



Virginia Department of Corrections

Authority, Inspection, and Auditing

Operating Procedure 038.1

Reporting Serious or Unusual Incidents

Authority:

Directive 038, *Incident Reporting*

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Access: ☐ Restricted ☒ Public ☐ Inmate

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§115.6, §115.51, §115.61, §115.86, §115.251,
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Content Owner Yulonda Wyche
Security Program Coordinator

Documentation on File

9/15/21

Signature

Date

Reviewer: Randall C. Mathena
Director of Security and Correctional
Enforcement

Documentation on File

9/15/21

Signature

Date

Signatory: A. David Robinson
Chief of Corrections Operations

Documentation on File

9/15/21

Signature

Date

REVIEW

The Content Owner will review this operating procedure annually and re-write it no later than three years after the effective date.

The content owner reviewed this operating procedure in October 2022 and determined that no changes are needed.

The content owner reviewed this operating procedure in October 2023 and necessary changes are being drafted.

COMPLIANCE

This operating procedure applies to all units operated by the Virginia Department of Corrections. Practices and procedures must comply with applicable State and Federal laws and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

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DEFINITIONS

Assault - Intentional, unlawful touching, or attempted touching of another without their consent; this includes touching or attempted touching with objects including, but not limited to, weapons, liquids, rocks, etc. In Simple Assault, the victim does not suffer serious injury; in Serious Assault, the victim does suffer serious injury.

Community Corrections Alternative Program (CCAP) - A system of residential facilities operated by the Department of Corrections to provide evidence-based programming as a diversionary alternative to incarceration in accordance with COV §53.1-67.9, *Establishment of community corrections alternative program; supervision upon completion*.

Community Corrections Facility - A residential facility operated by the Department of Corrections to provide Community Corrections Alternative Programs.

Drug Alert - Any action indicating the possible presence of drugs or associated paraphernalia that precedes seizing drugs or drug paraphernalia.

Illegal Drugs - Any drug or substance found in Code of Virginia §54.1-3401, *Definitions* and Schedules I through VI of §54.1-3446 through §54.1-3456, or Section 202 of the *Controlled Substances Act* (21 U.S.C. 812, *Schedules of controlled substances*); this also includes illegal or unprescribed use of controlled substances to include prescription drugs, marijuana, cannabis oil, and related products.

In Common Area - For purposes of this operating procedure, a drug, drug paraphernalia, or cell phone seizure occurs in a "common area" if the suspected drug, drug paraphernalia, or cell phone cannot be linked specifically to any clearly identifiable person who has possessed the object.

Incident - An actual or threatened event or occurrence outside the ordinary routine that involves:

- The life, health and safety of employees, contractors, volunteers, guests, inmates, or probationers/parolees.
- Damage to state property.
- Disruption or threats to security, good order, and discipline of a facility or organizational unit.

Inmate - A person who is incarcerated in a Virginia Department of Corrections facility or who is Virginia Department of Corrections responsible to serve a state sentence.

Institution - A prison facility operated by the Department of Corrections; includes major institutions, field units, and work centers.

Operations and Logistics Unit (OLU) Operations Center - The portion of the Special Operations Unit that is staffed at all times to serve as the main repository and clearing house for all DOC incident notifications and intelligence

Probationer/Parolee - A person who is on community supervision as the result of the commission of a criminal offense and released to the community under the jurisdiction of Courts, paroling authorities, the Virginia Department of Corrections, or other release authority; this includes post release supervision and Community Corrections Alternative Programs.

Recent Sexual Assault - A sexual assault that is alleged to have occurred within the previous 120 hours.

Serious Injury - An injury, including self-injury that requires urgent and immediate medical treatment and restricts the person's usual activity. Generally, a serious injury involves at least one of the following criteria:

- Broken/Fractured Bones
- 9+ Stitches
- 3rd degree burns (2nd degree is up to discretion)
- Concussion
- Extended stay in outside medical (more than 24 hours)
- Restriction to usual activity (i.e., Officer cannot work due to the injury)

Note: This is not an exhaustive list of all possible injuries that may be considered serious.

Sexual Abuse (§115.6)

- **Sexual abuse of an inmate or CCAP probationer/parolee by another inmate or CCAP**



probationer/parolee includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus
- Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument
- Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.

- **Sexual abuse of an inmate or CCAP probationer/parolee by employees, contractors, or volunteers** includes any of the following acts, with or without consent of the inmate or probationer/parolee:

- Contact between the penis and the vulva or the penis and the anus, including penetration, however slight
- Contact between the mouth and the penis, vulva, or anus
- Contact between the mouth and any body part where the employee, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the employee, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the employee, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire
- Any attempt, threat, or request by employees, contractors, or volunteers to engage in the activities described as sexual abuse in this section
- Any display by employees, contractors, or volunteers of his or her uncovered genitalia, buttocks, or breast in the presence of an inmate or CCAP probationer/parolee
- Voyeurism by employees, contractors, or volunteers
- This definition does not include incidental touching during security searches, medical personnel engaged in evidence gathering or legitimate medical treatment, or to health care personnel performing body cavity searches in order to maintain security and safety within a facility.

Sexual Assault - Any sexual touching or contact that is non-consensual, forced, or coerced in any manner, including but not limited to rape, sodomy, or unlawful touching (see COV §18.2-67.10, *General definitions*)

Sexual Harassment - (1) Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate or CCAP probationer/parolee directed toward another; and (2) Verbal comments or gestures of a sexual nature to an inmate or probationer/parolee by employees, contractors, or volunteers, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

Sexual Misconduct - Any behavior or act of a sexual nature directed toward an inmate/probationer/parolee or an employee by an employee, volunteer, contractor, visitor, or agency representative; this includes but is not limited to acts or attempts to commit such acts of sexual assault, sexual abuse, sexual harassment, sexual contact, conduct of a sexual nature or implication, obscenity, and unreasonable invasion of privacy.

Terrorist Act - The use of force or violence against persons or property in violation of the criminal laws of the United States for purposes of intimidation, coercion, or ransom; this includes acts that provide support to any individual, organization, or government in conducting terrorist activity.

Use of Force - Any use of force as defined in Operating Procedure 420.1, *Use of Force*, or Operating Procedure 910.2, *Probation and Parole Use of Force*

Voyeurism (by an inmate or CCAP probationer/parolee) - An invasion of privacy of an inmate or CCAP probationer/parolee by another inmate or CCAP probationer/parolee, such as intentionally peering at an inmate or CCAP probationer/parolee who is showering or using a toilet to perform bodily functions; or requiring an

inmate or CCAP probationer/parolee to expose their buttocks, genitals, or breasts

Voyeurism (by employees, contractors, or volunteers) - An invasion of privacy of an inmate or CCAP probationer/parolee by employees, contractors, or volunteers for reasons unrelated to official duties, such as peering at an inmate or CCAP probationer/parolee who is using a toilet in their cell to perform bodily functions; requiring an inmate or CCAP probationer/parolee to expose their buttocks, genitals, or breasts; or taking images of all or part of an inmate's or CCAP probationer's/parolee's naked body or of an inmate or CCAP probationer/parolee performing bodily functions (§115.6)

PURPOSE

This operating procedure ensures effective communications and reporting of incidents involving Department of Corrections (DOC) employees, contractors, volunteers, visitors, inmates, probationers/parolees, or physical assets. Incident reporting will be required for any situation or event that involves the life, health, or safety of employees, contractors, volunteers, visitors, inmates, or probationers/parolees; damages to state property; or a situation that has the potential of subjecting the agency to public comment.

PROCEDURE

I. Incident Reporting

- A. Timely and accurate reporting of incidents that occur in the Virginia Department of Corrections (DOC) is essential for immediate response, investigation, and further action and support in the event of a critical incident involving any employee/contractor/volunteer, visitor, inmate, probationer/parolee, or DOC property. (4-APPFS-3G-04)
 - 1. Since incident reports are frequently used in litigation proceedings, the importance of writing clear, concise, factual, and complete reports cannot be over emphasized.
 - 2. Incident reports allow DOC executive staff to make decisions concerning directive and operational changes, and to keep other officials informed as necessary.
- B. Incident reporting provides the information needed for informed and timely responses to public and administrative inquiries.
- C. The reporting of incidents provides for a structured communication process that facilitates the timely exchange of information with, and between, all levels of employees.
- D. This operating procedure is not exempt from release under the *Virginia Freedom of Information Act* COV §2.2-3700 et seq. (FOIA), however any *Incident Reports*, including *Internal Incident Reports*, generated in accordance with this operating procedure are generally exempt from disclosure, pursuant to citation of the applicable exemptions.
- E. All incidents will be reported and must include the following minimum information: (4-ACRS-2B-01)
 - 1. Date and time of incident
 - 2. Location of incident
 - 3. Events preceding incident, when applicable for certain incident natures
 - 4. Names and positions of persons involved and describe their participation
 - 5. Name and position of any person who witnessed the incident
 - 6. Synopsis of incident (e.g., the type of force used, the type of weapon/devices used, area of the body impacted, when applicable, control techniques employed, method of restraint, the type of canine used) and action taken including discipline of inmate, probationer/parolee, and/or employee
 - 7. Any verbal orders given before or during the incident
 - 8. Whether or not the incident was recorded (video camera, “Rapid Eye”, “MAXPRO”, etc.)
 - 9. Whether or not the incident was gang related
 - 10. Name, title, organizational unit of person preparing the report
 - 11. Date of report submission
 - 12. Type of restraints, e.g., handcuffs, ambulatory, four/five point, etc., when applicable; see Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior* for security ordered restraints and Operating Procedure 730.5, *MHWS: Behavior Management* for clinical staff ordered restraints.
 - 13. Any medical services provided



F. Video Recording of Incidents

1. Video recordings that document actual or threatened events outside the ordinary routine that involve the life, health, and safety of employees, contractors, volunteers, visitors, inmates, probationers/parolees or disrupts/ threatens security, good order, and discipline of a DOC unit will be stored as evidence in accordance with Operating Procedure 030.1, *Evidence Collection and Preservation*.
2. Any recording of an incident relating to bodily injury of any person or alleged assault or abuse will be preserved as evidence.
3. Video recordings required by other operating procedures such as Operating Procedure 420.1, *Use of Force*, Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*, and Operating Procedure 430.6, *Body Worn Camera Equipment* will be retained as required by that operating procedure and in accordance with Operating Procedure 025.3, *Public Records Retention and Disposition*, and Operating Procedure 030.1, *Evidence Collection and Preservation*.
4. The Organizational Unit Head will be responsible for determining if recordings of other incidents will be preserved as evidence.

G. Notification to State Police of Incidents

1. The Regional Operations Chief or Regional Administrator, in their absence, must notify the appropriate State Police Divisional Captain of the following incidents:
 - a. Inmate and CCAP probationer/parolee death from a suspected overdose, suspected suicide, and/or suspected homicide
 - b. Riot/ Hostage Situation
 - c. Major fire
 - d. Evacuation
 - e. Escape
2. If unable to contact the State Police Divisional Captain, the Regional Operations Chief or Regional Administrator, in their absence, will notify appropriate staff at the State Police Divisional Headquarters.
3. After notification to the State Police, the Regional Operations Chief or Regional Administrator, in their absence, will report they notified the State Police to Operations and Logistics Unit (OLU) Operations Center staff who will document the notification on the daily briefing report.

II. Use of Internal Incident Reports

- A. Any DOC employee, contract employee, or volunteer that observes or has knowledge of an incident affecting the safe, orderly operation of a DOC organizational unit will report that incident.
 1. Persons with DOC computer accounts will submit *Internal Incident Reports* using VACORIS.
 2. Volunteers and others without DOC computer accounts will make a verbal report to responsible DOC staff. If necessary, the verbal report should be documented with a written report containing the required information.
- B. If the nature of the incident requires submission of an *Incident Report*, *Internal Incident Reports* should be used to gather information from any and all employees, contractors, or volunteers involved in or witness to the incident.
- C. A written *Internal Incident Report* must be submitted to the Facility Unit Head or designee no later than the end of the shift when any of the following occur: **(5-ACI-3A-31)**
 1. Discharge of a firearm or other weapon (other than training)
 2. Chemical agents are used to control inmates or CCAP probationers/parolees. An inmate's or CCAP



probationer's/parolee's refusal to decontaminate must be documented in the *Internal Incident Report*.

3. Force is used to control inmates or CCAP probationers/parolees
4. Inmates or CCAP probationers/parolees remain in restraints at the end of the shift
5. An inmate is placed in four-point or five-point restraints for any amount of time
6. CCIT trained staff intervention.

III. Incident Reports

- A. Serious or unusual incidents as defined in this operating procedure must be reported by telephone to the Operations and Logistics Unit (OLU) Operations Center (804-372-4447); see Operating Procedure 435.1, *Special Operations Unit*. The *Vital Information for Telephone Notification of Incident 038_F1* may be used to gather critical facts for the initial telephone report.
- B. Unless directed otherwise in this operating procedure, incidents, notifications, and actions taken must be documented using an *Incident Report* and submitted in VACORIS by noon on the next working day following the incident.
- C. The OLU Operations Center will be responsible for additional reporting of incidents as appropriate.
 1. The OLU Operations Center will generally make immediate reports of Class I incidents to Regional staff, Central Office administrators, Special Investigations Unit, and other units as necessary. Follow-up notification will be made through the daily briefing report.
 2. Notification of Class II incidents will generally be made through the daily briefing report.
- D. Other incidents will be recorded on an *Internal Incident Report* submitted in VACORIS. Reporting to the OLU Operations Center is not required except for *Fighting between inmates or CCAP probationers/parolees*, *Simple Assault*, and *Medical condition that results in emergency transport* for confirmed/suspected drug or alcohol overdose.
- E. VACORIS adds information to each *Internal Incident Report* and *Incident Report* to identify the organizational unit, time and date of submission, and a unique identifier for the *Report*.
- F. *Incident Reports* should include all facts as known at the time.
 1. Care should be taken that only known facts are reported.
 2. Follow-up reports should contain only information that was not included in the original *Incident Report* and will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) and submitted in VACORIS as an *Addendum*.
- G. Reporting of Staff Misconduct
 1. Any employee, volunteer, or contractor must immediately report to their supervisor or the officer in charge any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the DOC. §115.61[a], §115.261[a])
 2. Any employee, contractor, or volunteer must immediately report to their supervisor or the officer in charge any knowledge, suspicion, or information regarding an incident of retaliation against inmates, probationers/parolees or employee/contractor/volunteer who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. If applicable, an *Internal Incident Report* will be submitted with PREA checked in the description field. A *PREA Report of Incident Review 038_F11* may be required at the conclusion of the investigation. (§115.61[a], §115.261[a])
 3. Apart from reporting to designated supervisors or officials, any information related to a sexual abuse report must not be revealed to anyone other than to the extent necessary, as specified in operating procedures, to make treatment, investigation, and other security and management decisions. (§115.61[b], §115.261[b])

4. Staff must accept reports made verbally, in writing, anonymously, and from third parties and must promptly document verbal reports as an *Internal Incident Report* with PREA checked in the description field. (§115.51[c], §115.251[c])
5. Recent Sexual Assault - Notification to OLU Operations Center will only include the statement "Alleged recent sexual assault at (facility name)." No additional information will be reported. The incident must be documented on an *Incident Report* that must be marked PREA; a *PREA Report of Incident Review* 038_F11 may be required at the conclusion of the investigation.
6. Incidents of employee misconduct (e.g., staff criminal activity while on duty or staff involvement in criminal activity directly impacting DOC operations) should not be entered into VACORIS unless the incident involves:
 - a. A drug or contraband seizure from an employee, which will be documented in an *Incident Report*
 - b. Employee sexual misconduct with an inmate or probationer/parolee which will be documented on an *Internal Incident Report* with PREA checked in the description field and marked confidential.
 - c. An anomaly detected on an employee who was scanned by the full-body security X-ray screening device which will be documented by the Facility Unit Head or designee on an *Internal Incident Report* marked confidential.

H. Reporting of Alleged Abuse, Neglect, or Exploitation of inmates and probationers/parolees

1. Employees and volunteers are required to report all allegations (including inmate or probationer/parolee self-report) and incidents of abuse, neglect, or exploitation of an inmate or probationer/parolee to the Organizational Unit Head or Administrative Duty Officer in a timely manner, and to fully cooperate with any investigation.
2. If the allegation/incident involves employee misconduct, the person reporting will immediately submit a written, signed statement directly to the Organizational Unit Head or Administrative Duty Officer instead of reporting through the VACORIS Incident Module.
3. The report of the alleged abuse, neglect, or exploitation will describe the incident(s) as fully as possible; giving the names of the persons involved; the time, date, and location of the incident; and the names of any witnesses.
4. The Organizational Unit Head or Administrative Duty Officer will immediately initiate any necessary action to protect and, if necessary, secure all physical evidence and act to protect the safety and welfare of the inmate or probationer/parolee. Photographs(s) will be taken when indicated.
5. Alleged abuse, neglect, or exploitation of an inmate or probationer/parolee will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) as soon as practicable, no later than four hours following the incident.
6. All allegations of inmate and probationer/parolee abuse, neglect, or exploitation must be investigated systematically to protect the inmate or probationer/parolee and the reporting employee or volunteer.
7. If the alleged victim is aged or incapacitated, reporting to Department of Behavioral Health and Developmental Services (DBHDS), Virginia Office for Protection and Advocacy (VOPA), or the Department for Aging and Rehabilitative Services (DARS) may be required.
 - a. For reporting purposes an alleged victim is considered aged if the victim is 60 years of age or older.
 - b. An alleged victim is considered incapacitated, for reporting purposes, if the alleged victim is impaired by reason of mental illness, intellectual disability, physical illness or disability, advanced age, or other causes to the extent that the inmate or probationer/parolee lacks sufficient understanding or capacity to make, communicate, or carry out responsible decisions concerning their well-being.

I. Reporting of Threats

1. All credible threats to elected officials, political appointees, judges, agency heads and other public

officials to include DOC staff regardless of how the threat is received whether it is by letter, email, telephone, in-person, or any other means must be reported to the Virginia Fusion Center (VFC) and a *Threat Assessment* 038_F8 completed.

2. If there is an imminent threat, Unit staff will immediately report the threat to the Unit Head or designee who will directly and immediately notify the OLU Operations Center, SIU, and (if appropriate) local law enforcement. The Unit Head may consult with the Chief of Special Operations in making this determination.
3. Passive or general threats will be reported to the Unit Head or designee, who will determine if the threat is credible.
 - a. The completed *Threat Assessment* 038_F8 must be submitted to the Regional Operations Chief for review with a copy of the *Offender Summary Report* from VACORIS when applicable.
 - b. The Regional Operations Chief or designee will notify the OLU Operations Center of all credible threats and forward a copy of the *Threat Assessment* 038_F8 with the *Offender Summary Report* to the OLU Operations Center for further review.
 - c. The OLU Operations Center will make the final determination on the credibility of a threat and update the Virginia Fusion Center and notify the Chief of Special Operations, Special Investigations Unit, Homeland Security, and local law enforcement as necessary.
 - d. The Chief of Special Operations will make the necessary notification to the Director of Security and Correctional Enforcement and the Chief of Corrections Operations or appropriate Deputy Director.
4. All credible threats received at Headquarters will be reported to the Director of Security and Correctional Enforcement or, in their absence, Chief of Special Operations who will notify the Virginia Fusion Center and complete a *Threat Assessment* 038_F8. The Director of Security and Correctional Enforcement or, in their absence, Chief of Special Operations will determine if the threat is credible and ensure that necessary notifications are made.

IV. Class I Incidents

- A. Class I incidents (listed below) must be reported by telephone to the OLU Operations Center (804-372-4447) immediately following an incident or commencement of the incident. For ongoing or developing incidents, situation reports should be submitted to the OLU Operations Center by email (docolu@vadoc.virginia.gov) each hour or when there is a significant change in the situation.
 1. Critical Incident that triggers an Emergency Response Plan, see Operating Procedure 075.1, *Emergency Operations Plan*; Fire/Hazardous Materials; Escape; Manmade or Natural Disaster; Bomb; Terrorist, or other Adverse Threat; Riot/Disturbance; Hostage Situation; Letter/Package Containing Contaminant or Explosive; Active Shooter; Sexual Assault.
 2. Perimeter Intrusion Detection System: Complete failure or three or more zones are inoperable.
 3. Attempted escape
 4. Abscond from a Community Corrections facility
 5. Death of an inmate or CCAP probationer/parolee due to unknown causes - In the event of any inmate or CCAP probationer/parolee death, facility staff must also notify the Health Services Director and Chief Physician by email.
 6. Intentional discharge of a lethal firearm (other than blank rounds, “stinger” rounds”, or in training) or the accidental discharge of a firearm that results in death or injury to a person.
 7. Serious assault on an employee, volunteer, visitor, inmate or CCAP probationer/parolee (Report of Incident Review required)
 8. Serious injury to an employee, volunteer, visitor, inmate or CCAP probationer/parolee
 9. Property damage causing major disruption of security or normal operations



10. Mechanical breakdown causing major disruption of security or normal operations
 11. Group demonstration or work stoppage
 12. Vehicle accident while transporting inmates or CCAP probationers/parolees
 13. Environmental incidents to include petroleum, toxic, regulated medical, or hazardous waste spills - the OLU Operations Center will notify the appropriate Regional Environmental Specialist.
 14. Probation and Parole: Absconder under supervision for a violent criminal offense(s) or abscond while under GPS monitoring
 15. Probation and Parole: Discharge of firearm (4-APPFS-3G-02)
 16. Probation and Parole: Lost or stolen DOC firearm
 17. Probation and Parole: Firearm in the possession of a probationer/parolee at a P&P Office
 18. Any activity which requires intervention of outside law enforcement (other than routine probationer/parolee arrests in a P&P Office)
- B. For incidents marked as "Class IA" The OLU Operations Center will send an immediate text, email message to applicable, designated Department, Regional, and Operating Unit level executive and administrative staff, and open a conference call for the staff notified by message. The conference call should be utilized to organize information sharing and management decision making.
- C. The OLU Operations Center will make immediate reports of other Class I incidents to:
1. Regional Operations Chief, Regional Administrator, and Regional Duty Officer via text and email message
 2. Special Investigations Unit and other units as appropriate
 3. Follow-up notification will be made through the daily briefing reports.
- D. If circumstances warrant, anyone notified of an incident can request that the OLU Operations Center send an immediate message to applicable, designated Department, Regional, and Operating Unit level executive and administrative staff and open a conference call for the staff notified by message. The conference call should be utilized to organize information sharing and management decision making.
- E. Facilities will notify outside agencies of critical incidents in accordance with Operating Procedure 075.1, *Emergency Operations Plan*.
1. These notifications are for tactical support that will be under the control of DOC administration or the Incident Commander while inside DOC facilities.
 2. At the direction of the Director or Chief of Corrections Operations, external agencies may be requested to provide other assistance and resources during serious/critical incidents and investigations.
- F. The telephone notification to the OLU Operations Center will be followed by submission of the *Incident Report* in VACORIS by noon on the next working day. Employee, contractor, volunteer criminal activity incidents should not be entered in VACORIS.
- G. Media inquiries concerning an incident at a DOC facility or any other unit will be referred to the Director's office in accordance with Operating Procedure 022.1, *News Media Relations*.

V. Class II Incidents

- A. Class II incidents (listed below) will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) as soon as practicable, no later than four hours following an incident or commencement of the incident.
1. Inmate and probationer/parolee allegation of employee/contractor/volunteer abuse, assault, or neglect that is supported by a preliminary investigation (Class IIA)



2. Probation and Parole: Altercation in the P&P Office involving employee/contractor/volunteer, or outside arresting authority (Class IIA)
3. Probation and Parole: Altercation in the P&P Office involving a probationer/parolee (Class IIA)
4. Probation and Parole: Any serious felony committed in the community that would be considered “newsworthy” (Class IIA)
5. Accidental discharge of a lethal firearm not resulting in death or injury (Class IIA)
6. Discharge of a less lethal weapon (Class IIA)
7. Possible felonies committed by volunteers, visitors, inmates or probationers/parolees on DOC grounds (Class IIA)
8. Possible felonies committed by inmates or CCAP probationers/parolees off DOC grounds (Class IIA)
9. Armory inventory discrepancies (Class IIA)
10. Cell extractions for Security Reasons (Class IIA)
11. Cell extraction for Clinical Need (Class IIA)
12. Audio turned off while recording an incident (Class IIA)
13. Use of force; including physical force, electronic immobilization devices, chemical agents (aerosol or grenade), impact weapons, impact munitions and canines (Institutions) (Class IIA)
14. Use of Force for Clinical Need (Class IIA)
15. Lost or stolen state property, equipment, or funds, including but not limited to security key, Class A tools, weapons, or narcotics, (Class IIA) Use an *Internal Incident Report* for other items.
16. Restraints applied to pregnant or postpartum recovery inmates or CCAP probationers/parolees (Class IIA)
17. Probation and Parole: Firearm drawn or brandished (Class IIA)
18. Lost or stolen ID card or badge
19. Natural death - In the event of any inmate or CCAP probationer/parolee death, the facility must also notify the Health Services Director and Chief Physician by email.
20. Execution - The Office of Health Services Chief Physician will be notified by email
21. Attempted suicide of an inmate or CCAP probationer/parolee will be reviewed by the on-site or on-call Mental Health Clinician to determine if the inmate’s or CCAP probationer’s/parolee’s intent was to commit suicide. If the Mental Health Clinician determines that the incident was an attempted suicide, the Mental Health Clinician will gather all relevant *Internal Incident Reports* in VACORIS and complete the *Incident Report* for “Attempted Suicide” in VACORIS by noon of the day following the incident; see Operating Procedure 730.5, *MHWS: Behavior Management*.
22. Life threatening illness of an inmate or CCAP probationer/parolee
23. Drone flying near or over facility
24. Cell phone found in inmate or CCAP probationer/parolee possession
25. Cell phone or parts found in common area inside secure perimeter
26. Cell phone or parts seized outside secure perimeter
27. Hunger strike - confirmed (nine or more consecutive meals refused by an inmate or CCAP probationer/parolee); termination of a hunger strike will be reported on an *Incident Report Addendum* documenting when the inmate or CCAP probationer/parolee began consuming meals.
28. In-cell restraints, four/five point or ambulatory; release from restraints will be reported on an *Incident Report Addendum* with the *Restraints Break Log 420_F27* uploaded as an external document for

- releases from four/five point restraints.
29. Placement on restricted feeding
 30. Seizure of drug or paraphernalia
 - a. Seizure of drug paraphernalia: In inmate or CCAP probationer/parolee possession
 - b. Seizure of drug paraphernalia: In common area
 - c. Seizure of drug paraphernalia: In visitor possession
 - d. Seizure of drug paraphernalia: In employee, contractor, or volunteer possession
 - e. Seizure of suspected drug: In inmate or CCAP probationer/parolee possession
 - f. Seizure of suspected drug: In common area
 - g. Seizure of suspected drug: In visitor possession
 - h. Seizure of suspected drug: In employee, contractor, or volunteer possession
 - i. Seizure of suspected drug: In mail
 31. Fire with minor damage or injuries
 32. Mechanical breakdown without major disruption of security or normal operations
 33. Perimeter Intrusion Detection System: Single zone down and cannot be cleared through troubleshooting procedures as instructed by on call technician.
 34. Property damage without major disruption of security or normal operations
 35. Vehicle accident without serious injury
 36. Significant inventory discrepancies
 37. Probation and Parole: Use of Force (4-APPFS-3G-02)
 38. Probation and Parole: Use of Chemical Agents
 39. Probation & Parole: Threats, assaults on employees, or any other victimization of employees
 40. Probation & Parole: Serious incidents in Community Residential Programs
 41. Probation & Parole: GPS Equipment stolen or maliciously damaged
 42. Probation & Parole: Naloxone administered by trained correctional staff
 43. Other incidents considered reportable by the Administrative Duty Officer/Headquarters Unit Head
 44. Suspected drug/alcohol overdose
 45. Naloxone administered by trained correctional staff (Institutions & CCAPS only)
 46. Drug or paraphernalia - Alert
 - a. Drug alert: Canine alert
 - b. Drug alert: Suspicious body scan
 - c. Drug alert: Tip received on drugs or drug paraphernalia
 - d. Drug alert: Drug interdiction
 - e. Drug alert: Strip search
 - f. Drug alert: Body cavity search
 - g. Drug alert: Routine search
 47. Non drug related suspicious body scan
 48. Body Camera Used: This incident is used in addition to another incident nature when a body camera was utilized.
- B. For incidents marked as "Class IIA," the OLU Operations Center will send an email notification to the

Regional Operations Chief, the Regional Administrator, and the Regional Duty Officer.

- C. The OLU Operations Center will make notification of Class II incidents to DOC Executive staff through the daily briefing report.
- D. The telephone notification to the OLU Operations Center will be followed by submission of the *Incident Report* in VACORIS by noon on the next working day. Employee criminal activity incidents should not be entered in VACORIS.
- E. Notes on *Incident Report* Submissions
 - 1. Drug and Alcohol Related *Incident Reports*
 - a. All drug seizures should be reported as *Incident Reports*.
 - b. Use more than one incident type in an *Incident Report* if multiple incident types apply. For example:
 - i. If a suspected overdose occurs and a drug is seized, one of the drug seizure types should accompany "*Suspected Drug/Alcohol Overdose*"
 - ii. If naloxone is administered and a drug is seized, one of the drug seizure types should accompany "*Naloxone Administered*".
 - iii. If emergency medical transport is utilized due to suspected drug or alcohol use and a drug is seized, an *Incident Report* should be written with the drug seizure type and "*Suspected Drug/Alcohol Overdose*" as well as an *Internal Incident Report* (IIR) should be written with the type of "*Medical Condition Emergency Transport and Suspect Drug/Alcohol Overdose*."
 - c. If naloxone is administered or staff suspect a drug overdose, staff should document the results of the handheld testing and DCLS as separate addendums to the *Naloxone Administered* or a *Suspected Drug/Alcohol Overdose Incident Report*; see Operating Procedure 841.5, *Inmate and Probationer/Parolee Substance Use Testing and Treatment Services*.
 - i. For handheld drug test results, the addendum should begin "Handheld Test Results" followed by the types of drug(s) tested and the result of each drug type.
 - ii. For DCLS results, the addendum should begin "DCLS Results" followed by the types of drug(s) tested and the results for each drug type.
 - d. Drug seizures, drug alerts, and non - drug related contraband detected on a suspicious body scan are only reported when drugs and/or contraband are found and seized
 - i. Do not report false positives from body scanners or canine alerts as drug seizures or drug alerts.
 - ii. If a visitor refuses a search and leaves the premises, do not report it as a drug seizure incident or drug alert.
 - e. If drugs are found on two cellmates, then two separate *Incident Reports* should be written.
 - 2. If multiple visitors on the same day have contraband seized, staff should submit a separate *Incident Report* for each seizure.
 - 3. If a group of inmates or CCAP probationers/parolees goes on a hunger strike, staff should submit a separate *Incident Report* for each inmate and CCAP probationer/parolee on a hunger strike.

VI. Internal Incident Reports

- A. Facility staff will utilize *Internal Incident Reports* as a method of communicating information up the chain of command at the facility/unit.
 - 1. *Internal Incident Reports* are used to gather information from participants and witnesses to be used in preparing an *Incident Report*.
 - 2. *Internal Incident Reports* should also be used to document incidents that do not require notification otherwise mentioned in this operating procedure.
- B. The following incidents will be recorded on an *Internal Incident Report* in VACORIS. Reporting to the



OLU Operations Center is not required except for *Fighting between inmates or CCAP probationers/parolees, Simple Assault, and Medical condition that results in emergency transport* for confirmed/suspected drug or alcohol overdose.

1. Each person observing an incident should complete an *Internal Incident Report* to document their observations. If an *Incident Report* is required, the information from all relevant *Internal Incident Reports* will be combined for the *Incident Report*.
2. Alleged sexual abuse, assault, harassment, misconduct, or voyeurism - *PREA* box will be checked in the *Description* field of VACORIS - Notify the Regional *PREA* Analyst
3. Fighting between inmates or CCAP probationers/parolees will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) as soon as practicable, no later than four hours following the incident
4. Simple assault will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) as soon as practicable, no later than four hours following the incident
5. Medical conditions that result in emergency transport, if due to confirmed or suspected drug or alcohol overdose, will be reported to the OLU Operations Center by telephone (804-372-4447) or email (docolu@vadoc.virginia.gov) as soon as practicable, no later than four hours following the incident.
6. Accidents and injuries of employees, contractors, or volunteers involving less than serious injuries
7. Accidents and injuries of inmates or probationers/parolees involving less than serious injuries
8. Emergency medical care provided to non-inmates and non-CCAP probationers/parolees
9. Inmate or CCAP probationer/parolee refuses medical procedure after transport off-site
10. Referral to Restorative Housing Units
11. Self-injury, suicidal behavior, or threat
12. Throwing of bodily fluids
13. Canine present - force used/engaged
14. Canine present - no force/not engaged
15. Mechanical breakdown that does not result in disruption of security or normal operations.
16. Property damage that does not result in disruption of security or normal operations. Damage to or loss of any Information Technology (IT) asset (telephone, cellphone, laptop, desktop, etc.) will be reported to ITU Security immediately.
17. Lost tool
18. Lost, broken, or damaged key; damaged lock
19. Lost or stolen uniform parts
20. Special Response Team Equipment damaged
21. Suspend or restrict inmate or CCAP probationer/parolee privileges
22. Strip search employee or visitor
23. Body cavity search of an inmate
24. Male staff frisk search female inmate or CCAP probationer/parolee
25. Opposite gender strip search inmate or CCAP probationer/parolee
26. Probation & Parole: Medical situation requiring outside medical response
27. Probation & Parole: Probationer/Parolee claims sexually abused in jail, prison, etc.
28. Damage to inmate or CCAP probationer/parolee property in DOC possession

29. Inmate meritorious service, documentation for sentence reduction; see Operating Procedure 830.3, *Good Time Awards*
30. Unusual incident during bereavement visit
31. Seizure of tobacco, alcohol, or paraphernalia
32. Inflammatory language used in a group setting (Used to document inmate and CCAP probationer/parolee statements made in a group of inmates or CCAP probationers/parolees promoting violence against others based on the individual's race, sex, color, national origin, religion, sexual orientation, gender identity, age, political affiliation, veteran status, or gang affiliation. This generally relates to "a group of inmates or CCAP probationers/parolees" gathered for a religious service, program, inmate or CCAP probationer/parolee organization. It is not intended to include a statement made against an individual staff member, inmate, or CCAP probationer/parolee.)
33. Intentional discharge of a lethal firearm that results in the death of an animal.
34. Suspension of Religious Activity
35. Suspension of an inmate or CCAP probationer/parolee from participation in a religious activity
36. Institutional status report
37. Any other incident considered to warrant being documented

VII. Inmate and Probationer/Parolee Access to Incident Reports

- A. *Incident Reports*, including *Internal Incident Reports*, are not available to inmates and CCAP probationers/parolees and are not subject to disclosure as documentary evidence for disciplinary hearings.
- B. This should not preclude the Hearings Officer from reading an *Incident Report* into the hearing record if it is relevant and appropriate.

VIII. Review of Incidents

A. Incident Types requiring a Report of Incident Review

1. Escapes; use *Report of Incident Review* 038_F3.
2. Serious Assaults; use *Report of Incident Review* 038_F3.
3. Any discharge of a lethal firearm or other use of force resulting in serious injury or death; use *Report of Incident Review* 038_F3.
4. A sexual abuse incident review, *PREA Report of Incident Review* 038_F11, will be conducted at the conclusion of every sexual abuse investigation including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. (§115.86[a], §115.286[a])
5. A sexual harassment incident review, *PREA Report of Incident Review* 038_F11, will be conducted at the conclusion of every investigation into an allegation of sexual harassment where the allegation has been determined to be substantiated.
6. Other incidents deemed to need a critical review as determined by the Unit Head, Regional Administrator, Regional Operations Chief, or Chief of Corrections Operations.
7. For Critical Incidents where the Incident Command System is implemented, the *After Action Report/Improvement Plan* 075_F8 may serve as the Report of Incident Review.

B. Conducting Incident Review: (§115.86[d], §115.286[d])

1. The Incident Review Team should consist of at least two DOC employees designated by the Unit Head.
2. The Incident Review Team will consist of at least one Administrative Duty Officer who will solicit input from the PREA Compliance Manager, line supervisors, investigators, and medical or mental



health practitioners for all sexual abuse and harassment incident reviews. (§115.86[c], §115.286[c])

3. The review should begin as soon as practical after the incident and a *Report of Incident Review* 038_F3 submitted within seven working days of the initial *Incident Report*. Follow-up reports may be submitted if all information is not available within seven working days.
4. The review for sexual abuse and sexual harassment will be conducted within 14 days of completion of the investigation on a *PREA Report of Incident Review* 038_F11. The PREA Compliance Manager will forward the *PREA Report of Incident Review* to the Regional PREA Analyst for review and approval, prior to submission to the Regional Office. (§115.86[b], §115.286[b])

C. Review Elements

1. What happened?
2. Where did it happen?
3. Who was involved?
4. How did it happen?
5. When did it happen? (time and contributing circumstances)
6. What was the response?
7. Why did it happen? (causal factors)

D. Review Methodology

1. Review of *Incident Report* or *Internal Incident Report*, investigation reports, and any other available documentation
2. Interview participants and witnesses
3. Examine any physical evidence
4. Examine the area where the incident allegedly occurred to assess whether physical barriers in the area may have contributed to the incident (§115.86[d(3)], §115.286[d(3)])
5. Review relevant operating procedures, training manuals, equipment operating manuals, safety program guides, etc.
6. Develop the unit's action plan to limit future incidents
7. The review of incident will be documented on a *Report of Incident Review* 038_F3 or *PREA Report of Incident Review* 038_F11 for sexual abuse and harassment incident reviews.

E. *Completing the Report of Incident Review* 038_F3 or *PREA Report of Incident Review* 038_F11 (4-ACRS-2B-03; §115.86[d(6)], §115.286[d(6)])

1. Provide a brief summary of the incident; clarify the original *Incident Report* or *Internal Incident Report*, as needed.
2. Provide an analysis of the causal factors and contributing circumstances
 - a. Was the incident or allegation motivated by race, ethnicity, gender identity; lesbian, gay, bisexual, transgender or intersex identification, status, or perceived status; gang affiliation, or was it motivated or otherwise caused by other group dynamics at the facility. (§115.86[d(2)], §115.286[d(2)])
 - b. Assess the adequacy of staffing in that area during different shifts. (§115.86[d(4)], §115.286[d(4)])
 - c. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. (§115.86[d(5)], §115.286[d(5)])
 - d. Indicate the specific inmate behaviors, when applicable, that gave rise to the incident.
3. Determine what can be done to limit the occurrence or reduce the severity of future incidents; consider

whether there was a proper application of current procedure, practice, staffing and/or training; or whether there is a need to revise the current procedure, practice, staffing, and/ or training. (§115.86[d(1)], §115.286[d(1)])

4. Develop an Action Plan to limit or mitigate similar future incidents. The unit will implement the recommendations for improvement, or will document its reasons for not doing so. (§115.86[e], §115.286[e])
5. Submit to the Regional Office for review by the Regional Administrator and/or Regional Operations Chief a copy of all *PREA Report of Incident Reviews* for sexual abuse and sexual harassment, which will also be submitted to the Regional PREA Analyst as directed in Operating Procedure 038.3, *Prison Rape Elimination Act* (PREA). (§115.86[d(6)], §115.286[d(6)])
6. Submit as an *Addendum* to or upload as an external document to the original *Incident Report* in VACORIS after completion of Regional Office review. *PREA Incident Reviews* for sexual abuse and sexual harassment will not be uploaded to VACORIS; a copy will be maintained at the facility.
7. Submit as an email attachment to the Director, Chief of Corrections Operations, and OLU Operations Center.

F. Follow-up (4-ACRS-2B-03)

1. The Director and Chief of Corrections Operations will assign staff and designate other resources as appropriate to accomplish Action Plans.
2. The Regional Operations Chiefs and the Special Operations Unit will be responsible to communicate findings to other units that may be vulnerable to similar incidents so that appropriate Action Plan recommendations may be applied to limit or mitigate similar incidents.

G. Probation and Parole After Incident Review

1. When a probationer/parolee under community supervision is suspected of committing a felony act or dangerous incident that is likely to attract media attention, a P&P - supervisor should review the case and prepare a *Probation and Parole After Incident Review* 038_F7 for submission to the Regional Administrator and/or Regional Operations Chief.
2. The review should be submitted by email with the applicable *Incident Report* attached to the Regional Administrator and/or Regional Operations Chief within one workday after becoming aware of the incident.
3. A *Probation and Parole After Incident Review* 038_F7 should be completed for any incident where documentation of appropriate supervision may be needed as determined by the Chief P&P Officer, Regional Administrator, Regional Operations Chief, or Chief of Corrections Operations.

REFERENCES

COV §2.2-3700 et seq., *Virginia Freedom of Information Act* (FOIA)

Operating Procedure 022.1, *News Media Relations*

Operating Procedure 025.3, *Public Records Retention and Disposition*

Operating Procedure 030.1, *Evidence Collection and Preservation*

Operating Procedure 038.3, *Prison Rape Elimination Act* (PREA)

Operating Procedure 075.1, *Emergency Operations Plan*

Operating Procedure 420.1, *Use of Force*

Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*

Operating Procedure 435.1, *Special Operations Unit*

Operating Procedure 730.5, *MHWS: Behavior Management*



Operating Procedure 830.3, *Good Time Awards*

Operating Procedure 841.5, *Inmate and Probationer/Parolee Substance Use Testing and Treatment Services*

ATTACHMENTS

None

FORM CITATIONS

Vital Information for Telephone Notification of Incident 038_F1

Report of Incident Review 038_F3

Probation and Parole After Incident Review 038_F7

Threat Assessment 038_F8

PREA Report of Incident Review 038_F11

After Action Report/Improvement Plan 075_F8

Restraints Break Log 420_F27

