

# Virginia Department of Corrections

Offender Management and Programs		
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Substance	Use Testing	7
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### **REVIEW**

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

### **COMPLIANCE**

This operating procedure applies to all units operated by the Virginia Department of Corrections (DOC). Practices and procedures must comply with applicable State and Federal laws and regulations, American Correctional Association (ACA) standards, Prison Rape Elimination Act (PREA) standards, and DOC directives and operating procedures.

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### **DEFINITIONS**

**Alcohol** - The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol.

**Case Plan (Inmate)** - A plan that outlines short term and long-term program needs based on an assessment of the inmate's individual criminogenic factors.

Case Plan (Probationer/Parolee) - A dynamic document used to guide the probationer's/parolee's progress in achieving their goals and treatment needs during supervision based on assessments of the probationer's/parolee's criminogenic factors; it is a mutually agreed contract between the probationer/parolee and supervising staff that outlines the requirements while on supervision, identifies probationer/parolee goals, outlines the activities necessary to achieve those goals, and sets time frames for completion. The P&P Officer's surveillance, verification, referral, and monitoring responsibilities are defined in conjunction with each probationer/parolee goal.

Chain of Custody (COC) - The ability to guarantee the identity and integrity of a specimen is correctly matched to the person who provided the specimen, from the point of collection through the reporting of test results, including but not limited to collection, handling, storage, transportation, and testing of the specimen and dissemination of test results.

**Collecting Officer** - Any Corrections Officer participating in the collection of a specimen as documented on the chain of custody form.

**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*.

Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) - The DOC approved risk/needs assessment, which consists of different versions for community corrections and institutions. COMPAS is a support system for supervision and case-management decisions, a database used in combination with VACORIS, a tool that assesses two critical risks, violence and recidivism, and a tool for determining the criminogenic needs that are used to develop case plans and set programing.

**Drug** - A chemical or substance, such as a narcotic or hallucinogen that affects the central nervous system and can cause changes in behavior and possibly addiction.

**Drug Test** - A single test or panel of tests used to identify the presence of drugs, or their metabolites, in human urine or saliva.

**Drug Testing Contract Administrator** - The person appointed by the executive staff to be the DOC alcohol and other drug testing coordinator and oversee contracts for substance use testing.

**Follow-up Random Testing** - Testing after the initial/full test focused on the probationer's/parolee's alcohol or other drug of choice, not to exceed three substances per test.

Gas Chromatograph/Mass Spectrophotometer (GC/MS), Liquid Chromatograph/Mass Spectrophotometer (LC/MS) - Testing methods that separate the drug or drug metabolite from the specimen for examination on the molecular level to reveal a pattern that is unique to the particular drug in question to the exclusion of any other substance.

**Handheld Testing Device** - A portable substance use testing device, such as a test slide, requiring no calibration or formal instrumentation.

**Health Authority** - The Health Administrator responsible for the provision of health care services at a facility or system of institutions. The responsible Physician may be the Health Authority.

**Initial/Full Test** - A multiple substance test for at least three substances to include alcohol and other drugs.

**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.

Institutional Program Manager (IPM) - The position at an institution that coordinates program activities,

monitors VACORIS for accurate data entry, and ensures programs are being offered with fidelity.

**Intersex** - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female; intersex medical conditions are sometimes referred to as disorders of sex development.

**Medical Observation** - Specific care within an institution separate from other housing areas where inmates are monitored by health staff but do not require skilled nursing care.

Medical Practitioner - A Physician, Nurse Practitioner, or Physician's Assistant.

**Mental Health Clinician** - An individual with at least a master's degree in psychology, social work, or relevant human services field with knowledge, training, and skills in the diagnosis and treatment of mental disorders, which may include a Psychiatric Provider, Social Worker, or Registered Nurse.

**Negative Result** - A test result indicating that a drug substance was not detected, or the level of drug substance was at or below the cut-off level.

Positive Result - A test result indicating that a drug substance was detected.

**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.

**Random Testing** - A process of selecting individual inmates and CCAP probationers/parolees for testing that reduces predictability; provides an equal probability that any inmate or CCAP probationer/parolee from a group will be selected; and does not allow employees the discretion to waive the testing of any inmate or CCAP probationer/parolee selected under the process.

**Repeat Test** - A second test, utilizing the same testing methodology that detected a positive result from an initial specimen.

**Restorative Housing Unit** - A general term for special purpose bed assignments including restorative housing, and step-down statuses; usually a housing unit or area separated from full privilege general population.

- Alt-GP Status General population bed assignments operated with increased privileges above RHU status but more control than full privilege general population for inmates making an informed voluntary request for placement and inmates assigned to the restorative housing unit for their own protection.
- RHU-Restorative Housing (RHU) Status Special purpose bed assignments operated under maximum security regulations and procedures, and utilized under proper administrative process, for inmates requesting placement with informed voluntary consent, inmates needing confinement for their own protection, when there is a need to prevent imminent threat of physical harm to the inmate or another person, or the inmate's behavior threatens the orderly operation of the facility.
- RH Step-Down 1 (SD-1), RH Step-Down 2 (SD-2) Status General population bed assignments operated with increased privileges above RHU status but more control than full privilege general population.

**Specimen** - The amount of urine taken from an inmate or probationer/parolee sufficient to perform an alcohol or other drug test.

**Testing Coordinator** - The employee member designated by the Facility Unit Head or Chief P&P Officer to coordinate and oversee alcohol and other drug testing for the unit.

**Transgender** - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.

**Universal Precautions** - An approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for Human Immunodeficiency Virus, Hepatitis B Virus, and other blood borne pathogens.

**Voluntary Admission** - An inmate's and probationer's/parolee's self-declaration to substance use prior to alcohol or drug testing or confirmation.

Women's Risk/Needs Assessment (WRNA) - The risk/needs assessment tool sanctioned by DOC for institutions

and community corrections that includes gender-neutral risk/needs information, but also is inclusive of gender-specific factors such as mental health, child/adult abuse and/or victimization, relationship dysfunction, parental stress, and housing safety. Areas of strength such as self-efficacy, parental involvement, family support, and education are also assessed. The WRNA is used to develop gender-responsive case plans and identify
programming needs designed to reduce recidivism of female inmates.

### **PURPOSE**

This operating procedure establishes guidelines for conducting inmate and probationer/parolee alcohol and other drug testing and for imposing appropriate sanctions for inmates and probationers/parolees who test positive for or have a documented substance use disorder.

### **PROCEDURE**

- I. Substance Use Testing Requirements
  - A. Designated employees and P&P Officers are responsible for conducting substance use testing in accordance with the guidance provided in this operating procedure on: (4-ACRS-5A-09; 4-APPFS-2D-04)
    - 1. Collecting, processing, and disposing of samples.
    - 2. Interpreting results.
    - 3. Responding to violations.
    - 4. Preserving evidence and the chain-of-custody.
    - 5. Observing transgender and intersex inmates and probationers/parolees.
  - B. In addition to the minimum testing requirements established for the security management of institutions, CCAPs, and P&P Offices the frequency of substance use testing, and the substances tested is dependent upon the inmate's or probationer's/parolee's:
    - 1. History of substance use.
    - 2. Results of a risk/needs assessment.
    - 3. Current substance use program assignments.
    - 4. Recent substance use.
  - C. Designated employees must conduct a test for substance use on inmates and probationers/parolees within 24 hours after naloxone is administered, or an overdose is suspected.
    - 1. If the inmate or probationer/parolee is transported to the hospital, the transporting employee must:
      - a. Request that the admitting hospital conduct a test for substance use and follow-up with the hospital for the test results.
      - b. Document the results of the test as an addendum to the *Incident Report*; see Operating Procedure 038.1, *Reporting Serious or Unusual Incidents*.
    - 2. Employees must refer inmates, who have experienced an overdose as verified by a positive drug screen, to the Medical Department for evaluation and to determine whether the inmate requires further medical observation.
      - a. If further observation is required, the treating Medical Practitioner will place the inmate on medical hold; see Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted).
      - b. If further observation is not required or the inmate is released from medical hold, the inmate must be returned to general population.
      - c. The IPM, within seven days of the inmate's overdose, must refer the inmate to a substance use disorder treatment program consistent with the inmate's score on the *Substance Abuse Scale* of the COMPAS or WRNA; see Operating Procedure 841.1, *Inmate Programs*.
      - d. Designated employees must drug test the inmate weekly for six months or until treatment program completion.
    - 3. If the inmate tests positive on a drug screen or the inmate has a second verified overdose within six months:

a. The reporting employee must prepare and *Internal Incident Report (IIR)* and request the inmate's placement in the restorative housing unit on Alt-GP status.

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- b. The IPM must review the inmate and refer them for mandatory assignment to RIDUP.
- c. A second verified overdose within six months will result in a priority transfer to RIDUP.

### D. Substance Use Testing at Institutions

- 1. Facility Unit Heads, at their discretion, may authorize inmate substance use testing in addition to the minimum testing requirements to ensure safe and secure institutional operations. Inmates are tested at a minimum:
  - a. Upon intake when newly received into the DOC from a jail or other non-DOC facility.
    - i. Newly received inmates must not be subject to a disciplinary offense for a positive test.
    - ii. An employee should notify the jail or non-DOC facility of the inmate's positive test results.
  - b. Upon arrival at an institution due to transfer. When an inmate tests positive for substance use, the Testing Coordinator at the receiving institution must notify the sending institution so an investigation can be conducted.
  - c. At least 10 days prior to discharge to community supervision. When an inmate tests positive for substance use, the Testing Coordinator must notify the inmate's P&P Officer, and an investigation should be conducted.
  - d. When there is reasonable belief, the inmate may be under the influence of alcohol, illicit drugs, marijuana, or tobacco. Reasonable belief includes but is not limited to:
    - i. The odor of alcohol, marijuana, or tobacco on the breath; erratic behavior; incoherent, staggering, or disoriented demeanor; fresh needle marks; slurred speech; glassy eyes; dilated pupils; or previous history of substance use.
    - ii. Factors that cause suspicion, such as an alcohol, illicit drug, marijuana, tobacco, or related contraband found on, about, or around an inmate or the inmate's personal property.
    - iii. Credible information the inmate may be using alcohol, illicit drugs, marijuana, or tobacco.
  - e. In accordance with the *Random Testing Requirements* below:
    - i. Five percent of the overall inmate population must be tested per month.
    - (a) VACORIS automatically schedules a random test for each institution on the 28th of each month
    - (b) Designated employees will collect specimens on that day or reschedule that test to any date in that same month.
    - ii. Ten percent of inmates assigned to work outside the security perimeter must be tested per month.
    - iii. Five percent of residential substance use disorder treatment programs must be tested per month.

### 2. Increased Testing Levels (5-ACI-5E-11; 4-ACRS-5A-08[I])

- a. The Facility Unit Head or designee should increase testing levels for substance use as needed to maintain the integrity of a substance use disorder program and the substance free status of program participants.
  - i. The residential substance use disorder treatment program supervisor should confer with the Facility Unit Head and Testing Coordinator to ensure designated employees conduct program related testing.
  - ii. At the discretion of the Facility Unit Head or designee additional substance use testing may occur as a part of non-residential substance use disorder treatment programs.
- b. Designate employees must test inmates convicted of a 145a-c minimally once per week, on random days, for at least a 90-day period to ensure abstinence.
- c. Inmates convicted of disciplinary offense code 122a-f or offense codes 198 a/b/c-122 a/b/c/d/e/f must be tested at least twice per month for one year after their last conviction.
- 3. Facility Unit Heads should regularly review testing results to adjust, if needed, the frequency and types of substances tested.

### E. Substance Use Testing at CCAP Facilities (4-ACRS-5A-08[CC])

- 1. CCAP probationers/parolees receive an initial/full test upon entry into the CCAP.
- 2. All CCAP probationers/parolees must have a follow-up random test each month thereafter until termination from the program.
- 3. At least 10 percent of all CCAP probationers/parolees assigned to community employment must have an additional test for substance use monthly.
- 4. All CCAP probationers/parolees must be tested at least 10 days prior to graduation from a CCAP. When a probationer/parolee tests positive for substance use, the Testing Coordinator must notify the probationer's/parolee's P&P Officer and referring P&P District employee.

### F. Substance Use Testing on Community Supervision (4-APPFS-2D-04)

- 1. P&P Officers will conduct an initial/full test on each probationer/parolee at case opening; see Operating Procedure 920.1, *Community Case Opening*, *Supervision*, and *Transfer*.
  - a. After the initial/full test is conducted at case opening, follow-up random testing should focus on the probationer's/parolee's identified substances of choice.
  - b. P&P Officers may test up to a maximum of three substances; the combination of substances tested is at the discretion of the P&P Officer.
  - c. The Chief P&P Officer, when warranted for reasonable suspicion of substance use, may authorize a P&P Officer to test more substances on a case-by-case basis.
  - d. P&P Officers should only test for multiple substances when the probationer/parolee is suspected of poly-substance use or in the case of a change in their substance of choice.
- 2. P&P Officers will determine the frequency of additional testing based on suspected substance use; instances where probationers/parolees may be required to submit to additional testing include, but are not limited to the following:
  - a. During the pre-sentence investigation by the Court.
  - b. When imposed as a special condition of probation, parole, or post-release supervision.
  - c. When employee observation of a probationer's/parolee's physical symptoms cause suspicion of alcohol, illicit drug, or marijuana use.
  - d. When a probationer/parolee is arrested for a new offense that may be related to substance use.
  - e. When a probationer/parolee admits to using alcohol, illicit drugs, or marijuana, or to being under the influence of alcohol, illicit drugs, or marijuana.
  - f. When illicit drugs or marijuana have been discovered in an area controlled, occupied, or inhabited by a probationer/parolee.
  - g. When a probationer/parolee is undergoing outpatient substance use disorder treatment in a program where substance use testing is not administered.
  - h. When a probationer/parolee has a history of substance use.

### G. Employees Approved to Conduct Testing

- 1. The Facility Unit Head and Chief P&P Officer will determine which employee positions are responsible for substance use testing.
- 2. The Facility Unit Head or Chief P&P Officer, as appropriate, will designate an employee to serve as the unit's Testing Coordinator responsible for ensuring testing levels are maintained and, when required, random test measures are used.
- 3. The Facility Unit Head, Chief P&P Officer, or the unit's Testing Coordinator must ensure that all employees involved in substance use testing are properly trained in specimen collection and testing procedures.

### II. Approved Testing Methods

### A. Methods of Testing

- 1. Substance use testing through the Virginia Department of General Services, Division of Consolidated Laboratory Services (DCLS), handheld testing using a device purchased from Virginia Correctional Enterprises (VCE), and handheld alcohol detection devices purchased through the current state contract are the only methods of substance use testing allowed.
- 2. Substances available for testing under the DCLS Memorandum of Agreement.
  - Amphetamines
- Cannabinoids
- Oxycodone

- Barbiturates
- ETG Alcohol
- Phencyclidine

- Benzodiazepine
- Fentanyl
- Validity Testing (Creatinine/Specific Gravity)

- Buprenorphine (Suboxone)
- LSD
- Methadone
- Cocaine Metabolites Opiates
- 3. Substances available for testing using VCE handheld testing devices.
  - Acetylmorphine
  - (6am-Heroin)
  - Amphetamines
  - Bath Salts
  - **Barbiturates**
  - Benzodiazepine Buprenorphine (Suboxone)
  - Cocaine Metabolites

- Cannabinoids
- Cotinine (Nicotine metabolites)
- **Ecstasy**
- ETG Alcohol
- Fentanyl
- K-2/K-3 Spice (Synthetic Marijuana)
- Methadone

# Methamphetamines

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# **Opiates**

- Phencyclidine
- Tramadol
- Zolpidem
- Validity Testing (Creatinine/Specific Gravity)

### B. Use of Handheld Testing Devices

### 1. Authorized Use

- a. Employees can only use a handheld testing device on an inmate when:
  - i. The employee detects the odor of alcohol on the breath; erratic behavior; incoherent, staggering, or disoriented demeanor; fresh needle marks; slurred speech; glassy eyes; dilated pupils, etc.
  - ii. The inmate is on dialysis.
  - iii. The inmate has other medical conditions as determined necessary by a Medical Practitioner.
  - iv. DCLS is unable to test for a particular substance.
  - v. When an inmate or CCAP probationer/parolee tests positive for Fentanyl use, the entire housing unit may be tested
- b. CCAP employees and P&P Officers can only use a handheld testing device on a probationer/parolee when:
  - i. The test results are required for the immediate arrest of a probationer/parolee.
  - ii. Employees are in the field i.e., Courthouse.
  - iii. DCLS is unable to test for a particular substance.
- c. Employees can only use a handheld alcohol detection device to test a probationer/parolee for alcohol use.
- d. The DOC contract will control the sensitivity level of testing services and handheld devices provided by the vendor.
- 2. Employees using a handheld testing device:
  - a. Must be trained in administering and reading the handheld testing device; only trained employees are allowed to conduct a substance use test.

b. Must, when applicable, complete the manufacturer's on-line training for a testing device prior to use.

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- c. Must strictly adhere to the manufacturer's instructions for all testing devices.
- d. Must document the test and the test results in VACORIS.
- e. Must conduct a repeat test every time there is a positive test using a new handheld testing device to confirm the positive results.
- f. May request a confirmation test; the inmate or probationer/parolee cannot request that a confirmation test be conducted.

### C. Confirmation Testing

- 1. Employees may submit a positive test using a handheld testing device to DCLS for screening and confirmation testing.
- 2. When submitting a positive test for confirmation testing, the employee must submit the one original sample for testing.
- 3. Gas Chromatograph/Mass Spectrophotometer (GC/MS) and Liquid Chromatograph/Mass Spectrophotometer (LC/MS) laboratory confirmation is strictly limited to criminal prosecution or probationer/parolee revocation proceedings as required by the Court or Parole Board.
  - a. The Drug Testing Contract Administrator must approve all confirmation testing for any other reason except criminal prosecution and revocation proceedings.
  - b. The Facility Unit Head or Chief P&P Officer or designee, with Drug Testing Contract Administrator approval, will order GC/MS or LC/MS confirmation testing in VACORIS.
  - c. DCLS staff must conduct the confirmation test on the original specimen stored in their laboratory.

### III. Specimen Collection

- A. An employee of the same gender or the gender indicated on an approved *Strip Search Deviation Request* 810\_F2 or *P&P Urine Test Observation Accommodation Request* 841\_F21 must observe the inmate or probationer/parolee provide a urine specimen for substance use testing; see Operating Procedure 445.4, *Screenings and Searches of Persons* (Restricted) and Operating Procedure 920.1, *Community Case Opening, Supervision, and Transfer*.
  - 1. Employees must ensure inmates and probationers/parolees are free from observation by non-involved employees or other inmates and probationers/parolees when providing a specimen.
  - 2. An employee must personally observe the urine collection from a side or frontal view to reduce the possibility of substitution, dilution, or adulteration of the urine.
  - 3. Voluntary Admission
    - a. Prior to testing, the inmate or probationer/parolee may voluntarily admit to substance use by signing the *Substance Use Voluntary Admission* 841\_F9.
    - b. Voluntarily admitting and signing a *Substance Use Voluntary Admission* 841\_F9 does not prevent employees from testing the inmate or probationer/parolee.
    - c. An employee must witness the inmate's or probationer's/parolee's signature and may use the signed *Substance Use Voluntary Admission* 841\_F9 in disciplinary or violation proceedings.
- B. The employee collecting the specimen must: (4-APPFS-2D-04)
  - 1. Enter an electronic order in the *Drug Testing Module* of VACORIS to generate the *DCLS Chain of Custody (COC)*, when testing through DCLS; see Attachment 1, *DCLS Chain of Custody Sample*.
  - 2. Indicate all substance(s) to be tested in the *Drug Testing Module* in VACORIS.
    - a. An employee can test a maximum of three listed substances at one time and in any combination.
    - b. The Facility Unit Head, Chief P&P Officer or designee will identify the combination of substances

- to be tested by the employee.
- c. The Facility Unit Head, Administrative Duty Officer (ADO), or Chief P&P Officer may authorize more substances be tested on a case-by-case basis when warranted for reasonable suspicion of substance use.
- d. When an employee suspects that a specimen has been altered, the employee can test the specimen for adulteration or dilution.
- 3. Print the *DCLS COC* on label paper obtained through VCE.
  - a. The employee must use the DCLS COC; alteration and substitution of the DCLS COC is prohibited.
  - b. When an employee uses a handheld testing device, the employee is not required to use the *DCLS COC*, bar code label, and security seal unless the specimen is sent to DCLS for confirmation testing.
- 4. Document in VACORIS and notify appropriate employees when an inmate or probationer/parolee fails to appear as scheduled for testing, refuses to submit to testing, or is unable to provide a specimen.
- 5. Document the prescription medication(s) on the *DCLS COC* when an inmate or probationer/parolee claims they take prescription medications that could cause a false positive test result; see Attachment 1, *DCLS Chain of Custody Sample*.
- 6. Label the collection cup with the inmate's or probationer's/parolee's name and DOC number using the VACORIS generated bar code label; employees should label the collection cup before the specimen is obtained for testing.
- 7. Frisk search the inmate or CCAP probationer/parolee.
  - a. A Corrections Officer must frisk search all inmates and CCAP probationers/parolees immediately prior to collecting a specimen to avoid the possibility of substitution, dilution, or adulteration of the specimen.
  - b. Employees must contact the Facility Unit Head or designee for authorization to conduct a strip search if at any point during the search or observation of the inmate or CCAP probationer/parolee the employee has reasonable cause to believe the inmate or CCAP probationer/parolee is attempting to invalidate or circumvent testing procedures; see Operating Procedure 445.4, *Screenings and Searches of Persons* (Restricted).
- 8. Give the inmate or probationer/parolee 16 ounces of water and instruct them to stay in an area where there is no access to additional fluids for up to two hours to produce an adequate specimen volume if an inmate or probationer/parolee is initially unable to provide a specimen.
- 9. Instruct the inmate or probationer/parolee to dry the specimen cup once they produce a specimen before handing the cup to the employee collecting the specimen.
  - a. After placing the lid securely on the collection cup, the employee must place the security seal across the lid of the cup.
  - b. The employee must ensure the security seal does not obscure the bar code label identifying the specimen.
  - c. All employees must wear personal protective equipment when handling urine specimens to comply with the universal precautions for occupational exposure to blood borne pathogens; see Operating Procedure 740.1, *Infectious Disease Control*.
- 10. Ensure the *Collector Certification* and *Donor Certification and Consent* sections on the *DCLS COC* are signed.
  - a. If the inmate or probationer/parolee refuses to sign the *Donor Certification and Consent* section, the employee collecting the specimen must document the inmate's or probationer's/parolee's refusal by checking the box provided.
  - b. Employees must not give inmates and probationers/parolees a copy of the DCLS COC.
- 11. Seal the specimen and the DCLS COC in a plastic transport bag provided by the lab when testing



### through DCLS.

### C. Documented Medical Conditions and Social Phobia

- 1. Inmates and probationers/parolees who report they have a medical condition or social phobia that causes an inability to provide a urine sample, must have an appropriate diagnosis to receive water and extra time.
  - a. When an inmate or probationer/parolee is still unable to produce a urine sample after receiving water and extra time, the Collecting Officer should use an oral swab for testing.
    - i. Once the substance use test using an oral swab has been completed, the Collecting Officer should refer the inmate or CCAP probationer/parolee to medical, to rule out an organic condition, and to mental health, to rule out social anxiety
    - ii. The referral should be based on the inmate's or CCAP probationer's/parolee's level of functioning and distress.
  - b. In P&P Offices, the P&P Officer can recommend to the probationer/parolee that they consult with a medical or mental health professional and provide documentation supporting a known condition.
    - i. Once the P&P Officer receives the requested documentation supporting a known condition, the P&P Officer should use an oral swab for all future substance use testing.
    - ii. The P&P Officer must document, in a VACORIS *Case Note*, that the probationer/parolee reported the inability to produce a urine sample, and an oral swab was used for testing.
    - iii. P&P Officer's must not enter a probationer's/parolee's specific diagnosis in VACORIS *Case Notes* or the *Case File*.
- 2. Employees must give the inmate or probationer/parolee 16 ounces of water and two hours to produce a specimen.
  - a. The employee collecting the specimen may extend the timeframe based on the recommendation of appropriate health care staff.
  - b. Employees must ensure the inmate or probationer/parolee:
    - i. Does not have possession of substances that could adulterate, dilute, or produce a false specimen.
    - ii. Does not have access to additional fluids until the inmate or probationer/parolee is able to provide an adequate specimen.
  - c. If the inmate or probationer/parolee is unable to provide a urine sample, designated employees may use oral swab testing. The employee must notify the Drug Testing Contract Administrator within one working day of each inmate and probationer/parolee tested by oral swab.
- D. If an inmate is unable to produce a useful specimen, the employee must inform the inmate that failure to produce a specimen within two hours will result in disciplinary action and the inmate will be charged with offense code 122d, *Refusal to submit to drug testing*.
- E. When the Collecting Officer in an institution suspects the specimen has been altered, but the specimen does not test abnormal for adulteration or dilution, the Collecting Officer should reject the specimen and require the inmate to provide a second specimen.
  - 1. If, during the collection of the specimen, the Collecting Officer witnesses the inmate intentionally alter or tamper with the specimen, The Collecting Officer must charge the inmate with offense code 122f, *Adulteration, dilution, or substitution of specimen for the purpose of compromising the results of the drug test*.
  - 2. The inmate must then provide a second specimen for substance testing.
  - 3. The Collecting Officer must dispose of the rejected specimen in a sanitary sewer system (toilet or urinal) and dispose of the container in an appropriate trash receptacle.

# IV. Ordering Collection Supplies

- A. When testing through DCLS the DCLS Courier Service will replenish specimen collection kits, collection cups, plastic transport bags, and security seals, at the same time they return the specimen transport containers to the unit.
  - 1. Employees must contact DCLS directly at (804) 648-4480 ext. 104 for additional specimen collection kits.
  - 2. For additional *DCLS COC* forms which are ordered through VCE, employees must contact the Drug Testing Contract Administrator.
  - 3. P&P sub-office replenished specimen collection kits are delivered to the main P&P Office.
- B. For handheld testing devices, employees must purchase specimen collection cups directly from VCE.
  - 1. The Drug Testing Contract Administrator must review and approve all orders through *eVA* for handheld testing devices.
  - 2. No substitutions are permitted.

### V. Specimen Storage and Courier Services

### A. Storage of Urine Specimens

- 1. The specimen can remain at room temperature, or the employee can refrigerate the specimen for up to a maximum of seven calendar days.
  - a. For specimens stored in either manner, DCLS must receive the specimen in time to test the specimen by the seventh day after collection.
  - b. If an employee is unable to get the specimen to the lab by the seventh day after collection, the employee must store the specimen in a secured freezer.
  - c. When freezing a specimen, the employee collecting the specimen must write the letter "F" and the date the specimen was frozen directly on the *DCLS COC*; see Attachment 2, *DCLS Chain of Custody Sample, Frozen Specimen*.
  - d. If the employee does not correctly document that the specimen was frozen on the *DCLS COC*, DCLS will reject the specimen.
- 2. Failure to store a specimen properly will not cause a positive test result.
- 3. Access to specimen storage areas must be restricted to designated employees authorized to handle urine specimens.

### B. DCLS Courier Service

- 1. Each unit has designated date(s) for DCLS courier service pick up. The Testing Coordinator must:
  - a. Remove urine specimens from storage.
  - b. Place the specimens into the DCLS specimen transport containers and secure the containers in the DCLS courier service pick-up box/location.
  - c. Log into the *ACE Client Portal*, enter, and submit the required information to include the barcode numbers for the associated samples prior to DCLS pick up.
  - d. Time the placement of the specimen transport containers in the pick-up box/location to ensure the time out of storage before pick-up by the courier is limited.
  - e. Pack transport containers and ensure the containers are ready for pick up when the courier arrives. The courier is not required to wait for employees to pack transport containers.
- 2. The DCLS Courier Service will return empty specimen transport containers on the next scheduled pick-up day.
- 3. Employees should contact DCLS directly at (804) 648-4480 ext. 104 to address any questions

regarding transport containers or to request additional containers.

### VI. Reporting Test Results

- A. DCLS staff will send the results of the substance use test electronically through the *Drug Testing Module* in VACORIS. Employees are encouraged to check the *Drug Testing Module* daily and take appropriate action based on the results.
- B. Employees conducting substance use testing with a handheld device must document the substances tested and the result of the test in the *Drug Testing Module* of VACORIS.
- C. Test Results and Disciplinary Action Institutions
  - 1. Employees must record all positive and negative results in VACORIS and must notify the unit's Testing Coordinator or a designated point of contact of all positive tests.
  - 2. Inmates testing positive for substance use will be subject to disciplinary action; see Operating Procedure 861.1, *Inmate Discipline*.
    - a. The Collecting Officer should be the Reporting Officer on the Disciplinary Offense Report.
    - b. The Collecting Officer is considered to have discovered the offense at the time they become aware of the test results and, if applicable, received guidance on whether any medication(s) prescribed to the inmate may have caused a false positive.
    - c. If the inmate claims to be taking prescription medications that could cause a false positive, the Collecting Officer must contact the Medical Department to verify the inmate's prescribed medications.
      - i. If the Medical Department or the manufacturer of the drug-testing device does not support the inmate's claim that the prescribed medication(s) caused a false positive, the employee must charge the inmate with offense code 122c, *Under the Influence of Drugs*.
      - ii. The manufacturer is the authority for determining if a particular medication could cause a false positive. Employees should contact the Drug Testing Contract Administrator for assistance.
  - 3. Abnormal validity test results (Creatinine/Specific Gravity):
    - a. Employees must give inmates testing positive for dilution due to ingesting excessive liquids, one warning without a disciplinary charge and then retest the inmate as soon as practical but at least three hours after the initial test and warning.
    - b. Inmates testing positive for dilution on any subsequent test after receiving one warning, must be charged with offense code 122f, *Adulteration, dilution, or substitution of specimen for the purpose of compromising the results of the drug test*.
    - c. Inmates who are observed or are determined to have adulterated, diluted, other than by ingesting excessive liquids, or substituted a specimen for the purpose of compromising the results of the drug test must be charged with offense code 122f, *Adulteration, dilution, or substitution of specimen for the purpose of compromising the results of the drug test* on the first offense with no warning issued.

### 4. THC or Nicotine

- a. Because THC and Nicotine may, in some cases of high use, stay in the body up to 30 days, inmates testing positive for THC or Nicotine should receive an initial charge, but should not be charged again for a positive test for 30 days from the date of the initial positive test.
- b. Inmates testing positive for THC or Nicotine should receive increased frequency testing and must be charged when the use of other substances is found during the 30-day period.

### 5. Jimson Weed

- a. When an employee determines an inmate ingested Jimson Weed, the employee must charge the inmate with offense code 122c, *Under the Influence of Drugs*, a positive drug test result is not required.
- b. When an employee finds Jimson Weed in an inmate's possession, the employee should charge the

inmate with offense code 122a, Possession of unauthorized or un-prescribed drugs.

### VII. Inmate or Probationer/Parolee Refusal to Provide a Specimen

### A. Inmate Refusals

- 1. If an inmate refuses to submit to alcohol testing, the employee must charge the inmate with offense code 145d, *Refusal to Submit to Alcohol Test*.
- 2. If an inmate refuses to submit to drug testing, the employee will not give the inmate sixteen ounces of water and two hours to produce a specimen but will charge the inmate with offense code 122d, *Refusal to submit to drug testing*.
- 3. The employee witnessing the inmate's refusal should be the Reporting Officer for the *Disciplinary Offense Report*.
- 4. The Facility Unit Head or designee should develop methods to notify appropriate employees of sanctions and program referrals.

### B. Probationer/Parolee Refusals

- 1. If the probationer/parolee is unable to provide a specimen, an employee should give the probationer/parolee 16 ounces of water and up to two hours to provide a specimen.
  - a. P&P Officers will handle verified medical conditions resulting in the probationer's/parolee's inability to produce a urine specimen on a case-by-case basis.
  - b. The P&P Officer will impose appropriate sanctions for probationers/parolees determined to be or attempting to adulterate, dilute, or substitute their specimen to avoid detection.
- 2. If a CCAP probationer/parolee refuses to provide a specimen, employees must impose appropriate sanctions in accordance with Operating Procedure 940.4, *Community Corrections Alternative Program*.

### VIII. Case Management and Special Program Issues

- A. The DOC provides guidance and the necessary resources to establish and maintain special services and programs for inmates and probationers/parolees with substance use disorders. (2-CO-4B-04)
- B. Any time an inmate or CCAP probationer/parolee receives a positive test for substance use: (5-ACI-6A-23; 4-ACRS-5A-08)
  - 1. The employee should notify the inmate's or CCAP probationer's/parolee's counselor.
  - 2. The counselor should adjust the case plan, as appropriate, to refer the inmate or CCAP probationer/parolee to programming that addresses addiction, dependency, or criminal thinking issue; see Operating Procedure 841.1, *Inmate Programs and* Operating Procedure 940.4, *Community Corrections Alternative Program*.
- C. Programs and services for inmates with substance use disorders include monitoring and additional substance use testing at all institutions. (5-ACI-5E-11)

### REFERENCES

COV §53.1-67.9, Establishment of community corrections alternative program; supervision upon completion

Operating Procedure 038.1, Reporting Serious or Unusual Incidents

Operating Procedure 425.4, Management of Bed and Cell Assignments (Restricted)

Operating Procedure 445.4, Screenings and Searches of Persons (Restricted)

Operating Procedure 740.1, Infectious Disease Control

Operating Procedure 841.1, Inmate Programs

Operating Procedure 861.1, Inmate Discipline

Operating Procedure 920.1, Community Case Opening, Supervision, and Transfer

Operating Procedure 940.4, Community Corrections Alternative Program

### **ATTACHMENTS**

Attachment 1, DCLS Chain of Custody - Sample
Attachment 2, DCLS Chain of Custody - Sample, Frozen Specimen

# FORM CITATIONS

Strip Search Deviation Request 810\_F2

Substance Use Voluntary Admission 841\_F9

P&P Urine Test Observation Accommodation Request 841\_F21

