the same correspondence privileges. Correspondence privileges shall not be withdrawn as punishment.

Compliance Documentation:

- Review written policy and procedures
  - Interview staff/inmates
- 

**6VAC15-40-610.** Volume and Content of Inmate Mail – Written policy, procedure, and practice shall ensure that there is no limit on the volume of mail an inmate may send or receive, or on the length, language, content, or source of such mail, except where there is clear and convincing evidence to justify such limitations.

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of exceptions (if applicable)
  - Interview staff/inmates
- 

**6VAC15-40-620.** Postage Allowance – Written policy, procedure, and practice shall make available a postage allowance of at least five first class rate (one ounce) letters per week, including legal mail, to indigent inmates. An indigent inmate shall be defined as an inmate having less than the cost of five first class stamps in his account for 15 days.

Compliance Documentation:

- Review written policy and procedures
- Review definition of indigent inmate
- Review documentation verifying indigent inmates receive weekly postage allowance
- Interview staff/inmates

Further Information: Provisions can be made for reimbursement by the inmate upon accumulation of sufficient funds.

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**6VAC15-40-630.** Outgoing and Incoming Mail – Written policy, procedure, and practice shall ensure that outgoing mail is collected and sent during normal United States Postal Service (USPS) days of operation. Incoming mail to inmates shall be delivered no later than 24 hours after arrival at the facility (contingent upon normal USPS days of operation), or shall be forwarded or returned to sender.

Compliance Documentation:

- Review written policy and procedures
  - Review documentation (if applicable)
  - Interview staff/inmates
-



**6VAC15-40-640.** General and Legal Correspondence – All general correspondence may be opened, examined, and censored by authorized personnel, as per the USPS Administrative Support Manual, Section 274.96. If searched, all legal correspondence shall be opened in the presence of the inmate.

Compliance Documentation:

- Review written policy and procedures
- Review documentation (if applicable)
- Interview staff/inmates

Further Information: The USPS Administrative Support Manual, Section 274.96, Mail Addressed to Prisoners, states: “Authorized personnel of prisons, jails, or other correctional institutions, under rules and regulations promulgated by the institution, may open, examine, and censor mail sent from, or addressed to, an inmate of the institution. An inmate may designate in writing an agent outside the institution to receive his or her mail, either through an authorized address of the agent, if the mail is so addressed, or at the delivery post office serving the institution, if the mail is addressed to the inmate at the institution.”

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**6VAC15-40-650.** Notice of Seizure of Mail Contraband – Written policy, procedure, and practice shall ensure notice of the seizure of mail contraband is given to the inmate with the reason for the seizure in writing. The sender shall be allowed the opportunity to appeal the seizure to the facility administrator or a designee empowered to reverse seizure. Unless it is needed for criminal investigation or prosecution, property that can legally be possessed outside the facility shall be stored, returned to sender, if known, or destroyed.

Compliance Documentation:

- Review written policy and procedures
- Review written notification to inmate and sender
- Review seizure records and appeals (if applicable)
- Interview staff/inmates

Further Information: Seizure includes any item which the inmate cannot keep in his possession, including items placed in the inmate’s property to be returned upon his release.

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**6VAC15-40-660.** Access to Telephone Facilities – Written policy, procedure, and practice shall ensure inmates have reasonable access to telephone facilities, except where safety and security considerations are documented.

Compliance Documentation:

- Review written policy and procedures
- Review inmate handbook
- Review schedule (if applicable)
- Observation

- Interview staff/inmates

Further Information: In the event of inmate abuse, telephone privileges may be restricted, suspended or revoked with appropriate documentation.

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**6VAC15-40-670.** Delivery of Emergency Messages to Inmates – Written policy, procedure, and practice shall ensure that emergency messages to inmates are delivered promptly and documented.

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of calls received and delivered
  - Interview staff/inmates
- 

**6VAC15-40-680.** Visiting Opportunities – Written policy, procedure, and practice shall ensure maximum visiting opportunities limited only by facility schedules, space, personnel constraints and inmate disciplinary status. Attorneys shall be permitted to have confidential visits with their clients.

Compliance Documentation:

- Review written policy and procedures
  - Review visitor logs/records
  - Observe visitation area
  - Interview staff/inmates
- 

**6VAC15-40-690.** Approved Items Visitors May Bring into Facility – The facility shall have a posted list of approved items that visitors may bring into the facility. Items brought into the facility by visitors for inmates shall be subject to inspections and approval.

Compliance Documentation:

- Review list of approved items
  - Review inmate handbook
  - Observation
- 

**6VAC15-40-700.** Requirements of Visitor Registration and Visitor Searches – Written policy, procedure, and practice shall specify requirements for visitor registration and the circumstances and methods under which visitors may be searched.

Compliance Documentation:

- Review written policy and procedures
- Review visitor registration records
- Review visitor search records (if applicable)

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**6VAC15-40-710.** Admitting Individuals into Jail – Written policy, procedure, and practice for admitting individuals into the jail shall address the following:

1. Verification of commitment;
2. Complete search of the individual and his possessions;
3. Dispositions of clothing and personal possessions;
4. Interview for obtaining identifying data;
5. Photograph; and
6. Telephone calls.

Compliance Documentation:

- Review written policy and procedures
  - Review commitment records
  - Review property records
  - Review inmate records
  - Interview staff/inmates
- 

**6VAC15-40-720.** Inmates Confined to Jail – Written policy, procedure, and practice for those inmates to be confined in the jail shall address the following:

1. Shower/search;
2. Issuance of clean clothing/hygiene items/linen;
3. Classification and housing assignment;
4. Orientation; and
5. Provision of mattresses.

Compliance Documentation:

- Review written policy and procedures
  - Review property issue records
  - Review classification documents
  - Review orientation process
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-730.** Telephone Calls During the Booking Process – Written policy, procedure, and practice shall specify that newly admitted inmates who are physically capable are permitted to complete at least two local or long distance telephone calls during the booking process. Reasonable accommodations shall be made for non-English speaking inmates, as well as hearing impaired and visually impaired inmates.

Compliance Documentation:

- Review written policy and procedures
- Review phone logs
- Observation
- Interview staff/inmates

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**6VAC15-40-740.** Requirements for Clothing, Linen and Towels – Written policy, procedure, and practice shall provide that a record is kept to show that clean linens and towels are supplied once a week, a clean change of clothing is provided twice per week, and inmates shall be held accountable for their use.

**LHS**

Compliance Documentation:

- Review written policy and procedures
- Review laundry records
- Interview staff/inmates

(Clothing must be offered on two separate days)

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**6VAC15-40-750.** Issuance of Special and Protective Clothing – The facility shall provide for the issuance of special and protective clothing to inmates assigned to food service, farm, sanitation, mechanical services, and other special work functions.

Compliance Documentation:

- Observation
- Interview staff/inmates

Further Information: Special and protective clothing may include gloves, safety glasses, steel-toed boots, etc.

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**6VAC15-40-760.** Bathing – There shall be sufficient hot and cold water for bathing. Each inmate shall be allowed to bathe twice a week.

Compliance Documentation:

- Observation
  - Interview staff/inmates
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**6VAC15-40-770.** Provisions of Hygiene Items – The facility shall provide soap, a toothbrush and toothpaste or tooth powder to each inmate upon admission to the general population. Feminine hygiene items (as defined by facility policy) shall be provided upon reasonable request to each female inmate assigned to the general population. Notwithstanding security considerations, shaving equipment, including a mirror, and haircuts shall be made available and the hygiene needs of all inmates shall be met.

Compliance Documentation:

- Review property issue records
- Review definition of feminine hygiene items
- Interview staff/inmates

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**6VAC15-40-780.** Items Inmates May Retain – Written policy and procedure shall state what items the inmate may retain in his possession.

Compliance Documentation:

- Review written policy and procedures
  - Review inmate handbook/orientation
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-790.** Inventory of Cash and Personal Property – A written itemized inventory of cash and personal property of each inmate shall be made at the time of initial booking. A copy signed by both staff and inmate shall be furnished to the inmate. Computerized officer identification shall not substitute for a signature.

Compliance Documentation:

- Review inventory sheets for both inmate and staff signature
- Review documentation for property released by inmate
- Interview staff/inmates

Further Information: Inmates refusing to sign should be documented.

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**6VAC15-40-800.** Accounting of Inmate Expenditures and Receipts of Money – Inmates personal funds held by the facility are controlled by accepted accounting procedures. The facility shall provide the inmate with a copy of his itemized account upon reasonable request.

Compliance Documentation:

- Review inmate requests
  - Review documentation of facility response to requests
  - Review audit reports (if available)
  - Interview staff/inmates
- 

**6VAC15-40-810.** Return of Inmate Property and Funds – Inmate property and funds shall be returned upon release or transfer and receipted for by the inmate in writing.

Compliance Documentation:

- Review property and account records acknowledged by the inmate in writing
- Interview staff

Further Information: It is expected that inmates will generally receive their funds at the time of transfer or discharge. However, circumstances may arise when this is not possible, such as bonding out at night, emergency transfers, etc.

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**6VAC15-40-820.** Conduct – Written policy, procedure, and practice shall govern inmate discipline and shall include:

1. Rules of conduct, including sanctions for rule violations;
2. Procedures and provisions for pre-hearing disciplinary detention; and
3. Procedures for processing violators that may include plea agreements that may waive the inmates' right to appeal.

Compliance Documentation:

- Review written policy and procedures
  - Review misconduct reports/plea agreements
- 

**6VAC15-40-830.** Inmate Handbook – Upon initial housing assignment and following intake and reception processing, each inmate shall be informed of, receive, and sign for:

1. A copy of the inmate rules of conduct, including sanctions; and
2. The policy and procedures governing inmate discipline.

Compliance Documentation:

- Review inmate handbook
- Review documentation of inmate acknowledgement
- Interview staff/inmates

Further Information: Reasonable accommodations should be made for inmates with language or comprehension problems.

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**6VAC15-40-831.** Fee for Inmate Keep – If the facility has elected to establish a program to charge a fee for inmate keep, such fee shall be up to, but shall not exceed, the fee stated in the Board of Corrections Model Plan for Payment of Costs Associated With Inmate Keep per §53.1-131.3 of the Code of Virginia.

Written policy, procedure and practice shall include, at a minimum, the following:

1. Provisions requiring the facility to notify the inmate of such fee in writing upon admission/orientation;
2. Payment and refund procedures;
3. Accounting procedures;
4. Provisions designating which, if any, inmates are exempt;
5. If the release date and the date of arrival are within 24 hours, provisions to charge the inmate only the equivalent of one day's fee; and
6. Whenever an inmate has been charged the fee, provisions specifying that the deduction shall be reflected on the inmate's account.

Compliance Documentation (if applicable):

- Review written policy and procedures
  - Review inmate handbook/orientation
  - Review inmate account records
  - Interview staff/inmates
- 

**6VAC15-40-833.** Discipline – Whenever an inmate may be deprived of good time or placed on disciplinary segregation the minimum procedural requirements shall include:

1. The accused inmate shall be given written notice of the charge and the factual basis for it at least 24 hours prior to hearing of the charge;
2. The charge shall be heard in the inmate's presence by an impartial officer or committee unless that right is waived in writing by the inmate or through the inmate's behavior. The accused inmate may be excluded during the testimony of any inmate whose testimony must be given in confidence. The reasons for the inmate's absence or exclusion shall be documented;
3. The accused inmate shall be given an opportunity to have the assistance of a staff member or fellow inmate in defending the charge;
4. The inmate shall be given a written statement by the fact finders as to the evidence relied upon and the reasons for the disciplinary action; and
5. The inmate shall be permitted to appeal any finding of guilt to the facility administrator or designee.

Compliance Documentation:

- Review written policy and procedures
  - Review disciplinary actions
  - Review status of inmates placed on disciplinary segregation
  - Interview staff/inmates
- 

**6VAC15-40-835.** Sanctions – Whenever an inmate is punished, such as reprimands or loss of privileges, the minimum procedural requirements shall include:

1. The accused inmate shall have an opportunity to explain or deny the charge; and
2. The inmate shall have the opportunity to appeal any finding of guilt to the facility administrator or designee.

Compliance Documentation:

- Review written policy and procedures
  - Review disciplinary reports
  - Review signed inmate waivers (if applicable)
  - Interview staff/inmates
- 

**6VAC15-40-840.** Post to Control Security of Jail – The facility shall maintain a designated post, staffed 24 hours a day, that controls activities and flow of

people in and out of the secure area of the jail. Main facility control posts may be staffed by civilian personnel who have been provided on-the-job training in facility security procedures, emergency plans, and communications. Such training shall be documented in writing with the same frequency as required by standards for all facility employees. Civilian personnel assigned to the control posts shall not be assigned to other posts requiring direct inmate contact and supervision. **LHS**

Compliance Documentation:

- Review training records for civilian personnel
  - Review post orders or job descriptions (refer to 6VAC15-40-960)
  - Review restrictions on inmate access to control centers
  - Observation
  - Interview staff
- 

**6VAC15-40-850.** Security of Outside Recreation – The facility’s outside recreation area shall be secure so that inmates shall not have physical access to the general public without authorization.

Compliance Documentation (if applicable):

- Observation
- 

**6VAC15-40-860.** Security of Entrances and Doors – Written policy, procedure, and practice shall require that all security perimeter entrances, control center doors, cell block doors and all doors opening into a corridor are kept locked except when used for admission or exit of employees, inmates or visitors, or in emergencies.

Compliance Documentation:

- Review written policy and procedures
  - Observation
  - Interview staff
- 

**6VAC15-40-870.** Security and Storage of Security Devices – Written policy, procedure, and practice shall govern the security, storage, and use of firearms, ammunition, chemical agents, and related security devices that are stored in and assigned to the facility to ensure that: **LHS**

1. The facility shall provide secure storage for firearms, ammunition, chemical agents and related security devices accessible to authorized personnel only and located outside the security perimeter or the inmate housing and activity areas;
2. Personnel who carry firearms and ammunition are assigned positions that are inaccessible to inmates (with the exception of emergencies); and
3. Personnel who discharge firearms or use chemical agents other than for training purposes, submit written reports to the facility administrator or



designee no later than the conclusion of the shift during which same are discharged or used.

Compliance Documentation:

- Review written policy and procedures
  - Review training records pertaining to firearms and use of chemical agents
  - Review master inventory sheets
  - Review written reports (if applicable)
  - Observe storage areas (gun boxes, armory, etc.)
  - Interview staff
- 

**6VAC15-40-880.** Officer Entry – Written policy and procedure shall specify the conditions under which an officer can enter a security cell or cellblock during an emergency situation.

Compliance Documentation:

- Review written policy and procedures
- Interview staff

Further Information: The policies and procedures of this standard are determined by the facility's design and philosophy of the facility administrator. The practice may vary depending on whether the facility is linear, direct, indirect or other style and should be determined with consideration given to ensuring security of both the staff and inmates. Appropriate practices can be identified in consultation with the Compliance and Accreditation Unit staff or your Local Facility Manager.

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**6VAC15-40-890.** Mechanical Audio Communications Systems – The facility shall provide a mechanical audio communications system allowing staff to communicate with each other to facilitate staff supervision.

Compliance Documentation:

- Observation
- 

**6VAC15-40-900.** Examination and Maintenance of Security Devices – Written policy, procedure, and practice shall specify that, at least once daily, a careful examination is made of security devices and that maintenance is routinely performed to ensure their proper operation. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review daily security device checks
- Review maintenance logs
- Interview staff

(Minimum requirements for security devices: locks, bars/doors, and windows)

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**6VAC15-40-910.** Searches of Facility and Inmates – Written policy, procedure, and practice provide for searches of facilities and inmates to control contraband and provide for the disposition of contraband. A schedule of searches shall be developed to ensure all housing areas of the facility have been searched on a random, but at least quarterly, basis. These procedures are not made available to inmates. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of quarterly facility and inmate searches
  - Review disposition records
  - Interview staff
- 

**6VAC15-40-920.** Contraband – The facility shall have a policy regarding the control of contraband. The policy shall be available to inmates via the inmate handbook or orientation.

Compliance Documentation:

- Review written policy
  - Review posting or method of availability (inmate handbook, orientation, etc.)
  - Interview staff/inmates
- 

**6VAC15-40-930.** Key and Door Control – Written policy, procedure, and practice shall govern key and door control. Perimeter security door keys shall not be issued to staff unless authorized as per the approved emergency plans. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review master key inventory
  - Review issuance log
  - Observe set of emergency keys
  - Observe storage area and use
  - Interview staff
- 

**6VAC15-40-940.** Culinary Items – Written policy, procedure, and practice shall govern the control and use of culinary items. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review master inventory sheet or shadow board
  - Review issuance log/accountability procedures
  - Observation
  - Interview staff
-

**6VAC15-40-945.** Tools – Written policy, procedure, and practice shall govern the control and use of tools. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review master inventory sheet or shadow board
  - Review issuance log/accountability procedures
  - Observation
  - Interview staff
- 

**6VAC15-40-950.** Flammable, Toxic and Caustic Materials – Written policy, procedure, and practice shall specify the control and storage of cleaning equipment and use of all flammable, toxic, and caustic materials. Inmate access shall be limited and closely supervised. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review master inventory of all chemicals stored within the facility
  - Review Material Safety Data Sheets (MSDS) for all chemicals stored within the facility
  - Observe secure storage area
  - Observe flammable materials stored in an approved fire proof storage cabinet or outside the facility
  - Interview staff
- 

**6VAC15-40-960.** Functions of Duty Post – Each duty post or position shall maintain a clear description of the functions of that duty post or position. A copy of the post orders shall be readily available.

Compliance Documentation:

- Review post orders/job descriptions
- Interview staff

Further Information: Refer to definition of post order. Emergency procedures should be included in post orders.

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**6VAC15-40-970.** Restrictions of Physical Force – Written policy, procedure, and practice shall restrict the use of physical force to instances of justifiable self-defense, protection of others, protection of property, orderly operation of the facility and prevention of escapes. In no event is physical force justifiable as punishment. A written report shall be prepared following all such incidents described above and shall be submitted to the facility administrator, or designee, for review and justification. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review use of force reports
- Interview staff

Further Information: The least amount of force necessary to control the inmate shall be used.

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**6VAC15-40-980.** Restraint Equipment – Written policy, procedure and practice shall govern the use of restraint equipment. A written protocol pertaining to the monitoring of inmates in restraint equipment shall be established and approved by the medical authority.

Compliance Documentation:

- Review written policy and procedures
  - Review approval and monitoring by medical personnel when restraint chair or 4 point restraints are used
  - Review approval from facility administrator, senior supervisor or designee
  - Review incident reports (if applicable)
- 

**6VAC15-40-985.** Restraint of pregnant offenders -

A. This subsection is intended to apply to the transportation outside the secure perimeter such that inmates known to be pregnant shall be handcuffed only in front, unless an individualized determination is made that the inmate is a flight risk or danger to herself or others, or the totality of the circumstances creates a serious security risk.

1. If an individualized determination has been made, then such inmate will be restrained in the least restrictive method necessary for outside transport. Waist chains/belts shall not be used.

2. If it is deemed more restrictive restraints are needed during transport, security staff shall notify a supervisor as soon as reasonably possible and a use of force report indicating the reason for the use of restraints and type of restraints shall be submitted to a supervisor no later than the conclusion of the shift for review and justification.

B. No restraints will be used during labor and delivery unless an individualized determination has been made that the inmate is a flight risk or danger to herself or others, or the totality of the circumstances creates a serious security risk.

C. This subsection is intended to apply to labor and delivery such that if there is an individualized determination that restraints are needed, the least restrictive alternative will be used in consultation with the medical professional, but restraints shall be immediately removed upon the request of any doctor, nurse, or other health professional treating the inmate if the restraints present a threat to the health or life of the inmate or child. Waist chains/belts shall not be used.

D. If it is deemed more restrictive restraints are needed during labor and delivery, security staff shall notify a supervisor as soon as reasonably practical and a use of force report indicating the reason for the use of restraints and type of restraints shall be submitted to a supervisor no later than the conclusion of the shift for review and justification.

E. This subsection is intended to apply during postpartum recovery while the inmate is in the hospital such that after an individualized determination, an inmate shall be restrained in the least restrictive method (i.e., one ankle restraint or one arm restraint) that will allow for the mother's safe handling of her infant and mother-infant bonding, except where necessary when the inmate is a flight risk or danger to herself or others, or the totality of the circumstances creates a serious security risk. If it is deemed restraints more restrictive than one ankle restraint or one arm restraint are needed, security staff shall notify a supervisor as soon as reasonably practical and a use of force report indicating the reason for the use of restraints and type of restraints shall be submitted to a supervisor no later than the conclusion of the shift for review and justification.

F. All staff shall annually review policy related to restraining pregnant inmates.

G. This subsection is intended to apply to inmates known to be pregnant who are in a facility for medical treatment unrelated to labor and delivery. Such inmates will be restrained in the least restrictive method necessary in consultation with the medical professional. Waist chains/belts shall not be used.

Compliance Documentation:

- Review written policy and procedures
- Review incident reports (if applicable)
- Review documentation of annual staff reviews

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**6VAC15-40-990.** Administrative Segregation – Written policy, procedure, and practice shall provide for administrative segregation of inmates who pose a security threat to the facility or other inmates, and for inmates requiring protective custody.

Compliance Documentation:

- Review written policy and procedures
- Review inmate records
- Observation
- Interview staff/inmates

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**6VAC15-40-1000.** Physical Living Conditions for Disciplinary Detention and Administrative Segregation – Written policy, procedure, and practice shall ensure that, inmate behavior permitting, the disciplinary detention and administrative segregation units provide physical living conditions that approximate those offered in the general population.

Compliance Documentation:

- Review written policy and procedure

- Observation
  - Interview staff
- 

**6VAC15-40-1010.** Mental Health Inmates – Written policy, procedure, and practice shall specify the handling of mental health inmates, including a current agreement to utilize mental health services from either a private contractor or the community services board. **LHS**

Compliance Documentation:

- Review written policy and procedures
- Review current written agreement/contract
- Review inmate records (if applicable)
- Interview staff

Further Information: Refer to definition of current.

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**6VAC15-40-1020.** Record of Activities in Disciplinary Detention and Administrative Segregation – Written policy, procedure, and practice shall ensure that a record is kept of scheduled activities in disciplinary detention and administrative segregation units. Documented activities shall include the following: admissions, visits, showers, exercise periods, meals, unusual behavior, mail, and release.

Compliance Documentation:

- Review written policy and procedures
  - Review record of activities
- 

**6VAC15-40-1030.** Assessment of Inmates in Disciplinary Detention or Administrative Segregation – Written policy, procedure, and practice shall require that a documented assessment by medical personnel that shall include a personal interview and medical evaluation of vital signs, is conducted when an inmate remains in disciplinary detention or administrative segregation for 15 days and every 15 days thereafter. If an inmate refuses to be evaluated, such refusal shall be documented. **LHS**

Compliance Documentation:

- Review written policy and procedures
  - Review documented evaluation (not to exceed 15 days)
  - Review documented refusals (if applicable)
  - Interview staff
- 

**6VAC15-40-1040.** Staff Training – The facility shall provide for 24-hour supervision of all inmates by trained personnel. **LHS**

Compliance Documentation:

- Review training records

Further Information: Refer to definition of trained.

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**6VAC15-40-1045.** Supervision of Inmates – All inmate housing areas shall be inspected a minimum of twice per hour at random intervals between inspections. All inspections and unusual incidents shall be documented. No obstructions shall be placed in the bars or windows that would prevent the ability of staff to view inmates or the entire housing area. **LHS**

Compliance Documentation:

- Review documentation of random checks
  - Observation of housing areas (inspection means visual observance of all inmates in the housing area including linear, indirect and direct supervision facilities)
  - Interview staff/inmates
- 

**6VAC15-40-1050.** Supervisory Inspection – Supervisory staff shall conduct a general, daily inspection of the facility. Such inspections shall be documented. Unusual findings shall be documented and submitted to the senior supervisor or designee on duty for review.

Compliance Documentation:

- Review documentation of daily inspections
  - Review incident reports/logs
  - Interview staff
- 

**6VAC15-40-1060.** Movement of Inmates – Written policy, procedure, and practice shall regulate the movement of inmates within the facility.

Compliance Documentation:

- Review written policy and procedures
  - Review system utilized to track inmate movement
  - Observation
  - Interview staff
- 

**6VAC15-40-1070.** Prohibition of Inmate Control Over Other Inmates – Written policy, procedure, and practice shall prohibit inmates from supervising, controlling, or exerting any authority over other inmates.

Compliance Documentation:

- Review written policy and procedure

- Interview staff/inmates
- 

**6VAC15-40-1080.** Emergency Plans and Fire Drills – There shall be fire prevention practices and written emergency plans that outline duties of staff, procedures and evacuation routes. Emergency plans shall include responses in the event of fire, hazardous material release, loss of utilities, natural disaster, hostage situations, riots, disturbances, escapes, bomb threats and mass arrest. Emergency plans shall be reviewed every 12 months by all staff. These reviews shall be documented. Each facility shall conduct and document quarterly fire drills. **LHS**

Compliance Documentation:

- Review fire prevention practices (maintenance of smoke detection equipment, fire extinguishers serviced, ensuring living areas are kept free of clutter, and proper storage of combustible materials)
- Review staff duties
- Review emergency plans
- Review documentation of 12 month staff review
- Review documentation of quarterly fire drills
- Observe posted evacuation routes
- Interview staff

Further Information: Refer to definition of twelve months.

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**6VAC15-40-1090.** Release of Inmates – Written policy, procedure, and practice shall require that, prior to the release of an inmate, positive identification is made of the releasee, authority for release is verified, and a check for holds in other jurisdictions is completed.

Compliance Documentation:

- Review written policy and procedures
  - Review documentation of NCIC/CCRE checks
  - Interview staff
- 

**6VAC15-40-1100.** Fire Safety Inspection – The facility shall have a state or local fire safety inspections conducted every 12 months. Localities that do not enforce the Virginia Statewide Fire Prevention Code shall have the inspection performed by the State Fire Marshal's Office. Written reports of the fire safety inspection shall be on file with the facility administrator. **LHS**

Compliance Documentation:

- Review fire safety inspection reports
- Review plan of action for all violations and documentation of approval by the State Fire Marshal's Office or local approved fire marshal
- Interview staff



Further Information: Refer to definition of twelve months.

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**6VAC15-40-1111.** Self-Contained Breathing Apparatus – If the facility is equipped with one or more self-contained breathing apparatus, security staff shall be trained and quarterly drills shall be conducted and documented in the use of this equipment.

Compliance Documentation (if applicable):

- Review training records
  - Review documentation of quarterly drills
  - Observation
- 

**6VAC15-40-1120.** Mattresses, Pillows and Trash Receptacles – Mattresses, pillows and trash receptacles present in the secured housing shall be of fire retardant materials. **LHS**

Compliance Documentation:

- Review documentation of mattresses, pillows, and trash receptacles for fire retardant material
  - Observation
- 

**6VAC15-40-1140.** Cleanliness – The facility floors, halls, corridors and other walkway areas shall be maintained in a clean, dry, hazard-free manner. **LHS**

Compliance Documentation:

- Observation (includes cracks/rust in shower stalls and cracks in floors which can result in the build-up of water/dirt that is inaccessible for cleaning, therefore, resulting in unsanitary conditions)

(Floor areas include dayroom areas and individual cells)

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**6VAC15-40-1150.** Vermin and Pest Control – The facility shall control vermin and pests and shall be serviced at least quarterly by a licensed pest control business or personnel certified by the Virginia Department of Agriculture and Consumer Services. **LHS**

Compliance Documentation:

- Review contract or license for pest control business/personnel
  - Review quarterly service records
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-1160.** Appropriate Lighting and Heating –

- A. All housing and activity areas shall provide for appropriate lighting and heating.
- B. Appropriate lighting shall be at least 20 foot candles at desk level and in personal grooming areas.
- C. Heat shall be evenly distributed in all rooms so that a temperature no less than 65° F is maintained. Air conditioning or mechanical ventilation systems, such as electric fans, shall be provided when the temperature exceeds 85° F. **LHS**

Compliance Documentation:

- Light meter readings
  - Observation
  - Interview staff/inmates
- 

**6VAC15-40-1170.** Water Utilities – All housing areas shall have toilets, showers, drinking water and washbasins with hot and cold running water accessible to inmates. **LHS**

Compliance Documentation:

- Observation
  - Interview staff/inmates
- 

**6VAC-15-40-1180.** Special Purpose Area – The facility shall have a special purpose area to provide for the temporary detention and care of persons under the influence of alcohol or narcotics, who are uncontrollably violent or self-destructive, or those requiring medical supervision.

Compliance Documentation:

- Observation
  - Interview staff
- 

**6VAC15-40-1190.** Housing of Juveniles – Those facilities which, on occasion, house juveniles, shall be certified by the Board of Corrections for the express purpose of holding juveniles.

Compliance Documentation (if applicable):

- Review Board of Corrections certificate
- 

**6VAC15-40-1193.** Separation of Juveniles – Juveniles shall be so housed as to be separated by a wall or other barrier that would result in preventing visual contact and normal verbal communication with adult inmates.

Compliance Documentation (if applicable):

- Observation of housing and juvenile movement patterns

- Interview staff

Further Information: Separation of juveniles from adult inmates can be accomplished architecturally or procedurally in all secure areas of the facility. Brief, accidental or inadvertent contact of juveniles with adult inmates will not be construed as a basis for a finding of non-compliance.

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**6VAC15-40-1195.** Contact with Juveniles – The facility shall have one or more employees on duty at all times responsible for auditory and visual contact with each juvenile at least every 30 minutes. Contact shall be at least every 15 minutes when juveniles exhibit self-destructive or violent behavior. **LHS**

Compliance Documentation (if applicable):

- Review supervision logs
  - Observation
  - Interview staff
- 

**6VAC15-40-1200.** Isolation and Segregation of Juveniles – Isolation cells or segregation within a cellblock shall be utilized only as a protective or disciplinary measure. **LHS**

Compliance Documentation (if applicable):

- Review isolation/segregation logs
  - Observation
-