



Operating Procedure

Effective Date August 1, 2017	Number 750.3
Amended	Operating Level Department
Supersedes Operating Procedure 750.3 (9/1/13)	
Authority COV §53.1-10, §53.1-25, §53.1-32	
Subject PROSTHESES	
ACA/PREA Standards 4-4375	
Office of Primary Responsibility Health Services Director	
Incarcerated Offender Access Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public Access Attachments Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

I. PURPOSE

This operating procedure provides guidelines for Department of Corrections facilities to provide prostheses to incarcerated offenders whose health would otherwise be adversely affected as determined by the physician or dentist.

II. COMPLIANCE

This operating procedure applies to all facilities operated by the Department of Corrections (DOC). Practices and procedures shall comply with applicable State and Federal laws and regulations, Board of Corrections policies and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

III. DEFINITIONS

Prosthesis or Orthotic - An artificial device to replace a missing body part or to compensate for a defective body function, including, but not limited to:

- Artificial limbs
- Eyeglasses
- Contact lenses
- Dentures
- Hearing aids
- Orthopedic shoes
- Crutches, wheelchair, braces, support bandages, girdles, etc.

IV. PROCEDURE

A. General Information - Prostheses and Orthotics

1. A prosthesis or orthotic should be made available to an offender if failure to do so will result in deterioration of the offender's health while incarcerated.
2. There must be enough remaining time before parole or discharge to schedule appointments, fabricate, purchase, and adjust the device.
3. Prostheses or orthotics will be made available only by order of a DOC physician, dentist, or optometrist.
4. The DOC will determine the style, type, and manufacturer of the device based on the offender's needs and relevant security considerations.
5. In accordance with Operating Procedure 720.4, *Co-Payment for Health Care Services*, the offender is to be charged a portion of the acquisition cost for offender owned prostheses which meet DOC criteria as medically necessary. Once the offender agrees to the co-payment for a prosthesis or orthotic device, no refund will be available once fabrication has begun on a custom device or a standard device has been delivered to the offender.
 - a. The DOC may loan prostheses or orthotics for temporary use for short term conditions (generally

- 12 weeks or less) or until an offender owned prosthesis or orthotic can be ordered and delivered.
- b. Medical and Dental staff shall document each prosthesis delivered to an offender using a [Receipt for Medical Prosthesis](#) 750_F1.
 - c. Return of a DOC owned prosthesis shall be documented on a *Receipt for Medical Prosthesis*.
 - d. A copy of each *Receipt for Medical Prosthesis* shall be provided to the personal property officer so that offender inventories can be maintained in accordance with Operating Procedure 802.1, *Offender Property*, which may require that certain items be marked for identification.
 - e. Offender owned prostheses that are no longer needed or serviceable will be disposed of in accordance with Operating Procedure 802.1, *Offender Property*.
6. It is the offender's responsibility to keep the prosthesis or orthotic in good condition and to pay for repair or replacement if it is lost or broken through negligence or carelessness.
 7. Prosthetic and orthotic devices that must be repaired or replaced due to age of the device, use over time or change in prescription are not subject to co-payment.
 8. Any offender who intentionally damages or destroys a prosthetic or orthotic device belonging to another offender will be subject to a disciplinary offense for the destruction of state issued property in accordance with Operating Procedure 861.1, *Offender Discipline, Institutions* and will be required to reimburse the full state cost for the repair or replacement of the device in the form of restitution.
 9. Due to the short duration of Community Corrections programs and the need to prepare offenders for community employment, the Facility Unit Head and the Health Authority may utilize public vendors for devices such as eyeglasses, contact lenses, and dentures if these items cannot be supplied from DOC sources within time constraints. The offender may be required to pay up to 100% of the cost for items not normally provided by DOC.

B. Criteria for Provision of a Prosthesis or Orthotic

1. Offenders with long term need for mobility equipment should be provided and required to purchase this equipment in accordance with this operating procedure. DOC owned equipment should be provided for temporary use only during a short term condition.
 - a. Health care staff should assess the offender's condition within 3 months after being provided DOC owned mobility equipment to determine continued need for the equipment.
 - b. If continuance of the mobility equipment is necessary, the offender should be required to purchase their own equipment and be charged co-payment in accordance with Operating Procedure 720.4, *Co-Payment for Health Care Services*.
 - c. Offenders will not be denied necessary mobility equipment because of insufficient funds to cover the co-payment. Loans to cover co-pay charges and repayment of the loans shall be in accordance with Operating Procedure 802.2, *Offender Finances*, and the *Offender Trust Manual*.
2. Medical or dental adaptive devices (eyeglasses, hearing aids, dentures, wheelchairs, or other prosthetic devices) are made available when medically necessary as determined by the responsible health care practitioner. (4-4375)
3. Criteria for providing dental prostheses are found in Operating Procedure 720.6, *Dental Services*, under *Prosthodontic Treatment*.
4. The Health Authority should arrange visual examinations when requested for offenders who meet established criteria.
 - a. Generally, eyeglasses are prescribed to offenders with distance vision of less than 20/40.
 - b. Non-prescription reading glasses may be obtained at offender expense through facility commissaries.
 - c. The Department of Corrections will not purchase tinted lenses for offenders unless an optometrist or ophthalmologist orders tinted lenses and documents the medical necessity in the Health Record. Non-prescription sunglasses, including "clip-on" type for eyeglasses, may be obtained at

offender expense through facility commissaries.

- d. Virginia Correctional Enterprises (VCE) is the DOC's only procurement source for prescription eyewear. Offenders will not be allowed to purchase personal non-VCE eyeglass frames.
 - e. Contact lens will be supplied when medically indicated. Offenders wearing contact lens when entering the system will be evaluated and allowed to keep the lenses if medically indicated. Offenders not meeting criteria for contact lens will be issued eyeglasses if needed.
5. Generally, offenders who can hear well enough to carry on a conversation will not be issued hearing aids by the DOC.
 - a. Offenders entering the system with hearing aids may keep them.
 - b. Hearing aid batteries will be supplied in the Medical Department without a co-payment charge.
 6. Measuring feet and ordering shoes are not functions of the medical department.
 - a. The shoes routinely issued by the DOC are well constructed and adequate for general use.
 - b. Proper fitting shoes should be obtained through the clothing officer who should measure the offender's feet, and provide the proper size of shoe.
 - c. Calluses, warts, corns, and flat feet are not indications for special shoes. Offenders who are not satisfied with DOC issued footwear should make commissary purchases of soft soled shoes and/or premium boots as allowed at their facility.
 - d. The following foot problems are to be referred to the Medical Department for evaluation:
 - i. Previous ankle/foot surgery; i.e. orthopedic pins, screws, plates or skin grafts
 - ii. Congenital malformation; i.e. six toes, club foot or missing digit
 - iii. Replacement of previously prescribed "special" shoes that were ordered by an orthopedic specialist

C. Re-entry Planning

1. In preparation for release from incarceration, medical staff should ensure that offenders who need mobility equipment such as wheelchairs, walkers, canes, crutches, etc. have access to such equipment at their release.
2. Institutional medical staff shall complete the [Medical Discharge Summary](#) 720_F5 and forward to the offender's assigned Re-entry Counselor at least 180 days prior to the offender's anticipated release date (see Operating Procedure 720.3, *Health Maintenance Program*).
3. Community corrections facility medical staff should forward a copy of the [Medical Discharge Summary; Community Corrections](#) 720_F7 to the offender's release P&P District at least 60 days prior to the anticipated release date (see Operating Procedure 720.3, *Health Maintenance Program*).
4. The Re-entry Counselor should review the *Medical Discharge Summary* to determine the offender's special needs to allow planning for release including special equipment.
5. If the offender will need mobility equipment on release, the Counselor or other appropriate staff should check with the family and/or release plan to see whether or not the same or equivalent equipment will be available to the offender upon release.
6. If such equipment is not owned, purchased, or available through the family, medical staff should be notified 90 days prior to release.

V. REFERENCES

Operating Procedure 720.3, *Health Maintenance Program*
Operating Procedure 720.4, *Co-Payment for Health Care Services*
Operating Procedure 720.6, *Dental Services*
Operating Procedure 802.1, *Offender Property*
Operating Procedure 802.2, *Offender Finances*

Operating Procedure 861.1, *Offender Discipline, Institutions*

VI. FORM CITATIONS

[Medical Discharge Summary](#) 720_F5

[Medical Discharge Summary; Community Corrections](#) 720_F7

[Receipt for Medical Prosthesis](#) 750_F1

VII. REVIEW DATE

The office of primary responsibility shall review this operating procedure annually and re-write it no later than three years after the effective date.

Signature Copy on File

6/27/17

N. H. Scott, Deputy Director for Administration

Date