

Restorative Housing in the Virginia Department of Corrections

FY2024 Report



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Authority

This report has been prepared and submitted to fulfill the requirements of Chapter 516 of the Acts of Assembly of 2019.¹ This provision requires the Department of Corrections to report certain information pertaining to the agency's Restrictive Housing and Shared Allied Management programs to the Governor, the Chairmen of the House Committee on Public Safety and the Senate Committee on Rehabilitation and Social Services, and the Clerks of the House of Delegates and the Senate by October 1st of each year.²

Background

For many years, correctional systems across the nation have relied on Segregation as a management status for inmates deemed as a risk to the safety of other incarcerated inmates or prison staff. Typically, inmates were assigned to a static period of "Disciplinary Segregation" because of a conviction for an institutional infraction or to "Administrative Segregation" due to assaultive and disruptive behaviors at lower security level prisons, escape histories, or extremely violent and notorious crimes. Inmates were managed constitutionally, but with high security controls limiting opportunities for socialization with other inmates. Segregation practices often lacked articulable standards allowing progression into lower security levels or general population.

Since 2011, the Virginia Department of Corrections (VADOC) has remained dedicated to a culture change reducing the use of Segregation. VADOC spearheaded an organizational shift, mitigating the risk associated with direct release of inmates managed in Segregation through the Step-Down program at Wallens Ridge and Red Onion State Prison. The Step-Down program focuses on risk reduction and risk control. Participants can progress to a general population setting with the use of interactive journaling, therapeutic modules, and programming that is done individually and in group settings. Inmates are evaluated on several dynamic characteristics including behavior, personal hygiene, cell compliance, and demeanor toward staff and other inmates.

VADOC's reform efforts have been nationally recognized. In 2013, the Southern Legislative Conference presented Virginia with the State Transformation in Action Recognition (STAR) Award, recognizing Virginia for its diligent work in creating the Step-Down program. In 2014, the General Assembly passed Senate Joint Resolution 184 "*commending the Virginia Department of Corrections for its outstanding leadership and dedication to public safety in administering the Step-Down program.*"³ In 2016, the U.S. Department of Justice, in its *Report and Recommendations Concerning the Use of Restrictive Housing*,⁴ highlighted five jurisdictions that have undertaken particularly significant reforms in recent years, featuring Red Onion State

¹ HB1642 (<https://lis.virginia.gov/cgi-bin/legp604.exe?191+ful+CHAP0453>), patroned by Delegates Hope, Carroll Foy, Carter, Guzman, Keam, Kory, Krizek, Levine, Lopez, Price, Sullivan, and Thomas, and SB1777 (<https://lis.virginia.gov/cgi-bin/legp604.exe?191+ful+CHAP0516>), patroned by Senators Saslaw and Ebbin, set forth the information to be contained this report

² <https://law.lis.virginia.gov/vacode/title53.1/chapter2/section53.1-39.1/>

³ SJ 184 (<http://lis.virginia.gov/cgi-bin/legp604.exe?141+ful+SJ184ER>) patroned by Senator Ebbin and Delegate Hope

⁴ <https://www.justice.gov/archives/dag/report-and-recommendations-concerning-use-restrictive-housing>



Prison. Virginia has served as a model to over a dozen different states who have toured, observed, and applied aspects of the step-down operations in their own jurisdictions.

In 2016, the Vera Institute of Justice (Vera)—in partnership with the U.S. Department of Justice Programs, Bureau of Justice Assistance (BJA)—selected Virginia as one of five new states to join the Safe Alternatives to Segregation Initiative. Vera assisted VADOC with its reform efforts, provided recommendations, and developed a partnership of learning from cultural reform. The Vera Institute of Justice report highlighted “Great Successes” of Virginia’s Restrictive Housing Reforms and offered support for future initiatives.

Virginia’s efforts have continued with several progressive changes. In April 2016, VADOC began a Restrictive Housing pilot program in four medium security level institutions based upon the success of using behavior as a primary metric for progression into general population. These sites phased out the use of static disciplinary convictions to determine progress and began considering behavior, compliance, rapport, and other dynamic factors to evaluate the inmate’s progression. By November 2018, the disciplinary model was entirely phased out and the behavior-based Restrictive Housing program was successfully expanded to all facilities.

VADOC continued its efforts to reduce the use of Restrictive Housing through the creation of diversion programs in general population geared towards inmates with unique risks and needs:

- Steps to Achieve Reintegration (STAR) for inmates with an unspecified fear of returning to traditional general population. Participants are placed in STAR pods where they gradually reintegrate into controlled movement, programming, and recreation.
- The Secure Diversionary Treatment Program (SDTP) for inmates with a Serious Mental Illness (SMI). SDTP diverts inmates with an SMI from RHU into a graduated behavior management program. In the summer of 2021, VADOC was again honored with a STAR award by the Southern Legislative Conference for SDTP.
- Shared Allied Management (SAM) program for inmates who have unique medical, mental health or other vulnerabilities making an assignment to traditional general population difficult. Further details about the SAM program can be found on page 6 of this report.

From 2019 to 2020, VADOC began to offer three and then four hours of meaningful out-of-cell time to all inmates in the Restrictive Housing program, using a combination of structured and unstructured activities. To facilitate this initiative, all medium security facilities and higher added an Interactive Program Aide position to coordinate and deliver these programs. Program aides work with inmates individually and in small group settings to provide pro-social activities, including interactive journaling, cognitive simulation, art activities, reading, education, and guided group discussion.

The past decade has brought several initiatives to VADOC that are aligned with the goal of managing behavior, promoting accountability, targeted programming interventions, and creating



responsible and safe pathways into general population. Ultimately, these programs foster long-term public safety for the Commonwealth of Virginia.

Adoption of Restorative Housing

Section 53.1-39. of the Code of Virginia mandates that VADOC's Restrictive Housing program to adhere to the standards adopted by its accrediting body, the American Correctional Association (ACA). By January 2020, the agency's program had evolved beyond the parameters set by ACA. Specifically, ACA defines Restrictive Housing as an assignment where the inmate is separated from general population and confined to a cell for at least 22 hours per day for the safe and secure operation of the facility. In practice, the end of Restrictive Housing (as defined by ACA) took place in January 2020, when all inmates, regardless of security status, were afforded at least four hours of out-of-cell time per day.

VADOC determined that its Restrictive Housing policy should be redefined as a response to its reform efforts, to better reflect agency practice, and due to the impact on accreditation. To that end, on August 1, 2021, VADOC formally adopted a Restorative Housing program for all inmates who require enhanced security and programming opportunities. The Restorative Housing program is characterized by its emphasis on behavior management, personal inmate accountability, meaningful out-of-cell time for programming, and pathways to transition inmates safely into traditional general population.

VADOC's Restorative Housing program was the subject of legislation during the 2023 General Assembly Session. HB2487⁵, *Restorative housing; restrictions on use*, would codify the Restorative Housing program and set a set standard of correctional management for the Commonwealth. HB2587 was enrolled on March 13, 2023, and was adopted into the Code of Virginia §53.1-39.2, effective July 1, 2023.⁶

Changes in Total VADOC Population

Since the first Annual Report, the Average Daily Population in VADOC has decreased 20%, from 29,994 at the end of FY2019⁷ to 23,862 at the end of FY2024. This decrease was due to a combination of the impact of the COVID-19 pandemic and the implementation of Enhanced Earned Sentence Credits effective July 1, 2022, and applied retroactively. As a result, the proportion of the VADOC inmate population with a violent Most Serious Offense (MSO) increased from 66% to 76% between FY2019 and FY2024. Conversely, the proportion of inmates with a property/public order MSO decreased from 18% to 11% and drug related MSO decreased from 14% to 12% between the same time period.⁸

⁵ HB2487 (<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=231&typ=bil&val=hb2487>) patroned by Delegates Davis, Hope, Scott, and Wilt.

⁶ <https://law.lis.virginia.gov/vacode/title53.1/chapter2/section53.1-39.2/>

⁷ The Reduction of Restrictive Housing in the Virginia Department of Corrections, FY2019 Report.

⁸ VADOC Research Unit, August 23, 2024



The shift towards more violent offenses and less property or drug offenses as inmates enter the VADOC system has resulted in a greater concentration of inmates classified to high-security level facilities upon intake. The impact this shift has on the Restorative Housing program is explained in the following sections of this report.

FY2024 Restorative Housing Program Summary

Section 53.1-39.2 of the Code of Virginia establishes four specific referral pathways into the Restorative Housing (RHU) program:

1. An inmate makes a request to be placed in Restorative Housing with informed voluntary consent.
2. An inmate needs such confinement for their own protection.
3. There is a need to prevent an imminent threat of physical harm to the inmate or another person.
4. An inmate's behavior threatens the orderly operation of the facility.

The Code requires that inmates referred to the Restorative Housing program by their own request or for protection receive similar opportunities for activities, movement, and social interaction as provided in general population, considering their safety and the safety of others. Thus, VADOC created a new management status within the program for this alternative general population (Alt-GP) requirement. Inmates referred into the program for their behavior continue to be managed under the Restorative Housing management status. These statuses are differentiated internally by movement and privileges while living in Restorative Housing Units. Further details about management statuses and operational practices within the units can be found by reviewing OP841.4, *Restorative Housing Units* at the end of this report or online.⁹

Regardless of their management status, all inmates referred to the Restorative Housing program are offered a minimum of four hours of meaningful out-of-cell time, mandated by Code to include programmatic interventions or other congregate activities aimed at promoting personal development or addressing underlying causes of problematic behavior. Recreation may be included in this requirement and should be provided in a congregate setting unless there is a significant or unreasonable risk to the safety and security of the inmates, staff, or the facility.

In addition, all inmates referred to the Restorative Housing program, regardless of management status, work with a multi-disciplinary team to develop a transitional action plan into general population. This plan is updated weekly and approved by the facility unit head. Plans include actions needed to transition the inmates out of the program as soon as possible and a review of any less restrictive housing options available.

⁹ <https://www.vadoc.virginia.gov/general-public/operating-procedures/>



Restorative Housing Management Status

Starting on July 1, 2024, this cohort includes only inmates referred into the program after exhibiting violent, threatening, and disruptive behavior. Prior to FY2024, inmates requesting to be placed, or had a need for protection, in RHU were included in the overall program data reported by the agency. This split should be recognized when drawing comparisons from prior years. During FY2024, 5,424 inmates were referred to Restorative Housing (RHU) management status and 5,372 were released from that status. Forty inmates were released from RHU status directly to the community, none of which were assigned to the ROSP Step-Down program.

There were 397 inmates in RHU status on June 30, 2024, comprising 1.7% of VADOC's Average Daily Population (ADP) of 23,862. This is an increase of 58% from FY2023, where the inmates in RHU status represented 1.05% of the VADOC ADP. This increase can be attributed to multiple factors related to changes in the overall inmate population. The total number of inmates in RHU with a violent Most Serious Offense increased 70% in one year, going from 176 at the end of FY2023 to 299 at the end of FY2024.¹⁰ This shift has resulted in an increase in violent and threatening behavior throughout the system. A related factor to this increase also stems from the fact more inmates are being referred to RHU multiple times, from 60% in FY2023 to 71% in FY2024.

Demographically, 66% of the inmates were Black and 34% were White. Overall, 54% of the VADOC population is Black and 46% are White.¹¹ On average, the Restorative Housing status participants were 35 years old. Of the participants in the Restorative Housing program, 41% had no history or current evidence of mental health impairment, 57% percent had either minimal or mild mental health impairment, and 1% were diagnosed with a Serious Mental Illness.

Inmates from all security levels in VADOC were referred into Restorative Housing (RHU) status due to their behavior. In FY2024, 46% of referrals into RHU status came from low or moderate security, compared to 65% in FY2023, a decrease of 29%. The majority (54%) of referrals into RHU status came from close or maximum custody, compared to only 35% in FY2023, an increase of 55%. This shift in referrals follows the overall agency trend towards higher-security classification.

A shift towards higher-security needs within the agency is also represented by an increase in serious disciplinary convictions for inmates referred into the program for their behavior. Referrals are not based on discipline charges, but the data indicate inmates are coming into the RHU program with a more serious disciplinary history than in prior years. On average, the inmates referred into Restorative Housing status for their behavior had eight convictions for serious disciplinary offenses prior to their placement, an increase of 25% from FY2023 (n=6.4). On average, inmates had 13 convictions for less serious disciplinary offenses, a decrease of 10% from last year (n=14).

¹⁰ VADOC Research Unit, August 20, 2024.

¹¹ Management Information Summary Annual Report for the Fiscal Year Ending June 30, 2023



The existence of a higher-security cohort referred to RHU for their behavior also has an impact on the duration of time spent in the program. Inmates progress through the program based on their behavior, which is documented weekly with feedback from a multi-disciplinary team of facility staff. The mean length of stay of inmates released from RHU status during FY2024 was 22.7 days, an increase of 129% from the average of 9.9 days in FY2023. The impact of having a concentration of RHU status inmates at the higher-security levels is their case history is more extensive and they require more security controls upon release. Developing a transition plan into general population takes additional consideration, assessments, planning, and often a transfer to a new high-security location.

More detailed information about the Restorative Housing status population can be found in the tables beginning on page 10 of this report.

Alternative General Population Management Status

Inmates managed under an alternative general population (Alt-GP) status are a part of the Restorative Housing program, but their referral is generated by the inmate's own request or by the facility for protection. Per Code § 53.1-39.2, these inmates live in an RHU building and are managed under general population conditions. Alt-GP is considered a temporary management status, and all inmates are engaged in developing a transitional action plan towards a release to traditional general population. All inmates referred to this status are required by Code to be reviewed for Protective Custody.

During FY2024, 1,763 inmates were referred to Alt-GP status and 1,602 were released from that status. Fifty-four inmates were released from Alt-GP status directly to the community. There were 156 inmates in Alt-GP status on June 30, 2024, comprising 0.7% of VADOC's Average Daily Population (ADP) of 23,862. Demographically, 53% of the inmates were Black and 47% were White. On average, the participants were 39 years old. Forty-five percent of inmates on Alt-GP status had no history or current evidence of mental health impairment, 53% percent had either minimal or mild mental health impairment, and less than 1% were diagnosed with a Serious Mental Illness.

Inmates from all security levels have been referred into Alt-GP status, with 60% from low or medium security facilities and 40% from close or maximum custody. This data highlights a different picture from the inmates in RHU management status, as this cohort is more concentrated in lower security levels than inmates referred into the program for their violent or disruptive behavior. The mean length of stay for inmates transitioning out of Alt-GP status during FY2024 was 22.4 days. The additional review for Protective Custody, paired with a significant number of inmates that refuse to leave the RHU program, impact the length-of-stay.

More detailed information about the Alt-GP status population can be found in the tables beginning on page 10 of this report.



Red Onion Step-Down Program

The Red Onion Step-Down Program was designed for two specific types of inmates: (1) those who have a history that indicates the willingness to carry out intentional, serious, or deadly harm; have a high escape risk; and/or have high profile crimes and/or significant media attention and may be targets of other inmates; and (2) those who have frequently recurring disciplinary violations; have a history of fighting with staff or inmates or violent resistance towards a staff intervention, but without the intent to invoke serious harm or the intent to kill; and/or intentionally commit disciplinary violations with the goal of remaining in Restorative Housing. The first type of inmate is assigned to the Intensive Management (IM) pathway, while the second type of inmate is assigned to the Special Management (SM) pathway.

There were 98 inmates in the Red Onion Step-Down Program on June 30, 2024, a 96% increase from FY2023 (n=50). This cohort represents 0.4% of VADOC's average daily population of 23,862. This increase follows the overall trend within the agency over the past year with increases in serious incidents and a higher concentration of inmates living in maximum security locations. Demographically, 63% of the inmates were Black and 34% were White. On average, the participants were 35 years old. Seventy-nine percent had either minimal or mild mental health impairment. There were no inmates diagnosed with a Serious Mental Illness in the ROSP Step-Down program.

Inmates in the Red Onion Step-Down Program on June 30, 2024, were all assigned to security level "S".¹² On average, the inmates in the program had 13 convictions for serious disciplinary offenses and an average of 18 convictions for less serious disciplinary offenses prior to their placement into the program. This data represents a 38% increase for serious discipline convictions and a 28% increase for minor disciplinary convictions from FY2023. Inmates released from the Red Onion Step-Down Program during FY2024 had a median length of stay of 7.5 months, a 74% increase from FY2023 (4.3 months).

More detailed information about the Red Onion Step-Down Program can be found in the tables beginning on page 10 of this report.

FY2024 Shared Allied Management Summary

The Shared Allied Management (SAM) program aims to promote safety and stability within institutions, while reducing the cycling of certain populations into and out of the Restorative Housing program. The SAM Unit population is composed of three distinct groups of inmates, which VADOC identifies as requiring more intense case management:

¹² Inmates assigned to security level "S", designated as VADOC's highest level of classification, are considered to be in long-term Restorative Housing. Inmates work their way out of security level "S" to level 6 through an incentivized step-down process, with enhanced conditions of confinement, accountability, and cognitive behavioral programming.



- **Mental Health Population:** mentally ill or seriously mentally ill (SMI) individuals who are at a greater risk to cycle through Restorative Housing and/or licensed mental health pods for disruptive behavior related to their mental health diagnoses and symptoms;
- **Medical Population:** medically infirm individuals requiring intermittent medical attention but not requiring placement in the infirmary; or
- **Vulnerable Population:** individuals who are at greater risk for victimization or being bullied in general population due to characteristics such as a cognitive challenge, age (seniors and youthful), or small in stature or timid personality.

SAM Units better address inmate needs and reduce high demands on security, mental health staff, and medical staff while keeping the inmates in a general population setting. The SAM Unit program provides a continuum of services to assist in planning for the inmates' release and successful transition to society. Within this modified therapeutic community, inmates experience unique programs such as Distress Tolerance Skills Group, which includes Dialectical Behavior Therapy (DBT), Thinking for a Change, and many other treatment and mental health programming VADOC offers. SAM Unit inmates also participate in programs and activities that review topics such as crisis intervention, anger management, and emotional regulation skills. The goal is to create therapeutic environments for inmates with similar characteristics to encourage prosocial behaviors and interactions amongst others.

There were 389 inmates in a Shared Allied Management (SAM) Unit on June 30, 2024, a decrease of 10% from FY2023. Demographically, 38% of the inmates were Black and 61% were White. On average, the inmates were 49 years old. Two-thirds (66%) of the participants had either minimal or mild mental health impairment, while 16% had a diagnosis of Serious Mental Illness.

More detailed information about the SAM participants can be found in the tables beginning on page 10 of this report.

Conclusion

The Virginia Department of Corrections has embarked on a journey to significantly reform and improve the practice of Segregation and Restrictive Housing, ultimately becoming a national leader in adopting a vision of Restorative Housing. This vision was enshrined by the passage of legislation and adoption of the program into the Code of Virginia.

Reentry and long-term public safety remain the cornerstone of the agency, anchored in data-driven decision making and evidence-based practices. The Restorative Housing program continues to evolve under those principles and remains a critical element of safety and security for inmates and staff in the Virginia Department of Corrections.

VADOC Restrictive Housing Report - FY2024 (§53.1-39.1)¹

VADOC Average Daily Population (FY2024) = 23,862

Inmates Placed in Restorative Housing Status (July 1, 2023 - June 30, 2024) = 5,424

Inmates Released from Restorative Housing Status (July 1, 2023 - June 30, 2024) = 5,372

Inmates Released from Restorative Housing Status Directly to the Community (July 1, 2023 - June 30, 2024) = 40

Inmates Placed in Alternative General Population Status (July 1, 2023 - June 30, 2024) = 1,763

Inmates Released from Alternative General Population Status (July 1, 2023 - June 30, 2024) = 1,602

Inmates Released from Alternative General Population Status Directly to the Community (July 1, 2023 - June 30, 2024) = 54

Inmates Released from ROSP Step Down Program³ Directly to the Community (July 1, 2023 - June 30, 2024) = 0

Number of Full-Time Mental Health Staff⁴ (as of June 30, 2024) = 157

Inmates in Restorative Housing Status, Alternative General Population (Alt-GP) Status, ROSP Step-Down, or SAM Unit⁵
(as of June 30, 2024) =

	Restorative Housing Status		Alt-GP Status		Step Down Program ³		SAM Unit ⁵	
	397		156		98		348	
Gender	Number	Col %	Number	Col %	Number	Col %	Number	Col %
Male	387	97%	156	100%	98	100%	348	100%
Female	10	3%	0	0%	0	0%	0	0%
Race								
White	134	34%	74	47%	33	34%	211	61%
Black	262	66%	82	53%	62	63%	131	38%
Other	1	0%	0	0%	3	3%	6	2%
Ethnicity								
Hispanic	13	3%	4	3%	13	13%	6	2%
Non-Hispanic	384	97%	152	97%	85	87%	342	98%
Current Age (as of June 30, 2024)								
Under 18	0	0%	0	0%	0	0%	0	0%
18 - 24	54	14%	10	6%	11	11%	11	3%
25 - 29	73	18%	25	16%	24	24%	29	8%
30 - 34	74	19%	30	19%	17	17%	29	8%
35 - 39	76	19%	26	17%	19	19%	42	12%
40 - 44	55	14%	25	16%	10	10%	36	10%
45 - 49	32	8%	16	10%	9	9%	39	11%
50 - 54	16	4%	11	7%	4	4%	40	11%
55 - 59	9	2%	5	3%	4	4%	35	10%
60 - 64	7	2%	5	3%	0	0%	33	9%
65 and Over	1	0%	3	2%	0	0%	54	16%
Average Age	35.2		38.5		34.9		48.5	

VADOC Restrictive Housing Report - FY2024 (\$53.1-39.1)

	Restorative Housing Status		Alt-GP Status		Step Down Program ³		SAM Unit ⁵	
Mental Health Code	Number	Col %	Number	Col %	Number	Col %	Number	Col %
MH X - Appropriate for Field Unit or Work Center	0	0%	0	0%	0	0%	0	0%
MH O - No history or current evidence of impairment	163	41%	71	46%	18	18%	59	17%
MH 1 - Minimal impairment	27	7%	8	5%	3	3%	17	5%
MH 2 - Mild impairment	201	51%	76	49%	77	79%	215	62%
MH S2 - Diagnosis of serious mental illness	3	1%	1	1%	0	0%	49	14%
MH 3 - Moderate impairment	1	0%	0	0%	0	0%	8	2%
MH 4 - Severe impairment	0	0%	0	0%	0	0%	0	0%
Not Reported	2	1%	0	0%	0	0%	0	0%
Medical Class Code								
A - No Disabilities	100	25%	37	24%	36	37%	40	11%
B - Moderate sight/hearing problems, Mild, controlled hypertensives, Asthmatics	108	27%	44	28%	17	17%	48	14%
D - Hepatitis C Virus on treatment, Documented systemic allergies, IDDM (insulin dependent diabetic mellitus), Psychotropic medication	180	45%	70	45%	43	44%	222	64%
E - Severe cardiac case, Severe respiratory case, Weekly or monthly medical appointments	2	1%	3	2%	0	0%	8	2%
F - Any Facility without hills, or housing/critical areas without steps or barriers	3	1%	0	0%	0	0%	14	4%
G - Adapted for Handicapped MSD	2	1%	1	1%	0	0%	11	3%
H - Assisted Living	0	0%	0	0%	0	0%	0	0%
J - Respiratory Isolation	0	0%	0	0%	0	0%	0	0%
K - Infirmary (DFCC, GRCC, FCCW, PMU)	0	0%	0	0%	0	0%	1	0%
L - Dialysis in Population/infirmary	0	0%	0	0%	0	0%	0	0%
AL – Assisted Living	0	0%	0	0%	0	0%	0	0%
RI-Respiratory (Isolation)	0	0%	0	0%	0	0%	1	0%
INF-Infirmary	0	0%	0	0%	0	0%	3	1%
Not Reported	2	1%	1	1%	2	2%	0	0%
Inmate Security/Custody Level at Time of Placement								
W - Work center	1	0%	0	0%	0	0%	0	0%
1 - Minimum	13	3%	5	3%	0	0%	2	1%
2 - Moderate	84	21%	40	26%	0	0%	58	17%
3 - Medium	80	20%	47	30%	0	0%	115	33%
4 - Close	69	17%	28	18%	0	0%	80	23%
5 - Maximum	134	34%	33	21%	0	0%	78	22%
6 - Level 6	5	1%	0	0%	0	0%	13	4%
Special ⁷	0	0%	0	0%	98	100%	1	0%
Other ⁸	11	3%	3	2%	0	0%	1	0%
Disciplinary Offense Convictions Preceding Restorative Housing Status or SAM Unit Placement ⁹	Mean	Median	Mean	Median	Mean	Median	Mean	Median
Average Number of Level 100 Charges	8	4	n/a	n/a	13	10	6	2
Average Number of Level 200 Charges	13	7	n/a	n/a	18	13	14	6

n/a - Reasons for placement into Alt-GP status are for protection, not behavior.

VADOC Restrictive Housing Report - FY2024 (§53.1-39.1)

Length of Stay in Restorative Housing Status for All Releases from Restorative Housing Status¹⁰	Number	Col %
Less Than 5 Days	1,327	19%
5 to 9 Days	1,283	18%
10 to 14 Days	1,136	16%
15 to 29 Days	1,641	23%
30 Days or More	1,739	24%
Mean Length of Stay (days)	22.7	
Median Length of Stay (days)	14.2	
Length of Stay in Alternative General Population Status for All Releases from Alternative General Population Status		
Less Than 5 Days	764	34%
5 to 9 Days	362	16%
10 to 14 Days	208	9%
15 to 29 Days	362	16%
30 Days or More	541	24%
Mean Length of Stay (days)	22.4	
Median Length of Stay (days)	9	
Length of Stay in Step Down Program for All Releases from ROSP Step Down Program¹¹	Number	Col %
Less than 3 Months	28	26%
3 to 6 Months	13	12%
6 to 12 Months	47	44%
12 to 18 Months	12	11%
18 Months Or More	6	6%
Mean Length of Stay (months)	7.5	
Median Length of Stay (months)	6.6	

¹⁰§53.1-39.2 of the *Code of Virginia* establishes four specific referral pathways into the Restorative Housing (RHU) program: 1) an inmate makes a request to be placed in Restorative Housing with informed voluntary consent; 2) an inmate needs such confinement for their own protection; 3) there is a need prevent an imminent threat of physical harm to the inmate or another person; or 4) an inmate's behavior threatens the orderly operation of the facility. Restorative Housing means special-purpose bed assignments operated under maximum security regulations and procedures, and utilized under proper administrative process, for the personal protection or custodial management of offenders. Shared Allied Management means a general population environment used to promote safety within institutions by avoiding the use of restorative housing to manage vulnerable populations that typically require a high level of services from security, mental health, or medical staff. See DOP 830.5 *Transfers, Institution Reassignments* (<https://vadoc.virginia.gov/files/operating-procedures/800/vadoc-op-830-5.pdf>) and DOP 841.4 *Restorative Housing Units* (<https://vadoc.virginia.gov/files/operating-procedures/800/vadoc-op-841-4.pdf>) for additional information.

²Includes inmates who voluntarily request placement in Short Term Restorative Housing within 30 days of their scheduled release so as to not engage in behavior that may negatively impact their release date. Release to community is determined if their release reason indicates they were released to the community (Direct Discharge, Release to Supervision, Mandatory Parole, Discretionary Parole, etc.).

³Step Down Program combines structured evidence-based practices, including re-entry programming, with incentives to allow inmates to progress toward increased responsibilities and avenues for inmates to earn their way to a less restrictive environment. The Intensive Management (IM) Pathway is designed for inmates who: have a history that indicates the willingness to carry out intentional serious or deadly harm; have a high escape risk; or have high profile crimes and/or significant media attention and may be targets of other inmates. The Special Management (SM) Pathway is designed for inmates who: have frequently recurring disciplinary violations; have a history of fighting with staff or inmates or violent resistance towards a staff intervention, but without the intent to invoke serious harm or the intent to kill; or intentionally commit disciplinary violations with the goal of remaining in Restorative Housing. Release to community is determined if their release reason indicates they were released to the community (Direct Discharge, Release to Supervision, Mandatory Parole, Discretionary Parole, etc.).

⁴ Number as of July 2, 2024. There were an additional 47 position openings for facility-based MH&W staff at that time.

⁵Shared Allied Management (SAM) Units are specialized units designated for offenders with Serious Mental Illness (SMI) and other vulnerable populations. For example, SAM may appeal to: inmates with mental health diagnoses that result in management challenges in general population or inmates who frequently cycle in and out of restrictive housing and/or licensed mental health units; inmates with medical conditions requiring frequent nursing attention, but not requiring admission to the infirmary; and inmates subject to bullying or manipulation due predation characteristics such as an intellectual challenge, age, or size.

⁶ACA Standards require that the placement of inmates with Serious Mental Illness in Restorative Housing will not exceed 30 days; to accomplish this, the VADOC Multi-Disciplinary Team (MDT) formally reviews these inmates within 3 and 10 days of admission to Restorative Housing for release or transfer to appropriate housing, programs, and treatment; all of these inmates are removed from Restorative Housing by Day 28 unless a clinical exception is granted.

⁷Inmates assigned to security level “S”, designated as VADOCs highest level of classification, are considered to be in long-term restorative housing. Inmates work their way out of security level “S” through an incentivized step- down process, with enhanced conditions of confinement, accountability, and cognitive behavioral programming.

⁸Includes Protective Custody, Hearing Impaired, and newly received inmates whose security level has not yet been determined

⁹Includes all Disciplinary Offense Convictions that have occurred throughout an inmate's current term of state responsible incarceration; Level 100 Charges include, but are not limited to, offenses such as killing or attempting to kill another person, escape or attempted escape, possession of a weapon, sexual assault, and aggravated assault; Level 200 Charges include, but are not limited to, offenses such as refusing to attend class or programming, disobeying an order, threatening bodily harm to another, fighting with any person, and possession of contraband. For a complete list of disciplinary offenses, please refer to Department Operating Procedure 861.1 - Offender Discipline, Institutions (<https://vadic.virginia.gov/files/operating-procedures/800/vadic-op-861-1.pdf>)

¹⁰If an inmate was placed into and released from Restorative Housing status or Alt-GP status multiple times during the year, each release is shown here in order to present the length of stay for each stay in Restorative Housing status or Alt-GP status.

¹¹If an inmate was placed into and released from the ROSP Step Down Program multiple times during the year, each release is shown here in order to present the length of stay for each stay in the ROSP Step Down Program



Virginia Department of Corrections

Facility Security and Control

Operating Procedure 425.4

Management of Bed and Cell Assignments

Authority:

Directive 425, *Inmate Housing and Outside Work Assignments*

Effective Date: July 1, 2023

Amended: 7/1/23, 2/1/24, 7/1/24

Supersedes:

Operating Procedure 425.4, August 1, 2021

Access: ☒ Restricted ☐ Public ☐ Inmate

ACA/PREA Standards:

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5-ACI-4A-14, 5-ACI-4A-19, 5-ACI-4B-01,
5-ACI-4B-11, 5-ACI-4B-19, 5-ACI-4B-28,
5-ACI-4B-29, 5-ACI-4B-31, 5-ACI-4B-34,
5-ACI-5D-11; §115.14, §115.42, §115.43, §115.68,
§115.81

Content Owner:	Lois Fegan Chief of Restorative Housing	<i>Signature Copy on File</i>	5/27/23
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		Signature	Date

Portions of this operating procedure are excluded from public disclosure under the Virginia Freedom of Information Act. Unauthorized dissemination, printing, or copying of any part of this document is prohibited. A redacted version is available for dissemination in accordance with COV §2.2-3705.2(14).

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 June 2024 and determined that no changes are needed.

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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Acute Care Unit - A designated treatment unit licensed to provide inpatient mental health and wellness services for inmates whose functioning is so severely impaired by a mental disorder that they meet the criteria for involuntary admission.

“At Risk” Inmate - An inmate who meets criteria for being “at risk” for deterioration, self-harm, and/or being a danger to others in a Restorative Housing Unit as determined by a Mental Health Clinician; see *Mental Health and Wellness Services Screening 730_F12*.

Central Classification Services (CCS) - Staff members from the Offender Management Services Unit who review certain recommendations made by the Institutional Classification Authority and Multi-Disciplinary Team to render a final decision regarding inmate statuses and assignments.

Cool-down Space - A safe and secure room in general population for inmates to reflect on their behavior choices, manage their emotions, reduce stress, and practice self-directed behavior.

Discharge (Facility Release) - The release of an inmate or probationer/parolee from a facility due to satisfying the requirements for release from that facility; discharge may be due to parole, good time release, pardon, court order, completion of Community Corrections Alternative Program or other reasons. Discharge may be to the community with or without probation/parole/post-release obligations or discharge may be to law enforcement authorities for other legal obligations or deportation.

Health Care Practitioner - A clinician trained to diagnose and treat patients, such as Physician, Psychiatrist, Dentist, Optometrist, Nurse Practitioner, Physician Assistant, and Psychologist.

Health Trained Staff - A DOC employee, generally a Corrections Officer, who has been trained to administer health screening questionnaires, including training as to when to refer to qualified health care personnel and with what level of urgency.

High Risk Sexual Victim (HRSV) - As identified by the Classification Assessment and Mental Health Clinician assessment, any inmate/probationer/parolee confirmed as a sexual victim or identified as being at high risk of being sexually victimized.

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.

Institutional Classification Authority (ICA) - The institutional employee designated to conduct inmate case review hearings.

Keep Separate - A classification action whereby an inmate is not to be housed at a specific location, or with access to specific staff or inmates; a “Keep Separate” determination is not required but may be based on:

- Two or more inmates who are a serious threat to one another as demonstrated by a verified, prior, aggravated assault (or contract for assault) where serious harm or death was clearly the intent of the aggressor.
- One inmate has testified against another inmate in Court and the inmate's conviction and/or length of sentence was likely influenced by the testimony.
- An inmate's felony was committed against staff, another inmate, or the immediate family of a staff member or inmate.
- The inmate is a family member, friend, and/or prior associate with a staff member.
- The inmate's crime was committed against a current or former institutional staff member or in the locality where the institution is located.
- The inmate is subject to a substantial risk of sexual abuse from a specific, identified inmate.

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

Meaningful Out-Of-Cell Time - Out-of-cell programmatic interventions or other congregate activities aimed at promoting personal development or addressing underlying causes of problematic behavior, which may include

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recreation in a congregate setting as defined in COV 53.1-39.2, *Restorative housing; restrictions on use*. (added 2/1/24)

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.

Mental Health Residential Treatment Unit - A designated treatment unit where mental health and wellness services are provided to inmates who are unable to function in a general population setting due to a mental disorder but who typically do not meet the criteria for admission to an Acute Care Unit.

Multi-Disciplinary Team (MDT) - MDT members are responsible to review individual inmates related to restorative housing and step-down statuses and act as the Institutional Classification Authority to make recommendations for housing status, transfer, security level, good time class, etc.; decisions are the responsibilities of the Facility Unit Head and Regional Administrator.

Precautions - Level of care status which may include conditions under which an inmate who is considered by a Mental Health Clinician to be at significant risk for deterioration, suicide, self-injury, harm to others due to mental health reasons, is closely observed by an assigned Corrections Officer, or other designated person and whose access to potentially harmful items may be restricted while they are at risk.

Protective Custody Unit - A special purpose general population housing unit designated by the Director for inmates classified as requiring separation from other inmates as a result of their personal security needs; inmates requesting and requiring assignment to a Protective Custody Unit may be managed in the Restorative Housing Unit, pending assignment and transfer.

Qualified Health Care Personnel - A Licensed Practical Nurse, Registered Nurse, Physician Assistant, Nurse Practitioner, or Physician.

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.

Safety Status - A VACORIS internal status that identifies inmates at risk for deterioration, suicide, self-injury, harm to others due to mental health reasons, whose management includes a specific placement within the facility.

Secure Diversionary Treatment Program (SDTP) - A residential programming unit with bed assignments designated for eligible inmates who are classified as Seriously Mentally ill, and who meet the criteria for program admission. The SDTP is a formalized program that operates within structured security regulations and procedures and provides for programming and treatment services conducive with evidence based treatment protocols and individualized treatment plans.

Serious Mental Illness (SMI) - Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified mental health clinician.

Psychological - *as relating to the mental and emotional state of an individual.*

Cognitive - *as relating to cognitive or intellectual abilities.*

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Behavioral - *as relating to actions or reactions in response to external or internal stimuli that is observable and measurable.*

Shared Allied Management (SAM) Unit - A residential programming unit operated at designated institutions to deliver intensive services in a safe environment to specific inmate populations that typically require a high level of services from security, mental health and wellness services, and/or health services staff.

Special Management Instructions - Instructions provided by a Mental Health Clinician as to how an inmate is to be managed by security and other staff including, for example, items the inmate is allowed or not allowed to have as documented on the *"At Risk" Inmate Notification 730_F13*.

Steps to Achieve Reintegration (STAR) Program - A program operated at designated institutions for inmates, who motivated by unspecified fear, refuse to leave restorative housing, and enter general population.

Tether - A strap inserted through the tray slot of the cell door to fasten an inmate's handcuffs while the inmate is kneeling to apply leg irons and for inmate escort, where one Corrections Officer maintains control of the strap that is attached to the handcuffs.

Transitional Action Plan - The status in the Restorative Housing Unit to which the inmate is assigned and the transitional steps required for the inmate to enter full privilege general population as soon as safely possible.

Working Day - Weekdays, Monday through Friday, not counting official state holidays.

Youthful Inmate - Any person under the age of 18 who is under adult court supervision and incarcerated or detained in a prison or jail.

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Unauthorized dissemination, printing, or copying is prohibited.**PURPOSE**

This operating procedure provides guidance for appropriate assignment of inmates to beds in Department of Corrections (DOC) institutions. Included are review processes for inmates assigned to double cells and considerations for assignment to Restorative Housing Units and other special populations as well as movement from these units to general population.

PROCEDURE**I. Bed and Cell Assignments****A. Classification Assessment**

1. Staff will use information from the inmate's *Classification Assessment* to determine an inmate's housing and bed assignments with the goal of: (5-ACI-3D-10)
 - a. Protecting inmates from personal abuse, personal injury, disease, property damage, harassment (5-ACI-3D-08)
 - b. Separating inmates at a high risk of being sexually victimized from those at high risk of being sexually abusive; see Operating Procedure 810.1, *Inmate Reception and Classification*, and Operating Procedure 810.2, *Transferred Inmate Receiving and Orientation*. (§115.42[a])
 - c. Making individualized determinations about how to ensure the safety of each inmate. (§115.42[b])
2. Staff will make housing and bed assignments for transgender and intersex inmates on a case-by-case basis taking into consideration whether the assignment ensures the inmate's health and safety or presents management or security problems. (§115.42[c])
 - a. Staff will give serious consideration to a transgender or intersex inmate's views with respect to their own safety. (§115.42[e])
 - b. When an inmate indicates they are transgender or intersex during the *Classification Assessment* or at any time during their incarceration, the Counselor or staff member completing the *Classification Assessment* will add a "six month follow up" alert in VACORIS. and notify mental health staff by email. (§115.42[d])
 - c. Lesbian, gay, bisexual, or intersex inmates will not be placed in a dedicated housing unit or wing based solely on their identification or status. (§115.42[g])
3. Information related to the sexual victimization or abusive of an inmate that occurred in an institutional setting is strictly limited to health care practitioners and other staff, as necessary, to make appropriate housing and bed assignments, or as otherwise required by Federal, State, or local law. (§115.81[d])

B. Single and Double Cell Assignments

1. Single Cell Assignments
 - a. The Facility Unit Head or designee will provide for single cell assignments to meet the special needs of inmates, including but not limited to inmates with severe medical disabilities, serious mental illnesses, inmates likely to be exploited or victimized by others, inmates who are sexual predators, and inmates who have other special needs for single cell housing. (5-ACI-2C-02)
 - b. The Facility Unit Head may also use single cell assignments to encourage positive behavior.
2. Double Cell Assignments
 - a. Inmate assignment to a bed other than a single cell requires an individual judgment based on all available information to determine an inmate's double cell compatibility.
 - b. Staff must compare inmates for double cell compatibility using the VACORIS *Cell Compatibility Assessment*.
 - i. Factors considered in the *Cell Compatibility Assessment* include history of assaultive behavior, potential for victimization or aggressive behavior, history of prior victimization, special medical and mental health status, escape history, age, and any "Alerts."

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- ii. The Shift Commander or above should use any other related information, including interviews and observations, if needed, when making a cell assignment decision.
 - c. The Facility Unit Head or designated authority of management rank must approve all double cell assignments for inmates with a *Double Cell Restriction Alert* in VACORIS.
 - d. Program and security staff should review existing double cell assignments following relevant changes in an inmate's behavior or special needs, or when information not previously available is identified.
- C. Cell Assignments and Bed Changes
1. The Facility Unit Head or designee at each institution should provide a process for inmates to request a new cell assignment or bed change and a process for the inmate to appeal the institution's decision. Existing processes i.e., request or complaint may be utilized.
 2. Staff will make routine cell assignments and bed moves from one building or housing unit to another during day shift.
 3. Staff will make routine cell assignments and bed moves within an individual building or housing unit may take place during the evening.
 4. Emergency cell assignments and bed moves made at other times will be the exception rather than a routine option and requires approval of the Facility Unit Head or designated authority of management rank.
- D. Cell and bed assignments to housing units and programs that offer extra privilege incentives will in accordance with institution specific implementation memoranda defining the necessary qualifications and the privileges allowed.
- E. Mental Health Safety Status and Medical Hold
1. A Mental Health Clinician or qualified health care personnel, only, can assign an inmate to safety status or place an inmate on medical hold.
 2. The Mental Health Clinician or treating Medical Practitioner will assign the inmate to a Medical Observation Unit, Infirmary, Mental Health Unit, or other such unit.
 3. A Mental Health Clinician or qualified health care personnel only can remove an inmate from safety status and a medical hold.
 4. The living conditions for inmates on safety status and Medical Hold will conform to the living conditions of the inmate's status unless the inmate's behavior, mental health or health care needs warrant the removal of specific property items or the denial of specific activities; see Operating Procedure 720.2, *Medical Screening, Classification, and Levels of Care*, Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*. (5-ACI-4A-19)
- F. Youthful Inmates (§115.14) (Under age 18, convicted as an adult, not under *Youthful Offender Law*)
1. The DOC provides specialized housing arrangements for youthful inmates that meet the requirements of this standard.
 2. Staff will not place a youthful inmate in a housing unit with any adult where the youthful inmate will have sight, sound, or physical contact through use of a shared dayroom or other common space, shower area, or sleeping quarters.
 3. Staff must always provide direct supervision when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another.
 4. All youthful inmates will be assigned to the specialized unit, unless this assignment would create a risk to the safe, secure, and orderly operation of the institution. Exigent circumstances may require removal to a Restorative Housing Unit.

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- A. This operating procedure governs Restorative Housing Units. Inmate accessible information on this subject is found in Operating Procedure 841.4, *Restorative Housing Units*.
1. The Red Onion State Prison/Wallens Ridge State Prison Local Operating Procedure for the *Restorative Housing Reduction Step Down Program*, governs Restorative Housing Units for Security Level 6 and S inmates.
 2. Restorative Housing Units at institutions designated to house multiple security level inmates will operate in accordance with their *Restorative Housing Operating Level Designation*; see Operating Procedure 841.4, *Restorative Housing Units*.
- B. Security Level W institutions, Security Level 1 institutions, Baskerville Correctional Center, and Deerfield Correctional Center do not have a Restorative Housing Unit.
1. When warranted, inmates will be expeditiously transferred to the designated parent/host institution for placement in the Restorative Housing Unit.
 2. Staff are authorized to secure the inmate in restraints or place the inmate in a holding cell pending the inmate's transfer to the parent/host institution; see Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*.
 - a. The Shift Commander or a higher authority may authorize the use of restraints and/or placement of an inmate in a holding cell pending transfer to the designated parent/host institution.
 - b. The Shift Commander must notify the Administrative Duty Officer immediately and obtain authorization to continue the use of restraints and/or placement in a holding cell.
 - c. The inmate should not remain in restraints for a period greater than four hours. If it becomes necessary to maintain the restraints for a period of more than four hours due to the inmate's behavior, the inmate will be given the opportunity to use the restroom.
 3. Use of Holding Cells Pending Inmate Transfer
 - a. While the inmate remains in the holding cell, staff must:
 - i. Feed the inmate the same meals on the same schedule as the rest of the population when the inmate remains in the holding cell through a meal.
 - ii. Give the inmate their prescribed medication as scheduled.
 - iii. Provide the same bed linens and mattress and pillow as permitted in general population, inmate behavior permitting.
 - iv. Remove all personal property except one religious' book. Staff must secure and inventory the inmate's personal property at the time the inmate is placed in the holding cell.
 - v. Provide appropriate clothing.
 - b. A Corrections Officer must check on the inmate at least twice per hour, no more than 40 minutes apart, on an irregular schedule with each check recorded in a logbook.
 - c. A Corrections Officer must physically observe any inmate believed to be a threat to self or believed to be under the influence of drugs or intoxicants on a continuous and uninterrupted basis and will document their observations on a *Special Watch Log 425_F5*. (5-ACI-4B-11)
 - d. When an inmate remains in the holding cell overnight, the cell is to be equipped with a bed above floor level, a working toilet, hand basin, appropriate lighting, and ventilation. If a holding cell with toilet and wash basin is not available, staff should allow the inmate to use the bathroom and wash their hands a minimum of seven times during each twenty-four hour period including one half hour prior to each mealtime.
 4. The Facility Unit Head or Assistant Facility Unit Head must review the inmate's placement in a holding cell within 24 hours and will determine if the inmate will return to general population or if the inmate will transfer to the parent/host institution for placement in the Restorative Housing Unit.
 5. The Facility Unit Head or designee, with verbal approval of the Regional Administrator or Regional

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Duty Officer, will coordinate the temporary, emergency removal of an inmate from their institution to the parent/host institution; see Operating Procedure 050.3, *Facility Release of Offenders*.

- a. If the Facility Unit Head of the parent/host institution accepts the inmate for temporary transfer, no further authorization for transfer is necessary.
- b. The Transportation Coordinator, Offender Management Services, must be notified immediately via telephone or email.
- c. The Facility Unit Head or designee will prepare the *Intra-Regional Transfer Authorization* 050_F8 and obtain the Regional Administrator's or Regional Duty Officer's signature.

C. In the event of a widespread institutional disruption, natural disaster, or other unusual occurrence that requires emergency action, the Facility Unit Head may temporarily suspend any or all portions of this operating procedure.

1. Inmates involved in the emergency may be detained without being served an *Institutional Classification Authority Hearing Notification* or conducting an ICA Hearing throughout the course of the emergency.
2. Upon restoration of institutional order, all detained inmates will be subject to ICA and other reviews in accordance with this operating procedure.

III. Restorative Housing Unit and Initial Inmate Placement

A. Cool-Down Spaces

1. Cool-down spaces provide inmates with a safe and secure place in general population without the use of the additional resources required by placing the inmate in a Restorative Housing Unit.
2. When appropriate, staff can utilize the institution's cool-down space to manage an inmate during a potentially disruptive situation as an alternative to placement in the Restorative Housing Unit; see Attachment 1, *Cool Down Space Operations Plan*.

B. Restorative Housing Units provide for personal protection and custodial management measures, exercised for the welfare of the inmate, the institution, or both and staff will not place an inmate in the Restorative Housing Unit as punishment. The goals of a Restorative Housing Unit are to:

1. Manage inmates in a safe and secure manner.
2. Provide a consistent, systems approach to the operation of Restorative Housing Units in all institutions to maximize positive outcomes in inmate adjustment.
3. Provide opportunities for inmates to increase their likelihood for success in a full privilege general population.

C. Staff must complete an *Internal Incident Report (IIR)* in VACORIS for "Referral to Restorative Housing" when referring an inmate to the Shift Commander for placement in the Restorative Housing Unit for their behavior. (5-ACI-4B-01) (changed 7/1/24)

1. The reporting staff member must select a primary incident nature that reflects the referral and a secondary incident nature, if applicable, that reflects the nature of the inmate's behavior. (added 7/1/24)
 - a. The primary nature of incident must correspond with the inmate's internal status as follows:
 - i. Referral to Alt-GP – Informed Voluntary Request by Inmate
 - ii. Referral to Alt-GP – Protection, No Positive Fentanyl Test
 - iii. Referral to Alt-GP – Protection, Positive Fentanyl Test
 - iv. Referral to RHU – Imminent Threat of Physical Harm
 - v. Referral to RHU – Behavior Threatening the Orderly Operation of the Facility
 - b. A secondary incident nature must be selected, if the inmate is referred to RHU status, that describes the nature of the inmate's behavior. "Other" may be used if the behavior exhibited by the inmate is not listed.

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2. Staff must document the reason for their referral and the specific facts supporting their referral in the *IIR* to include:
 - a. What behavior demonstrated by the inmate warrants consideration for placement in the Restorative Housing Unit?
 - b. How is this behavior a threat to public, staff, inmate safety, or the orderly operation of the institution?
 - c. What alternatives to placement in the Restorative Housing Unit are available?
 3. Staff with direct knowledge of the need for the inmate's behavior and the specific facts supporting the inmate's placement must complete the required *IIR* in VACORIS when the inmate is transferred to the host/parent institution for placement in the Restorative Housing Unit.
 4. The Shift Commander will meet with the referring staff member and the inmate to decide whether to place the inmate in the Restorative Housing Unit or return the inmate to general population.
 - a. The Shift Commander will document their decision, the reason for their decision and any alternatives considered prior to placing the inmate in the Restorative Housing Unit, in the *Level 1 Review* section of the *IIR*.
 - b. The Shift Commander will prepare the *Institutional Classification Authority Hearing Notification* and will document the inmate's and referring staff member's comments in VACORIS; See Operating Procedure 830.1, *Institution Classification Management*. (added 2/1/24)
- D. Staff must complete an *Internal Incident Report (IIR)* in VACORIS for "Referral to Restorative Housing" when an inmate makes an informed voluntary request for placement and when an inmate is placed in the Restorative Housing Unit for their own protection.
1. The staff member will complete an *IIR* in VACORIS for "Referral to Restorative Housing" and notify the Shift Commander.
 2. The Shift Commander will meet with the referring staff member and the inmate to decide whether to place the inmate in the Restorative Housing Unit or return the inmate to general population.
 - a. If the inmate is making an informed voluntary request for Restorative Housing Unit placement, the inmate must complete an *Informed Voluntary Request for Restorative Housing Unit* 841_F28.
 - b. If the Shift Commander approves the inmate's request, the Shift Commander will immediately place the inmate in the Restorative Housing Unit and assign the inmate to Alt-GP status in VACORIS; inmates assigned to Alt-GP status will be treated the same as inmates in SD-2 status.
 - c. The Shift Commander will document their review, their decision to approve or disapprove the inmate's request, the reason for their decision, and any alternatives considered, in the Level 1 Review portion of the *IIR* prior to placing the inmate in the Restorative Housing Unit.
 - d. ~~The Shift Commander or designee will place the *Informed Voluntary Request for Restorative Housing Unit* 841_F28, and a copy of the completed *IIR* in the inmates Restorative Housing Unit file.~~ (deleted 7/1/24)
 - e. Staff will upload the *Informed Voluntary Request for Restorative Housing Unit* 841_F28 as an external document with the initial classification action.
 3. When an inmate requests placement in the Restorative Housing Unit for their personal protection the institution bears the burden of establishing a basis for refusing the inmate's request.
 4. Inmates in the Restorative Housing Unit because they voluntarily requested placement for their personal protection may voluntarily refuse continued placement in the Restorative Housing Unit and will document their refusal on the *Informed Voluntary Request for Restorative Housing Unit* 841_F28. (added 7/1/23)
 5. Staff must provide inmates in the Restorative Housing Unit for their own protection who are subject to removal from the Restorative Housing Unit, not by their own request, with a timely and meaningful opportunity to contest their removal.

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- a. Any inmate may contest their removal from the Restorative Housing Unit by submitting a *Written Complaint* 866_F3 directly to the Facility Unit Head.
 - b. Once an inmate submits a *Written Complaint* 866_F3, staff must not move the inmate from the Restorative Housing Unit until the Facility Unit Head responds to the inmate's *Written Complaint* 866_F3.
 - c. Staff must contact the Institutional Ombudsman immediately prior to removing an inmate from the Restorative Housing Unit to determine if the inmate submitted a *Written Complaint* 866_F3 and whether the Facility Unit Head responded to the inmate's complaint.
 - d. The Facility Unit Head's response will determine if the inmate is to be removed or if the inmate can remain in the Restorative Housing.
- ~~6. The MDT will conduct a formal ICA hearing to review any inmate requesting placement in the Restorative Housing Unit for their own protection for assignment to Protective Custody. The MDT will document their review and recommendations on the *Institutional Classification Authority Hearing Notification*. (deleted 2/1/24)~~
- E. Only the Shift Commander or above has the authority to authorize an inmate's placement in a Restorative Housing Unit.
1. The Shift Commander will only place inmates in a Restorative Housing Unit when: (5-ACI-4B-01)
 - a. An inmate voluntarily requests placement for their personal protection.
 - b. An inmate needs placement for their personal protection.
 - c. An inmate's placement is necessary to prevent imminent threat of physical harm to the inmate or others.
 - d. An inmate's behavior threatens the orderly operation of the institution.
 2. The Shift Commander may place a Security Level S inmate temporarily transferred to an institution for medical, court, etc. on RHU status in the Restorative Housing Unit.
 3. The Shift Commander must not place an inmate in the Restorative Housing Unit based solely on a *Disciplinary Offense Report*.
 4. The Shift Commander must not place an inmate identified as High Risk Sexual Victim (HRSV) or alleged to have suffered sexual abuse or sexual harassment in the Restorative Housing Unit without the inmate's consent unless an assessment of all available alternatives has been made, and the Mental Health Clinician in consultation with the Shift Commander and Regional PREA Analyst has determined that there are no available alternative means of separation from likely abusers. (§115.43[a], §115.68).
 - a. The Shift Commander must clearly document the basis for their concerns related to the inmate's safety and the reason they cannot arrange an alternative means of separation. (§115.43[d], §115.68)
 - i. The Shift Commander must complete the *Sexual Abuse/Sexual Harassment Available Alternatives Assessment* 425_F6 before placing the inmate in the Restorative Housing Unit.
 - ii. If the Shift Commander cannot complete the *Sexual Abuse/Sexual Harassment Available Alternatives Assessment* immediately, the Shift Commander may place the inmate in the Restorative Housing Unit on RHU status for up to two hours while completing the assessment. (§115.43[a], §115.68)
 - iii. The Shift Commander, PREA Compliance Manager, or designee must forward a copy of the *Sexual Abuse/Sexual Harassment Available Alternatives Assessment* to the Regional PREA Analyst with a copy maintained in the PREA Investigation file.
 - b. The inmate will remain in the Restorative Housing Unit on Alt-GP status only until an alternative means of separation from likely abuse can be arranged; this assignment will not ordinarily exceed 30 days. (§115.43[c], §115.68)
 5. The Shift Commander must not place an inmate in the Restorative Housing Unit due to the inmate's

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Gender Identity alone. (5-ACI-4B-34)

F. The Shift Commander will assign the inmate to an appropriate housing status as follows:

1. When an inmate is removed from general population and placed in the Restorative Housing Unit for exhibiting behavior that presents an imminent threat of physical harm to the themselves or another person, or that threatens the orderly operation of the institution because there is no other alternative to ensure the safety and security of the inmate and the institution; the Shift Commander or above will initially assign the inmate to RHU status .
2. The Shift Commander or above will may assign an inmates moved from in SD-1, or SD-2, or Alt-GP status for the immediate secure confinement of the inmate to RHU status, to be followed by a formal MDT meeting within three working days. (changed 2/1/24)
 - a. ~~Inmates moved from SD-1 or SD-2 status by the MDT due to a formal ICA hearing will be placed on RHU status.~~ (deleted 2/1/24)
3. When an inmate is removed from general population and placed in the Restorative Housing Unit with the inmate's informed and voluntary request for personal protection or when the inmate needs such confinement for their protection, the Shift Commander or above will assign the inmate to Alt-GP status when there is no other alternative to ensure the safety and security of the inmate.
4. The Shift Commander or above at a host/parent institution will initially assign inmates transferred to the institution from Security Level W, Security Level 1, Baskerville, or Deerfield Correctional Center for placement in the Restorative Housing Unit to RHU status.

G. The Shift Commander will inform qualified health care personnel and the Mental Health Clinician immediately when an inmate transfers from general population to the Restorative Housing Unit. (5-ACI-4B-01)

1. Qualified health care personnel will conduct an assessment per protocols established by the Health Authority. This assessment will determine the impact on any medical conditions exhibited by the inmate and the possible alternatives that may be available to compensate for such conditions.
2. A Mental Health Clinician will screen the inmate and complete the *Mental Health and Wellness Services Screening* 730_F12 before the inmate's placement or within one working day after placement in the Restorative Housing Unit to evaluate the impact an inmate's assignment to RHU status will have on the mental health conditions exhibited by the inmate. (5-ACI-4B-28)
3. Health Care or health trained staff, at institutions without a Mental Health Clinician, should interview the inmate within one working day after placement in the Restorative Housing Unit using the *Restorative Housing Review* section of the *Health Screening - Health-Trained Staff* 720_F10. (5-ACI-4B-28)

H. The Facility Unit Head or other Administrative Duty Officer must review the *IIR* and any other available, relevant information within 24 hours of the inmate's assignment to RHU status to determine if the placement is warranted.

1. The Facility Unit Head or other Administrative Duty Officer completing the review must not have been involved in the inmate's initial assignment to RHU status.
2. The Facility Unit Head or other Administrative Duty Officer can either approve the inmate's assignment to RHU status or return the inmate to their previous status.

IV. Multi-Disciplinary (MDT) and Inmate Classification Reviews

A. The MDT conducts all ICA hearings to review inmates assigned to the Restorative Housing Units and will make a recommendation concerning the inmate's transitional action plan as well as the inmate's security level, good time class level, transfer, etc.

1. The MDT may include but is not limited to the following staff: (5-ACI-4B-31)

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- a. Chief of Housing and Programs (CHaP) or Chief of Security - Mandatory
 - b. Counselor - Mandatory
 - c. Corrections Officer
 - d. Institutional Program Manager (Mandatory) (added 2/1/24)
 - e. Investigator/Intelligence Officer
 - f. Qualified Health Care Personnel
 - g. Mental Health Clinician - Mandatory
 - h. PREA Compliance Manager (Mandatory-PREA incidents, only)
 - i. Unit Manager (Mandatory) (added 2/1/24)
2. At least three members must be present for the MDT to conduct a formal ICA hearing.
 - a. Mandatory MDT members unable to attend an ICA hearing must provide a written statement for consideration.
 - b. Non-Mandatory MDT members unable to attend an ICA hearing where they have relevant input should provide a written statement for consideration.
 3. The PREA Compliance Manager is a mandatory MDT member when the inmate's placement in the Restorative Housing Unit is related to a PREA incident. If the PREA Compliance Manager is unable to attend the hearing, they must provide a written statement for consideration.
- B. Within three working days of an inmate's initial assignment to RHU status, the MDT will review the *IIR* and any other available, relevant information and will conduct a formal ICA hearing to:
1. Determine if the inmate can return to their previous status (general population or step-down) another appropriate internal status in the Restorative Housing Unit, or if the inmate will remain on RHU status.
 2. Develop an initial transitional action plan if the inmate will remain on RHU status to transition the inmate out of the Restorative Housing Unit as soon as safely possible.
 3. The MDT shall document specific details about the inmate's behavior and their recommendations about the inmate's transitional action plan as well as document specific comments made by the inmate during the meeting in the ICA module in VACORIS. (added 2/1/24)
 4. Review all SMI inmates and determine if each inmate can be released to full privilege general population or be assigned to SD-1 or SD-2 status at their current institution within 28 days of their initial assignment to RHU status.
 - a. If an SMI inmate will not release to full privilege general population or be assigned in SD-1 or SD-2 within 28 days, the MDT must refer the inmate to Marion Correctional Treatment Center's (MCTC) Acute Care Unit, a Mental Health Residential Treatment Unit or other Mental Health Unit, a Secure Diversionary Treatment Program (SDTP) or a Secured Allied Management Unit (SAM).
 - b. If an SMI inmate will remain on RHU status for more than 28 days, the Mental Health Clinician must complete the *Serious Mental Illness (SMI) 28 Day Exemption Request 425_F7* and submit it to the Facility Unit Head.
 - i. The Facility Unit Head, Mental Health Clinical Supervisor, Regional Administrator, and Regional Operations Chief must review and approve the *Serious Mental Illness (SMI) 28 Day Exemption Request 425_F7*.
 - ii. Staff must forward a copy of the completed *Serious Mental Illness (SMI) 28 Day Exemption Request 425_F7* with required approval and signatures to the Director, the Chief of Corrections Operations, the Chief of Mental Health and Wellness Services, and the DOCSMI mailbox at docsmi@vadoc.virginia.gov.
 - c. The CHaP, Unit Manager in their absence, must notify the Special Program Manager for Diversionary Housing by email to the DOCSMI mailbox at docsmi@vadoc.virginia.gov and provide the inmate's name and number, date assigned to RHU status, proposed transitional action

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plan, and any supporting documentation on the same day that the MDT holds the formal ICA hearing.

5. The MDT will conduct a formal ICA hearing to review any inmate requesting placement in the Restorative Housing Unit for their own protection for assignment to Protective Custody. The MDT will document their review and recommendations on the *Institutional Classification Authority Hearing Notification*. (added 2/1/24)

C. Within 10 working days of an inmate's initial assignment to RHU status, the MDT will conduct a formal ICA hearing to:

1. Evaluate the inmate and determine if the inmate will remain in the Restorative Housing Unit on RHU status or be released to general population at their current institutional assignment.
2. Review any inmate who will remain in the Restorative Housing Unit for placement in a step-down status and as soon the risk is reduced to an acceptable level return the inmate to general population.
3. Recommend a transfer for inmates who cannot return to the full privilege general population at the current institution but would be suitable for general population at another equal or higher-level institution.
4. Review all pregnant inmates and inmates under the age of 18 to evaluate the inmate and determine:
 - a. If the inmate can be released to full privilege general population or be assigned to SD-1 or SD-2 status at their current institution within 28 days of their initial assignment to RHU status.
 - b. If the inmate cannot release to full privilege general population or be assigned in SD-1 or SD-2 status within 28 days; the MDT will review the inmate to determine appropriate alternate housing.
 - c. If a pregnant inmate or inmate under the age of 18 is also SMI and cannot be released to full privileged general population or be assigned to SD-1 or SD-2 status within 28 days; the MDT will consult with the Mental Health Clinician Senior at CCS to determine appropriate alternate housing.
 - d. Pregnant inmates and inmates under the age of 18 must be moved out of Restorative Housing (RHU) within 28 days of their assignment to RHU status.
5. The MDT must document specific details about the inmate's behavior, their recommendations related to the inmate's transitional action plan, and the specific comments made by the inmate during the MDT meeting in the ICA module of VACORIS. (added 2/1/24)

D. The MDT at the parent/host institution will be responsible for conducting ICA hearings based on the *IIR* and any relevant *Disciplinary Offense Reports* or other documentation provided by staff at the institution transferring for placement in the Restorative Housing Unit.

V. Transitional Action Plan Development

- A. MDT members will evaluate each inmate assigned to RHU status and develop the inmate's initial transitional action plan at the first formal ICA hearing in accordance with this operating procedure.
 1. Evaluation tools and program components include but are not limited to the following:
 - a. Review of COMPAS findings
 - b. Case Plan review and development
 - c. History of behavior
 - d. Risk/Needs assessment
 - e. An assessment of:
 - i. Disciplinary Violation Goals - Reduce or eliminate disciplinary violations.
 - ii. Mental Health Goals - Medication compliant, number of office visits per month, etc.
 - iii. Responsible Behavior Goals - Including personal hygiene, standing for count, cell compliance, deportment; satisfactory rapport with staff, and inmates, and others with compliance as documented in VACORIS during MDT reviews. on the *Responsible Behavior Goals Progress-*

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~~Report 841-F22~~. (changed 2/1/24)

- iv. Journaling and/or program assignments relevant to inmate needs and goals.
- 2. The Transitional Action Plan is designed to address inmate behaviors and needs so the inmate can enter a full privilege general population as soon as safely possible. The inmate's Transitional Action Plan can include but are not limited to the following options:
 - a. RHU Status
For inmates that must be managed under maximum security conditions.
 - b. Step-down 1 (SD-1) Status
For inmates, whose behavior does not warrant assignment to RHU status or whose behavior has improved since assignment to RHU status to include completion of required programmatic goals.
 - c. Step-down 2 (SD-2) Status
For inmates identified as needing a more structured living environment than in full privileged general population but do not need the level of control provided in RHU or SD-1 status and/or inmates whose behavior has improved since assignment to RHU or SD-1 status to include completion of required programmatic goals.
 - d. Steps to Achieve Reintegration (STAR) Program
 - i. For inmates who refuse assignment to full a general population setting due to an unspecified fear and not for a specific fear or threat, violent or aggressive behavior, or legitimate protective custody; see Operating Procedure 830.5, *Transfers, Institution Reassignments*.
 - ii. Inmates pending approval for and transfer to the *Steps to Achieve Reintegration (STAR) Program* may be managed on RHU, SD-1, or SD-2 status as deemed appropriate by the MDT and approved by the Facility Unit Head.
 - e. Protective Custody
 - i. For inmates in need of personal protection and require separation from other inmates due to their personal security needs; inmates voluntarily requesting assignment to and requiring assignment to a Protective Custody Unit may be managed in restorative housing, as appropriate, pending assignment and transfer; see Operating Procedure 830.1, *Institution Classification Management*, and Operating Procedure 830.5, *Transfers, Institution Reassignments*.
 - ii. Inmates pending approval for and transfer to a Protective Custody Unit may be managed in the on RHU, SD-1, or SD-2 status as deemed appropriate by the MDT and approved by the Facility Unit Head.
 - f. Marion Correctional Treatment Center's (MCTC) Acute Care Unit
For SMI inmates meeting the legal commitment criteria; see Operating Procedure 730.3, *Mental Health Services: Levels of Service*.
 - g. Mental Health Residential Treatment Unit or Mental Health Unit
For SMI inmates who do not meet the criteria for commitment to an Acute Care Unit but is unable to function in a general population; see Operating Procedure 730.3, *Mental Health Services: Levels of Service*.
 - h. SDTP
For inmates frequently engaging in assaultive, disruptive, and/or unmanageable behavior; see Operating Procedure 830.5, *Transfers, Institution Reassignments*.
 - i. SAM Unit
For SMI inmates needing specialized placement, see Operating Procedure 830.5, *Transfers, Institution Reassignments*.
- B. The Counselor must update the inmate's Case Plan in VACORIS once the inmate's transitional action plan is approved.
- C. Inmates who refuse to participate in their transitional action plan are subject to disciplinary action; see

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1. Staff will give inmates at Security Level 2 and 3 institutions refusing to journal and/or participate in other program assignments a warning for their first refusal. Staff will charge the inmate with Offense Code 200a, *Refusing to work or refusing to attend school or other program assignments mandated by procedure or by law, or failure to perform work or program assignment as instructed* if the inmate again refuses to participate.
2. Staff will charge inmates at Security Level 4 and above institutions who refuse to participate with Offense Code 119f, *Refusal to participate in the Restorative Housing Unit assignment* and managed in the Restorative Housing Unit at their current location.
3. Staff can only charge the inmate once during a continued period of refusal.
 - a. After the first refusal and warning, staff must give the inmate the opportunity to comply.
 - b. Staff cannot charge the inmate until the next seven-day *Restorative Housing Status Review*.
4. Upon conviction for refusal to participate, staff should review the inmate for a reduction to Good Time Class IV; see Operating Procedure 830.3, *Good Time Awards*.

VI. Mental Health and Health Care Reviews and Care

- A. No inmate will be denied necessary or proper health, dental, and or mental health care while assigned to the Restorative Housing Unit.
- B. Mental Health Reviews and Care
 1. If the results of the initial mental health screening conducted at the time of the inmate's placement in the Restorative Housing Unit indicates the inmate is "at risk" for serious self-harm, suicide, or exhibits debilitating symptoms of a SMI, staff will contact a Mental Health Clinician for appropriate assessment and treatment; see Attachment 2, *Guidelines to Access Emergency Mental Health Services* to Operating Procedure 730.2, *Mental Health and Wellness Services: Screening, Assessment, and Classification*. (5-ACI-4B-11, 5-ACI-4B-28)
 - a. A Mental Health Clinician will provide *Special Management Instructions*, when applicable, and will monitor "at risk" inmates in accordance with Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.
 - b. A Mental Health Clinician will complete an "At Risk" Inmate Notification 730_F13 to communicate any *Special Management Instructions* to security staff once they determine an inmate assigned to RHU status is "at risk,"
 - i. A Building Supervisor, where the inmate is housed, should countersign the "At Risk" Inmate Notification 730_F13 to confirm receipt of any *Special Management Instructions*.
 - ii. Staff will enter the *Special Management Instructions* on the inmate's *Individual Inmate Log* 425_F4 or *Special Watch Log* 425_F5, as appropriate.
 - c. If the Mental Health Clinician determines an inmate's assignment to RHU status may have a deleterious effect on an inmate's mental health, the Mental Health Clinician must notify the Facility Unit Head that the inmate's placement in on RHU status is not recommended.
 - i. The Mental Health Clinician will offer alternatives for mental health care such as commitment to an acute care setting, transfer to another institution, or strategies for management within the general population.
 - ii. The Facility Unit Head's must sign the "At Risk" Inmate Notification 730_F13 when assigning an "at risk" inmate on RHU status against Mental Health Clinician recommendations.
 2. A Mental Health Clinician, within ten working days after the inmate's initial assignment to RHU status, must review each SMI inmate as determined by the *Mental Health Serious Mental Illness (SMI) Determination* 730_F34.
 3. Unless mental health attention is needed more frequently, a Mental Health Clinician will visit each

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inmate on RHU status weekly; see Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.

- a. Staff must announce and record the presence of a Mental Health Clinician in the Restorative Housing Unit in the Restorative Housing Unit logbook.
 - b. A Mental Health Clinician will personally interview each inmate remaining on RHU status for more than seven days.
 - c. If the inmate's confinement on RHU status continues beyond seven days, a Mental Health Clinician will conduct a mental health screening every seven days thereafter or more frequently if clinically indicated.
4. Any inmate with identified mental health problems who is placed on RHU status will be monitored per Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.

C. Health Care Reviews and Care

1. Health Care services will be provided in accordance with Operating Procedure 720.1, *Access to Health Services*, and Operating Procedure 720.2, *Medical Screening, Classification, and Levels of Care*.
 - a. Inmates may request dental services, if needed; dental staff will determine the need to provide dental care while the inmate is in a Restorative Housing Unit.
 - b. Staff will provide the inmate with their prescribed medications in accordance with Operating Procedure 720.5, *Pharmacy Services*.
2. Qualified health care personnel should conduct a physical screening i.e., weight and vital signs taken on each "at risk" inmate and should check each inmate for symptoms of possible side-effects to prescribed medication.
 - a. Qualified health care personnel will record the results of the screening on the *Health Services "At Risk" Physical Screening 720_F18*
 - b. The physical screening and check by qualified health care personnel should occur no less than once every 14 days.
3. Unless medical attention is needed more frequently, each inmate in on RHU status will receive a daily visit from qualified health care personnel to ensure the inmate has access to the health care system; not required for institutions that do not have qualified health care personnel on duty on weekends.
 - a. Staff must announce and record the presence of qualified health care personnel in the Restorative Housing Unit logbook.
 - b. Staff must record inmate health care requests, qualified health care personnel visits, and medications administered or refused on the *Individual Inmate Log 425_F4*, *Special Watch Log 425_F5* or in the Restorative Housing Unit logbook if the inmate does not have a log.
 - c. Medical Practitioners are not required to visit the Restorative Housing Unit; inmates will submit a request to be seen by the Medical Practitioner through the established sick call process.

D. In-person assessments or examinations

1. In-person assessments or examinations for an inmate on RHU status by qualified health care personnel will be accomplished in the following manner:
 - a. A Corrections Officer will restrain the inmate with handcuffs behind the back.
 - i. If the examination cannot be successfully completed with the hands cuffed behind the inmate's back, qualified health care personnel should step back and allow the Corrections Officers to move the handcuffs to the front of the inmate.
 - h. The use of leg irons is optional dependent on the inmate's security level and behavior pattern.
 - b. A Corrections Officer will instruct the inmate to sit on their bunk.
 - c. Two certified Corrections Officers and qualified health care personnel will enter the cell to perform the assessment or examination.

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- d. Portable blood pressure equipment, scales, etc. should be available for checking vital signs and for routine assessments and examinations.
2. If the assessment or examination cannot be successfully completed in the cell, the inmate must be removed from the cell and escorted in appropriate restraints to an area where the assessment or examination can be completed.
3. In-person mental health interviews and assessments will be conducted in a manner that ensures confidentiality and provides for a therapeutic atmosphere as determined by the Mental Health Clinician.

VII. Restorative Housing Unit - Status Reviews**A. Review by the Facility Unit Head and MDT**

1. The MDT must conduct a review of all inmates assigned to RHU, Alt-GP, SD-1, and SD-2 status, every seven days to monitor the appropriateness of the inmate's status. The MDT will document their reviews on the *Multi-Disciplinary Team Hearing Docket 425_F8*.
 - a. The Facility Unit Head must sign a printed copy of the *Multi-Disciplinary Team Hearing Docket 425_F8* with a copy maintained as documentation in the inmate's Restorative Housing Unit file. (changed 7/1/24)
 - b. Additional inmates will be added to the *Multi-Disciplinary Team Hearing Docket 425_F8* as needed.
 2. The Facility Unit Head must conduct a weekly review of all inmates assigned to RHU, Alt-GP, SD-1, and SD-2 status, to include inmates on Restorative Housing, SD-1, and SD-2 status and will document their review on the *Facility Unit Head Restorative Housing Unit Docket – Weekly Review 425_F10*.
 - a. The Facility Unit Head will review:
 - i. The reasons why a less restrictive setting could not be utilized.
 - ii. An action plan for transitioning the inmate out of the Restorative Housing Unit as soon as safely as possible.
 - iii. The date and duration of the inmate's placement in the Restorative Housing Unit.
 - iv. The statutory basis for such placement; see COV §53.1-39.2, *Restorative housing; restrictions on use*.
 - b. Staff will place upload the *Facility Unit Head Restorative Housing Unit Docket – Weekly Review 425_F10* in the inmates Restorative Housing Unit file with a copy uploaded as an RHU Facility Note in VACORIS. (changed 7/1/24)
 3. The Facility Unit Head and MDT will review all inmates identified as HRSV or an alleged victim of sexual abuse to determine whether there is a continuing need for separation from full privileged general population. (§115.43[e], §115.68)
- B. The MDT will formally review an inmate's status at least once every 30 days while the inmate is assigned to the Restorative Housing Unit.**
1. Staff must notify the inmate of the formal hearing and their due process rights using the *Institutional Classification Authority Hearing Notification*
 2. The MDT will conduct a formal due process hearing and review the inmate's adjustment and behavior; see Operating Procedure 830.1, *Institution Classification Management*.
 - a. The MDT will evaluate the inmate and determine whether to recommend the inmate continue in their current housing status in the Restorative Housing Unit or be assigned to another status.
 - b. The MDT should base its recommendation on the reason for the assignment, the inmate's behavior, and any progress made on the transitional action plan and their treatment objectives.
 3. The MDT should determine whether the inmate poses an unacceptable risk to them self to include personal protection and keep separates in the general population, or is a threat to other inmates, staff,

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or the safe, secure operation of the institution.

4. The MDT may recommend a transfer to another institution when return to the full privilege general population at the institution is not appropriate.
5. The MDT must document specific details about the inmate's behavior, their recommendations related to the inmate's transitional action plan, and the specific comments made by the inmate during the MDT meeting, in the ICA module in VACORIS. (added 2/1/24)
6. When the MDT determines that an inmate's behavior or circumstances no longer warrant their current housing status in the Restorative Housing Unit, the MDT should recommend assignment to a different housing status in the Restorative Housing Unit, transfer to a higher or equal security level institution, or release to full privilege general population.
 - a. Upon completion of the *Multi-Disciplinary Team Hearing Docket 425 F8*, the Facility Unit Head will review the MDT recommendation for a housing status change.
 - b. If the Facility Unit Head approves the MDT's recommendation, the Records Manager or designee will schedule the inmate to be moved upon availability of bed space.
 - i. Inmates pending release to full privilege general population are not required to participate in programs.
 - ii. The inmate will remain on SD-2 status until release.
 - c. If the Facility Unit Head disapproves the MDT's recommendation, the inmate will remain on their current status and the MDT will conduct a formal review within the next 30 days.
- C. Inmates assigned to a Restorative Housing Unit in excess of 30 days should not be discharged directly to the community. (5-ACI-4B-29)
 1. If the inmate will be discharged from the Restorative Housing Unit, a request for approval must be submitted via email to the Statewide Special Program Manager for Restorative Housing. (changed 7/1/23)
 2. In addition to the release requirements mandated for all inmate in Operating Procedure 050.3, *Facility Release of Offenders*, Operating Procedure 720.3, *Health Maintenance Program*, and Operating Procedure 820.2, *Inmate Re-Entry Planning*, staff at a minimum must:
 - a. Develop a release plan tailored to specific needs of the inmate.
 - b. Notify the inmate's supervising P&P Office who will contact state and local law enforcement.
 - c. Notify the releasing inmate of applicable community resources.
 - d. Notify the Victim through Victim Services, if applicable.
- D. The MDT may conduct a formal ICA hearing any time a significant change in circumstances or the inmate's behavior warrants a review; see Operating Procedure 830.1, *Institution Classification Management*.

VIII. Restorative Housing Unit Operational Management

A. Staff Selection and Training

1. Staff working directly with inmates in the Restorative Housing Unit on a regular and daily basis should be selected based on the following considerations:
 - a. Must be a Certified Corrections Officer; should have at least one year's experience as a Corrections Officer.
 - b. Must be able to perform physical activities required for the post.
 - c. Must demonstrate ability to effectively communicate and respond appropriately to difficult inmates.
 - d. Must demonstrate the ability to react appropriately in stressful situations.
 - e. Must demonstrate at least satisfactory job performance.

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- f. Must have completed of required mental health training.
 2. Supervisors should closely monitor performance and morale to determine when a Corrections Officer needs to be rotated to a less stressful post.
 3. A Mental Health Clinician will develop, review, and provide a written mental health training program to non-mental health services staff assigned to work in Restorative Housing Units.
 - a. Staff must complete their training as soon as possible; no later than nine months after their assignment to the Restorative Housing Unit.
 - b. Following completion of the training, staff must complete a minimum of one day of in-service training every two years related to mental health issues.
- B. Restorative Housing Unit Staff Duties and Responsibilities
1. Corrections Officers will maintain a permanent log to record routine information, emergency situations, and unusual incidents. (5-ACI-4A-14)
 - a. In smaller Restorative Housing Unit, staff may record information in a general logbook, while staff in larger Restorative Housing Units may be required to use separate logbooks for Floor Officers, Control Room Officers, and to record ADO, Security Supervisor, Qualified Health Care Personnel, Mental Health Clinician, Chaplain, treatment staff, etc. visits.
 - b. Post orders will designate the post(s) responsible for maintaining Restorative Housing Unit logbook(s).
 2. Corrections Officers will initiate and maintain an organized Restorative Housing Unit file for each inmate containing all completed documents in the appropriate section as listed on Attachment 2, *Restorative Housing Unit-File Organization* file. (5-ACI-4A-19, 5-ACI-4B-19)
 - a. A new Restorative Housing Unit file must be started with each new period of assignment to the Restorative Housing Unit. (added 2/1/24)
 - b. ~~The Restorative Housing Unit Manager, the IPM, or RHU Security Supervisor will audit each inmate's Restorative Housing Unit file weekly to review the file for required documentation and proper organization and will document their audit on the Restorative Housing Unit File Audit 425_F12. (added 2/1/24, deleted 7/1/24)~~
 - c. ~~When an inmate is released from the Restorative Housing Unit, the Restorative Housing Unit Manager will conduct a final audit of the inmate's file and will document their audit on the Restorative Housing Unit File Audit 425_F12. (deleted 7/1/24)~~
 - d. Staff will retain Restorative Housing Unit files in accordance with the applicable *Records Retention and Disposition Schedule*; see Operating Procedure 025.3, *Public Records Retention and Disposition*.
 3. Corrections Officers should complete a *Restorative Housing Unit: Shift Report 425_F2* for each housing area on each shift to pass significant information to the next shift, to the Restorative Housing Unit Supervisor, and the Chief of Security as directed in post orders.
 4. A Corrections Officer must check each inmate assigned to RHU status twice per hour, no more than 40 minutes apart, on an irregular schedule, with each check recorded on the *Individual Inmate Log 425_F4*. (5-ACI-4B-11)
 - a. Corrections Officers should check inmates assigned to SD-1 or SD-2 status on a similar schedule with each check documented in a logbook. Use of the *Individual Inmate Log 425_F4* or use of an institution specific inmate log is not permitted.
 - b. Corrections Officers will conduct more frequent checks or maintain continuous observation of inmates who are violent, mentally disordered, demonstrate unusual or bizarre behavior, or are suicidal; see Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.
 5. Corrections Officers will maintain a permanent *Individual Inmate Log 425_F4* on each inmate

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assigned to RHU status. (5-ACI-4B-11)

- a. The *Individual Inmate Log* will show:
 - i. Date of admission and weight of the inmate upon entering and leaving.
 - ii. Special conditions such as diet, recreation.
 - iii. Precautions for "at risk" inmates.
 - iv. Date and time of twice hourly checks and the initials of the Corrections Officer conducting the check.
 - v. Other pertinent information.
 - b. Corrections Officer will use the *Individual Inmate Log*; it is the only log approved for this purpose.
 - c. When an inmate is placed on precautions, the *Individual Inmate Log* will be suspended, and Corrections Officers will use the *Special Watch Log 425_F5* for the duration of the precautions using a new page for each day.
6. Corrections Officers must strip search each inmate before the inmate is removed or allowed to leave their cell. A Corrections Officer must frisk the inmate, immediately after removal from their cell or other secure area and prior to return the inmate to their cell.
 7. A Corrections Officer must search all items entering the Restorative Housing Unit to detect and eliminate contraband.
 8. Corrections Officers must restrain, and escort inmates based on their security level and status as follows any deviation from the restraint requirements must be approved by the Chief of Security or higher authority.
 - a. RHU Status
 - i. At Security Level 3 institutions and above
 - (a) Corrections Officers must restrain the inmate in handcuffs with their hands behind their back and leg irons when the inmate is outside a secure area; see Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*, for exceptions that allow restraints in front with use of a waist chain.
 - (b) Two certified Corrections Officers must escort the inmate.
 - ii. At Security Level 2 institutions
 - (a) Corrections Officers must restrain inmate in handcuffs when the inmate is outside the cell or other secured area.
 - (b) Two certified Corrections Officers must escort the inmate if the handcuffs are applied behind their back.
 - (c) One Corrections Officer may escort the inmate if the handcuffs are applied in the front.
 - b. SD-1 Status
 - i. At Security Level 4 and above institutions, two certified Corrections Officers must restrain and escort the inmate in handcuffs.
 - ii. At Security Level 3 institutions, two certified Corrections Officers may move inmates within the Restorative Housing Unit without restraints and without direct escort.
 - c. SD-2 and Alt-GP Status (added 2/1/24)

Inmates on SD-2 status ~~may~~ **should** be moved within the unit without restraints and without direct escort by one certified Corrections Officer. (changed 2/1/24)
 - d. Door Tether
 - i. At Security Level 4 and above institutions, Corrections Officers may use an approved tether to apply and remove the restraints at the door of a secured area i.e., cell, shower, and for escort.
 - ii. At Security Level 3 and below institutions, Corrections Officers must only use the tether to apply and remove restraints, the tether must not be used for escort.
 9. Corrections Officers will only remove one inmate out of a secure area at a time unless each inmate is restrained with separate security escorts.

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- a. With approval of the Facility Unit Head, Staff will make an exception ~~may be made~~ for inmates assigned to SD-1 (SL3), SD-2, and Alt-GP status who are participating in activities and programs ~~small group programs (SD 2 – maximum ten inmates)~~ within the Restorative Housing Unit. (changed 2/1/24)
 - b. Corrections Officers must keep inmates apart from all known keep separates. Protective custody inmates and their keep separates must be housed in separate cells and have no direct contact unless both inmates are restrained with separate security escorts.
10. A Corrections Officer must inspect each Restorative Housing Unit cell prior to the inmate's initial placement in the cell and when an inmate is removed upon the inmate's removal from the cell and will document the results of the inspection on the *Cell Inspection Checklist 425 F13*. (changed 7/1/23)
 - a. This inspection is a general review of sanitation conditions and scan for contraband; one Corrections Officer may conduct the cell inspection and the inmate need not be present.
 - b. The Corrections Officer must document they completed a thorough search and inspection of the cell before another inmate is moved into the cell.
 11. A Corrections Officer must inspect and search inmate recreation areas prior to use.
 - a. Special attention is paid to the condition of fence ties, metal braces, and fence fabric integrity.
 - b. The Corrections Officer should document their inspections in a logbook.
 12. Corrections Officer must search (strip search for Security Level 3 and higher) inmate workers upon entering and exiting the Restorative Housing Unit.
 - a. Inmates from other general population housing units may provide housekeeping and other services in the Restorative Housing Unit if specifically authorized by the Chief of Security.
 - b. A Corrections Officer must always maintain direct supervision of the inmate.
 - c. Inmate workers must not have physical contact with a Restorative Housing Unit inmate except as required for services rendered, i.e., barber.
 13. Prior to inmate movement for showers, and/or outside recreation, and out-of-cell time, a Security Supervisor during their rounds will determine which of the inmates wants to take a shower, and/or participate in outside recreation or other meaningful out-of-cell time. (changed 2/1/24)
 - a. The Security Supervisor will blow their whistle and make an announcement to alert the inmates of their presence before making their round.
 - b. The Security Supervisor will ask each inmate individually if they wish to participate in ~~outside recreation-meaningful out-of-cell time~~ and will record this interaction on the Body Worn Camera (BWC). (added 7/1/23, changed 2/1/24)
 - c. During the round, the Security Supervisor will compile a written list of those inmates who indicate that they wish to ~~shower and/or participate in outside recreation~~; the list of participating inmates must be documented in a logbook. (changed 2/1/24)
 - d. Corrections Officers will move inmates to and from the showers.
 14. The Shift Commander or higher authority will visit the Restorative Housing Unit daily and will record the visit the logbook.

IX. Restorative Housing Unit Orientation, Services, and General Living Conditions

- A. Staff will provide all inmates upon their placement in the Restorative Housing Unit with written orientation materials, on the services available and how to access them.
 1. During orientation staff will provide, at a minimum, the following institution specific information:
 - a. How to access legal services.
 - b. How to access telephone services including legal and emergency calls.
 - c. How to access counseling services and program staff upon request and for emergencies.

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- d. How to access the Chaplain or other available religious services.
2. Each inmate must sign an institution specific document confirming their receipt of the written orientation materials.
- B. In general, the living conditions for inmates placed in the Restorative Housing Unit approximate the living conditions provided to inmates in full privilege general population, but there are certain exceptions. All exceptions are clearly documented in this operating procedure.
 1. Housing Conditions
 - a. Restorative Housing Unit cells/rooms should be well ventilated, adequately lighted, appropriately heated and should always be maintained in a sanitary condition.
 - b. Inmates can converse with and be observed by staff while in their cell/room.
 - c. Except in an emergency, the number of inmates confined to each cell/room should not exceed the number for which it is designed, usually one inmate per cell/room.
 - i. With the approval of the Facility Unit Head, in cells with proper equipment, suitable inmates in SD-2 status may be double bunked if the inmates are screened using the *Cell Compatibility Assessment*.
 - ii. If in an emergency the number of inmates exceeds the design capacity, the Facility Unit Head, or designee, should provide temporary written approval for staff to exceed the design capacity, and alleviate the situation as promptly as possible by providing other housing for the inmates so confined.
 - d. Treatment staff have space available to them inside the Restorative Housing Unit or external to the unit for consultation with inmates.
 - e. All housing areas in the Restorative Housing Unit, to include cells housing inmates identified as potentially suicidal, have readily accessible equipment, and supplies necessary in an emergency.
 2. Inmate Correspondence
 - a. Inmates are generally subject to the same correspondence regulations and privileges as inmates assigned to full privilege general population; see Operating Procedure 803.1, *Inmate and Probationer/Parolee Correspondence*.
 - b. Secure messaging is a privilege, staff will not provide inmates on RHU status access to a kiosk to retrieve or send their secure messages; when feasible, inmates assigned to SD-1 and SD-2 status will be provided access the kiosk.
 3. Inmate Packages
 - a. Inmates will not receive the contents of packages unless approved by the Facility Unit Head.
 - b. Staff may store disapproved items if the items are approved for full privilege general population; disapproved items will be returned to the sender at the expense of the inmate or the sender, or disposed of in accordance with Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 4. Inmate Meals
 - a. Staff must not use food as a disciplinary measure; punitive diets i.e., bread and water are prohibited.
 - b. Staff will provide inmates with the same number and type of meals served to full privilege general population.
 - i. Inmates on a religious will be provided their religious diets meal trays if the meals are available at that institution.
 - ii. Inmates not on a religious diet will designate whether they want to receive regular or alternate entrée meal trays.
 - c. The Restorative Housing Unit Supervisor must allow inmates the opportunity to change their chosen meal tray every 90 days that they remain in a Restorative Housing Unit.
 - d. Staff will manage inmates who refuse to eat and abuse tray or food products served to them in

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

5. Legal Access

- a. Inmates are not prohibited from conducting litigation on their own behalf; staff will afford inmates with access to the Facility Court Appointed Attorney and to law library materials; see Operating Procedure 866.3, *Inmate and CCAP Probationer/Parolee Legal Access*.
- b. Attorney visits will occur during normal working hours of the institution unless otherwise approved by the Facility Unit Head or designee; see Operating Procedure 851.1, *Visiting Privileges*.
- c. Inmates will conduct legal calls through the telephone system; see Operating Procedure 866.3, *Inmate and CCAP Probationer/Parolee Legal Access*.

6. Telephone Services

- a. Staff will allow inmates to place telephone calls in accordance with Operating Procedure 803.3, *Inmate and CCAP Probationer/Parolee Telephone Service*.
- b. Inmates are allowed access to the telephone system based on their housing status:
 - i. RHU status inmates are allowed two calls per month.
 - ii. SD-1 status inmates are allowed four calls per month.
 - iii. SD-2 status inmates are allowed six calls per month.

C. Staff will provide inmates with laundry, clothing, bedding, and linen exchange, barbering, and hair care services and access to privileges, and work opportunities to the extent possible while ensuring the inmate's safety.

1. Staff must provide all inmates clothing that is not degrading, linen, and bedding upon the inmate's placement in the Restorative Housing Unit.
 - a. Staff will strip search the inmate, remove any inmate personal clothing, and issue the required state clothing, linen, and bedding; see Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 - b. At least three times per week, staff must issue clean state clothing so that such clothing is immediately available when an inmate removes their dirty clothes to be laundered.
 - c. Staff will issue a clean washcloth and towel on a one-for-one exchange basis when the inmate takes a shower or during a weekly linen exchange.
 - i. Linens must be exchanged weekly.
 - ii. Blankets will be exchanged as needed per the institution's schedule.
 - d. At the discretion of the Facility Unit Head, inmates may be issued the required amount of state clothing, wash clothes, towels, and linens on a weekly basis.
2. Staff will provide inmates with the opportunity to shower and shave not less than three times each week and to sponge bathe whenever they choose.
 - a. Staff will allow inmates to possess a reasonable quantity of personal hygiene items consistent with the security needs of the institution and as determined by the Facility Unit Head. The following personal hygiene items are not permitted:
 - i. Personal toothbrushes.
 - ii. Oils and lotions, except prayer oil.
 - iii. Razors.
 - b. Because inmates can easily use toothbrushes and razors as a weapon, staff will provide inmates with these items.
 - i. If the institution provides inmate's access to an electric razor, the razor should be cordless with removable cutting heads. Cutting heads and screen covers should be sanitized after each use by soaking in a solution of suitable disinfectant in accordance with manufacturer's instructions.
 - ii. If disposable razors are provided:

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- (a) The type of razor provided should be consistent with the security level of the institution; see Attachment 3, *Authorized Security Razor*.
 - (b) Staff should ensure the inmate does not destroy the razor and use the blade to create a weapon or cause self-harm by inspecting the razor after use to ensure the inmate has not tampered with the razor and the blade is present.
 - (c) Staff must use an accountability system to ensure the same disposable razor is not issued to more than one inmate.
 - c. Inmates will be allowed to take only the minimum hygiene items needed with them to shower. If the inmate does not have basic personal hygiene items and is indigent, staff should furnish them.
- 3. Staff must ensure barbering and hair care services are available on a regular basis; see Operating Procedure 801.6, *Inmate and CCAP Probationer/Parolee Services*.
- 4. Personal Property
 - a. Inmates will have access to basic personal items for use in their cells unless there is imminent danger that the inmate or any other inmate(s) will destroy an item, use it as a weapon or instrument of escape, or induce self-injury.
 - b. A Corrections Officer and the inmate, or two Corrections Officers in the inmate's absence, will inventory all personal property items when an inmate is placed in the Restorative Housing Unit; see Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 - i. Staff will issue only those items authorized on the appropriate *Authorized Personal Property Matrix*.
 - ii. In addition to property items allowed on the *Authorized Personal Property Matrix*, inmates assigned to SD-2 status, will be permitted to purchase consumable food items sold through the institution's commissary.
 - c. Other personal property items that are not issued to the inmate but are allowed at the inmate's security level and current institution will be placed in storage. Any inmate personal clothing should be washed and when necessary disinfected before being placed in storage. (5-ACI-5D-11)
 - i. The inmate may submit a written request to receive their authorized personal property in storage i.e., hygiene items to replace items that have been consumed.
 - ii. Staff must document all property items removed from the inmate's property storage and issued to the inmate on the initial inventory completed when the inmate was placed in the Restorative Housing Unit.
 - d. Staff will give the inmate a copy of the property inventory and the inmate must sign for all property issued to them while assigned to the Restorative Housing Unit.
 - e. Inmates will only be allowed to purchase personal property items listed on the appropriate *Authorized Personal Property Matrix* while in the Restorative Housing Unit.
 - i. Staff will hold pre-approved personal property items received but not authorized in Personal Property and will issue these items to the inmate upon their return to full privilege general population.
 - (a) The Personal Property Officer will notify the inmate using the *Personal Property Request - Add/Drop* 802_F1.
 - (b) The inmate will not be allowed to view, try-on, or examine this property.
 - ii. The Restorative Housing Unit Supervisor will be notified when an inmate will be returned to full privilege general population and will have the inmate's property ready for issuance to the inmate. The inmate must sign for the property.
- 5. Visiting Privileges
 - a. Inmates will have opportunities for visitation unless there are substantial reasons for withholding such privileges.
 - b. The Facility Unit Head determines the visitation schedule based on available staff and resources.
 - i. Staff should provide inmates a maximum of one visit per week for one hour with no more than

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five visitors.

- ii. The Facility Unit Head may set a lower limit on the number of visitors due to space limitations.
- iii. Unless the Facility Unit Head approves otherwise, visitation will be non-contact.

D. Within the resources available, unless security or safety considerations dictate otherwise, staff will provide inmates with meaningful access to programs such as Interactive Journals and group elective options, educational services, commissary services, library services, social services, treatment services, religious guidance, and recreation programs.

1. Interactive Journals and Group Electives

- a. Inmates will complete one hour of Interactive Journaling with group facilitation twice per week.
- b. Daily group elective options will be provided during non-programming days.

2. Commissary

- a. Commissary orders will be taken at least three times per month on scheduled days.
- b. Inmates are allowed a \$45.00 spend limit per month. Inmates on SD-2 status will be allowed an additional \$15.00 per month of consumable items.
- c. Glass, metal, and other hazardous containers or products may be restricted if determined by the institution to pose a risk to security.
- d. Security writing instruments should be provided by the institution. Inmates assigned to a Restorative Housing Unit more than 30 days may be required to purchase personal security writing instruments after the initial issue.
- e. A list of approved commissary items should be available in the Restorative Housing Unit.

3. Educational and Library Book Services

- a. Inmates will have access to library books for personal use see Operating Procedure 801.6, *Inmate and CCAP Probationer/Parolee Services*.
- b. Inmates will have access to educational services as determined by the institution Principal.

4. Counseling Services

At a minimum, each inmate on RHU status will receive a weekly visit from treatment staff.

5. Religious Guidance

- a. Inmates are afforded access to religious guidance.
- b. Inmates may request visits from spiritual leaders in accordance with Operating Procedure 851.1, *Visiting Privileges*.

6. **Meaningful** Out of Cell Activity (added 2/1/24)

- a. All inmates in the Restorative Housing Unit will be offered a minimum of four hours of **meaningful** out of cell activity, cell programmatic interventions, or other congregate activities per day aimed at promoting personal development or addressing underlying causes of problematic behavior. (changed 2/1/24)
 - i. Out of cell time may include recreation in a congregate setting unless exceptional circumstances mean that doing so would create significant and unreasonable risk to the safety and security of other incarcerated persons, the staff, or the institution.
 - ii. Staff may offer an inmate less than four hours of out-of-cell programmatic interventions or other congregate activities per day only when the Facility Unit Head determines a lockdown is required to ensure the safety of the institution.
 - iii. Staff are encouraged to utilize trained and carefully selected peer mentors to assist with facilitating out-of-cell programs and activities in RHU settings. (added 7/1/24)

b. Recreation and Programs

- i. A record will be made in both the Restorative Housing Unit logbook and the inmate's *Out of Cell Activity Log 425_F11* when recreation or out-of-cell programming is accepted or refused.

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- ii. Staff will randomly assign recreation modules and secure chairs or tables.
 - iii. A Corrections Officer must be posted to patrol the recreation area when occupied by inmates.
- E. Staff will provide inmates on Alt-GP status with similar opportunities for activities, movement, and social interactions as provided to inmates in general population, taking into consideration the inmate's safety and the safety of others. Staff will manage inmates on Alt-GP status with the same movement and privileges afforded to inmates in SD-2 status.
- F. Staff must provide security Level S inmates housed in the Restorative Housing Unit more than 90 consecutive days (SM-Special Management) or 180 consecutive days (IM-Intensive Management) with adequate recreation, program services, and privileges consistent with the requirements of the Red Onion State Prison/Wallens Ridge State Prison local operating procedure addressing the *Restorative Housing Reduction Step-Down Plan*.
- G. The Shift Commander must approve any exception to the normally provided living conditions, activities, and services.
- 1. The Shift Commander must record all exceptions ~~must be recorded in the logbook and on a *Denial of Activity or Service* 425_F3, for inmates assigned to RHU status. (5-ACI-4A-19, 5-ACI-4B-19)~~ (changed 2/1/24)
 - 2. Shift Commanders may not approve any exceptions related to meaningful out of cell activity requirements. (added 2/1/24)
- H. If access to activities and services is more restrictive for inmates identified as HRSV or who have alleged to have suffered sexual abuse or sexual harassment than for others in their housing status, staff must document the opportunities that have been limited, the duration of the limitation and the reasons for such limitations on the *Denial of Activity or Service* 425_F3. (5-ACI-4A-19; §115.43[b], §115.68)

X. Restorative Housing Unit Oversight and Audits (added 7/1/24)**A. Restorative Housing Unit Files**

- 1. The Restorative Housing Unit Manager, the IPM, or RHU Security Supervisor will audit each inmate's Restorative Housing Unit file weekly to review the file for required documentation and proper organization and will document their audit on the Restorative Housing Unit File Audit 425_F12. (added 2/1/24)
- 2. When an inmate is released from the Restorative Housing Unit, the Restorative Housing Unit Manager will conduct a final audit of the inmate's file and will document their audit on the *Restorative Housing Unit File Audit* 425_F12.

B. Restorative Housing Unit Program Internal Audit

- 1. RHU program internal audits will occur on a quarterly basis in accordance with Attachment 4, *Restorative Housing Unit – Quarterly Audit Process*.
- 2. Staff must retain all documentation related to RHU program internal audits in accordance with the applicable Library of Virginia, *Records Retention and Disposition Schedule*; see Operating Procedure 025.3, *Public Records Retention and Disposition*.

REFERENCES

[COV §53.1-39.2, *Restorative housing: restrictions on use*](#) (added 2/1/24)

[Operating Procedure 025.3, *Public Records Retention and Disposition*](#)

[Operating Procedure 050.3, *Facility Release of Offenders*](#)

[Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*](#) (Restricted)

[Operating Procedure 720.1, *Access to Health Services*](#)

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[Operating Procedure 720.2, *Medical Screening, Classification, and Levels of Care*](#)

[Operating Procedure 720.3, *Health Maintenance Program*](#)

[Operating Procedure 720.5, *Pharmacy Services*](#)

[Operating Procedure 730.2, *Mental Health and Wellness Services: Screening, Assessment, and Classification*](#)

[Operating Procedure 730.3, *Mental Health Services: Levels of Service*](#)

[Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*](#)

[Operating Procedure 801.6, *Inmate and CCAP Probationer/Parolee Services*](#)

[Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*](#)

[Operating Procedure 803.1, *Inmate and Probationer/Parolee Correspondence*](#)

[Operating Procedure 803.3, *Inmate and CCAP Probationer/Parolee Telephone Services*](#)

[Operating Procedure 810.1, *Inmate Reception and Classification*](#)

[Operating Procedure 810.2, *Transferred Inmate Receiving and Orientation*](#)

[Operating Procedure 820.2, *Inmate Re-Entry Planning*](#)

[Operating Procedure 830.1, *Institution Classification Management*](#)

[Operating Procedure 830.3, *Good Time Awards*](#)

[Operating Procedure 830.5, *Transfers, Institution Reassignments*](#)

[Operating Procedure 841.4, *Restorative Housing Units*](#)

[Operating Procedure 851.1, *Visiting Privileges*](#)

[Operating Procedure 861.1, *Offender Discipline, Institutions*](#)

[Operating Procedure 866.3, *Inmate and CCAP Probationer/Parolee Legal Access*](#)

ATTACHMENTS

[Attachment 1, *Cool Down Space Operations Plan*](#)

[Attachment 2, *Restorative Housing Unit-File Organization*](#)

[Attachment 3, *Authorized Security Razor*](#)

[Attachment 4, *Restorative Housing Unit – Quarterly Audit Process*](#) (added 7/1/24)

FORM CITATIONS

[*Intra-Regional Transfer Authorization* 050_F8](#)

[*Restorative Housing Unit: Shift Report* 425_F2](#)

[*Denial of Activity or Service* 425_F3](#)

[*Individual Inmate Log* 425_F4](#)

[*Special Watch Log* 425_F5](#)

[*Sexual Abuse/Sexual Harassment Available Alternatives Assessment* 425_F6](#)

[*Serious Mental Illness \(SMI\) 28 Day Exemption Request* 425_F7](#)

[*Multi-Disciplinary Team Hearing Docket* 425_F8](#)

[*Facility Unit Head Restorative Housing Unit Docket: Weekly Review* 425_F10](#)

[*Out of Cell Activity Log* 425_F11](#)

[*Restorative Housing Unit File Audit* 425_F12](#)

[*Cell Inspection Checklist* 425_F13](#) (added 7/1/23)

[*Health Screening - Health-Trained Staff* 720_F10](#)

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[Health Services "At Risk" Physical Screening 720_F18](#)

[Mental Health and Wellness Services Screening 730_F12](#)

["At Risk" Inmate Notification 730_F13](#)

[Mental Health Serious Mental Illness \(SMI\) Determination 730_F34](#)

[Personal Property Request Add/Drop 802_F1](#)

~~Responsible Behavior Goals Progress Report 841_F22~~ (deleted 2/1/24)

[Informed Voluntary Request for Restorative Housing Unit 841_F28](#)

[Written Complaint 866_F3](#)

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Virginia Department of Corrections

Inmate Management and Programs

Operating Procedure 830.5

Transfers, Institution Reassignments

Authority:

Directive 830, *Classification Management*

Effective Date: January 1, 2024

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Supersedes:

Operating Procedure 830.5, November 1, 2020

Access: ☐ Restricted ☒ Public ☒ Inmate

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4-ACRS-5A-14[I]; §115.43, §115.68

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		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.

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

Annual Review - A uniform yearly review of an inmate's classification, needs, and objectives. The Initial Classification Date (ICD) is used to establish the review date for an inmate received on or after February 1, 2006. The Custody Responsibility Date (CRD) is used to establish the review date for an inmate received prior to February 1, 2006.

Behavioral Correction Program (BCP) - Requires a court referral to CCS prior to sentencing, is a specific sentence into CTC that allows for the potential of a sentence suspension and release on Probation after an inmate's successful completion of a minimum of 24 months in CTC.

Central Classification Services (CCS) - Staff members from the Offender Management Services Unit who review certain recommendations made by the Institutional Classification Authority and Multi-Disciplinary Team to render a final decision regarding inmate statuses and assignments.

Cognitive Therapeutic Community (CTC) - A structured, residential substance use disorder treatment program that incorporates cognitive and behavioral programming to aid in the recovery from alcohol and other drug addictions.

Detainer - Any form of legal hold placed on an inmate or probationer/parolee by another jurisdiction, where the effect is that an inmate or probationer/parolee will not be released upon completion of confinement, because that jurisdiction intends to take physical custody of the inmate or probationer/parolee. A legal hold may be filed by federal, state, or local authorities and will include: Detainers for arraignment or prosecution of untried charges; Judgment & Commitment Orders for an un-served sentence; Non-Detainer Holds to serve the balance of a sentence subsequent to escape, or revocation of parole/probation; or any form of Notify or Hold Request filed by the U.S. Immigration & Customs Enforcement (ICE).

Emergency Transfer - Temporary movement found necessary to protect inmates and staff from imminent danger of physical harm, to prohibit inmates from destruction of state property, and/or escape.

High Risk Sexual Victim (HRSV) - As identified by the Classification Assessment and Mental Health Clinician assessment, any inmate/probationer/parolee confirmed as a sexual victim or identified as being at high risk of being sexually victimized.

Initial Classification Date (ICD) - The date on which the inmate was initially assigned to a security level.

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 Classification Authority (ICA) - The institutional employee designated to conduct inmate case review hearings.

Mental Health Classification Code - A numeric code assigned to an inmate by a Mental Health Clinician that reflects the inmate's current mental health status and mental health and wellness service needs; the coding system is hierarchical, ranging from MH-0 representing no current need for mental health and wellness services to MH-4S representing the greatest need for mental health and wellness services.

Multi-Disciplinary Team (MDT) - MDT members are responsible to review individual inmates related to restorative housing and step-down statuses and act as the Institutional Classification Authority to make recommendations for housing status, transfer, security level, good time class, etc.; decisions are the responsibilities of the Facility Unit Head and Regional Administrator.

Multi-Institution Treatment Team (MITT) - Staff responsible for assigning an inmate to one of the Secure Diversionary Treatment Programs and transitioning inmates to other SDTP programming and out to a non - SDTP general population setting upon completion of programming.

Protective Custody - A classification status for inmates requesting or requiring separation from other inmates because of their personal security needs.

Protective Custody Unit - A special purpose general population housing unit designated by the Director for inmates classified as requiring separation from other inmates as a result of their personal security needs; inmates requesting and requiring assignment to a Protective Custody Unit may be managed in the Restorative Housing

Unit, pending assignment and transfer.

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.

Secure Diversionary Treatment Program (SDTP) - A residential programming unit with bed assignments designated for eligible inmates who are classified as Seriously Mentally ill, and who meet the criteria for program admission. The SDTP is a formalized program that operates within structured security regulations and procedures, and provides for programming and treatment services conducive with evidence based treatment protocols and individualized treatment plans.

Serious Mental Illness (SMI) - Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified mental health clinician.

- **Psychological** - as relating to the mental and emotional state of an individual.
- **Cognitive** - as relating to cognitive or intellectual abilities.
- **Behavioral** - as relating to actions or reactions in response to external or internal stimuli that is observable and measurable.

Shared Allied Management (SAM) Unit - A residential programming unit operated at designated institutions to deliver intensive services in a safe environment to specific inmate populations that typically require a high level of services from security, mental health, and wellness services, and/or health services staff.

Shared Allied Management (SAM) Unit Committee - A committee that is responsible for making decisions on inmate admissions, removals, pathway assignments, treatment plans, and the overall status and stability of the SAM Unit including unit operations and culture.

Special Program Manager for Diversionary Housing - A member of the MITT responsible for gathering and organizing documentation for SDTP referrals and coordinating the inmate review, approval, and assignment process.

Steps to Achieve Reintegration (STAR) Program - A program operated at designated institutions for inmates, who motivated by unspecified fear, refuse to leave restorative housing, and enter general population.

Voluntary Substance Use Disorder Treatment (V-SUDT) - A voluntary substance use disorder program for inmates who used or possessed alcohol or drugs for their own use within 30-days prior to the request for admission.

PURPOSE

This operating procedure governs inmate requests for and management of inmate transfers and reassignments in Department of Corrections (DOC) institutions.

PROCEDURE**I. Inmate Transfers**

- A. Staff must coordinate all inmate transfers through Central Transportation Services except where otherwise specified in this operating procedure.
- B. Inmates pending a transfer may be housed in an institution with a higher or lower security level designation than the inmate's assigned security level.
 - 1. Inmates who are pending transfer to a higher or lower security level institution are transferred once bed space becomes available.
 - 2. Inmate transfers from a lower to higher security level institution have priority over inmate transfers from a higher to a lower security level institution.
- C. Transfer of Inmate Records:
 - 1. The inmate's criminal record (facility folder or historical hardcopy record), health record, and any prescribed medication orders must accompany the inmate on transfer to another institution. This does not apply to temporary transfers to hospitals or to local jail facilities to facilitate court appearances.
 - 2. The Records Manager or a records staff member must complete the *Interdepartmental Transfer Notice (CA4) 050_F9* and attach it to the outside of the envelope containing the facility folder or historical hardcopy record and the health record; see Operating Procedure 050.3, *Facility Release*.
 - 3. The Facility Unit Head or their designee at the receiving institution is not required to accept custody of the inmate without the complete facility folder or historical hardcopy record as applicable.

II. Population Management Transfers

- A. Central Classification Services (CCS) may administratively reassign inmates to other institutions without an Institutional Classification Authority (ICA) hearing for the purposes of managing the inmate population.
 - 1. Inmates administratively transferred to an institution are not required to meet the eligibility criteria of one year at present institutional assignment to request a transfer during their next annual review.
 - 2. Staff may submit the inmate's transfer request at their annual review to CCS for final review.
- B. CCS may assign inmates temporarily to institutions that are not the same security level as the inmate for the purpose of interviews, courts, health care, mental health, security, special work assignments, etc. Staff will coordinate the inmate's transportation through the routine Central Transportation Services schedule, if possible.
- C. The Director of Offender Management Services has authorized the Facility Unit Heads at specific parent/host institutions to temporarily transfer eligible and suitable inmates to adjacent Work Centers.
 - 1. The Facility Unit Head or designee must complete an *Intra-Regional Transfer Authorization 050_F8*; see Operating Procedure 050.3, *Facility Release*.
 - 2. Staff must notify the Transportation Coordinator by telephone or email, and forward copies of the *Intra-Regional Transfer Authorization 050_F8* to Central Transportation Services, the parent/host institution's Records Office, and the receiving Work Center prior to physical movement of the inmate.

III. Inmate Requested Transfer

- A. General population inmates, other than youthful inmates, and protective custody inmates, may request a transfer during their annual review to an equal security level institution provided their security level does not change due to the annual review.
- B. Inmates must meet the following criteria to request a transfer:
 - 1. Be assigned to a general population setting.
 - 2. Have been at their present assignment for a minimum of one year; not required for an inmate administratively transferred for population management.
 - 3. Be currently assigned to Security Level W, 1, 2, 3, or 4.
 - 4. Be Good Time Class Level I or II or the equivalent.
 - 5. Not have been convicted of any disciplinary infractions within the past 12 months.
 - 6. Not have been convicted of an offense code 100 through 108 or 198 related to any 100-108 offense codes within the past 24 months.
- C. Inmates, whose security level is reduced as the result of their annual review, are usually transferred to an institution appropriate to their newly assigned security level.
 - 1. Staff should note the inmate's preferences for transfer in *Comments* and select the institutional assignment in the *Action Type - Transfer* section of the classification action module in VACORIS. If necessary, staff will escalate the transfer to CCS staff for review and final decision.
 - 2. Transfers as the result of security level reviews at the time of annual review do not require due process or a formal ICA Hearing.
 - 3. Inmate transfer requests to preferred locations must give way to considerations of space, security, and program availability.
 - 4. When an inmate is temporarily transferred to another institution for health care or mental health treatment, court appearance, etc., staff will conduct the inmate's annual review once the inmate returns to the sending institution.
 - a. Staff at the institution temporarily housing the inmate will not complete the inmate's annual review.
 - b. Staff should contact CCS for guidance in any extenuating circumstances.

IV. Field Unit and Work Center Transfers (5-ACI-5F-03; 4-ACRS-5A-14[I])

- A. Field Units and Work Centers are minimum security institutions designed to provide suitable confinement for lower risk inmates, increase productivity of inmates through work activity, and provide a cost-effective alternative to more traditional institution construction.
- B. Inmates who meet the eligibility criteria may request a transfer to a Field Unit or Work Center at the time of their annual review, or CCS staff may administratively review and assign an inmate to a Field Unit or Work Center upon determining that such an assignment is appropriate.
- C. Staff will escalate all transfer requests in VACORIS to CCS for review and a final decision.
- D. Inmate Eligibility Criteria for Field Unit or Work Center assignment:
 - 1. Security Level W
No Murder I, Sex Offense, Kidnap/Abduction, No Escapes within the last 10 years as defined in the *Institutional Assignment Criteria*, No Flight/Failure to Appear Pattern, No Felony Detainers. Felony convictions for Murder II, Voluntary Manslaughter, Robbery with Weapon Present or Implied, Malicious Wounding, Unlawful Wounding, Maiming, and Felonious Assault, including multiple convictions, will be considered on a case-by-case basis. Initial and reclassification 7 years or less, and no 100 series charges in the last six months.

2. Security Level 1

No Murder I (Unless approved by the Director of Offender Management Services), Sex Offense, Kidnap/Abduction, No Escapes within the last 10 years as defined in the *Institutional Assignment Criteria*, or Felony Detainers. Felony convictions for Murder II, Voluntary Manslaughter, Robbery w/Weapon Present or Implied, Malicious Wounding, Unlawful Wounding, Maiming and Felonious Assault, including multiple convictions, will be considered on a case-by-case basis. Initial and reclassification 12 years or less, and no 100 series charges in the last six months.

3. Good Time Class Level I or II or the equivalent

4. Medical Location Code A, B, or D, for psychotropic medications with Mental Health Classification Code of MH-X; see *Standard Treatment Guideline - Medical/Location Codes*.5. Mental Health Classification Code 0 or 1. Inmates assigned to MH 2 are considered on a case-by-case basis for assignment to a designated Field Unit or Work Center; see the *Designated Field Unit and Work Center - Psychiatric Services Guidelines* attachment to Operating Procedure 730.2, *Mental Health and Wellness Services: Screening, Assessment, and Classification*.

V. Cadre Assignment Transfers

A. Eligible inmates may request a cadre assignment at the time of their annual review or CCS staff may administratively review and assign an inmate to cadre once determined that such an assignment is appropriate.

B. Eligibility Criteria - Inmates must meet each of the following criteria to be reviewed for cadre:

1. Security Level W

No Murder I, Sex Offense, Kidnap/Abduction, No Escapes within the last 10 years as defined in the *Institutional Assignment Criteria*, No Flight/Failure to Appear Pattern, No Felony Detainers. Felony convictions for Murder II, Voluntary Manslaughter, Robbery with Weapon Present or Implied, Malicious Wounding, Unlawful Wounding, Maiming, and Felonious Assault, including multiple convictions, will be considered on a case-by-case basis.

2. Security Level 1

No Murder I (Unless approved by the Director of Offender Management Services), Sex Offense, Kidnap/Abduction, No Escapes within the last 10 years as defined in the *Institutional Assignment Criteria*, or Felony Detainers. Felony convictions for Murder II, Voluntary Manslaughter, Robbery w/Weapon Present or Implied, Malicious Wounding, Unlawful Wounding, Maiming and Felonious Assault, including multiple convictions, will be considered on a case-by-case basis.

3. Security Level 2

No Life+ or Multiple Life sentences, Single Life GCA sentences must have reached their PED. Single Life ESC sentences are not eligible for SL 2.

4. Good Time Class Level I or II or the equivalent

5. Medical Location Code A, B, or D, considered on a case-by-case basis.

6. Mental Health Classification Code 0, 1, or 2, considered on a case-by-case basis.

7. No disciplinary infractions in the past six months

C. Staff must notify CCS when an inmate is no longer eligible or suitable for a cadre assignment. Upon notification, CCS staff will review the inmate for an appropriate reassignment.

VI. Corrections Construction Unit (CCU), Environmental Services Unit (ESU), and Operational Maintenance Unit (OMU) Transfers

A. The CCU, ESU, and OMU are considered programs that also provide job skills and inmates may request

assignment to CCU, ESU, or OMU by sending a letter to the CCU, ESU, or OMU manager. The letter must include the inmate's name, DOC number, current institutional assignment, and a brief list of any training and skills useful to the CCU, ESU, or OMU.

Manager, Corrections Construction Unit
3600 Woods Way, Bld. 74
State Farm, VA 23160

Manager, Environment Services Unit
783 Prison Road
Boydton, VA 23917

Manager, Operational Maintenance Unit
6900 Atmore Drive, Room 3040
Richmond, Virginia 23225

B. The CCU, ESU, or OMU Manager will refer appropriate candidates to CCS for CCU, ESU, or OMU assignment. CCS staff will review each referral and approve or disapprove the inmate for assignment.

C. Type I "Unrestricted" Assignment

1. Inmates are permanently assigned to CCU, ESU, or OMU.
2. The CCU, ESU, or OMU manager may transfer inmates as needed throughout the state to various work sites for the length of time needed.
3. The CCU, ESU, or OMU Manager will coordinate with the Central Transportation Services for temporary assignments to other institutions.
4. Criteria
 - a. Security Level W
No Murder I, Sex Offense, Kidnap/Abduction, No Escapes within the last 10 years. No Flight/Fail to Appear Pattern, No Felony Detainers. Felony convictions for Murder II, Voluntary Manslaughter, Robbery w/Weapon Present or Implied. Malicious Wounding, Unlawful Wounding, Maiming and Felonious Assault, including multiple convictions, will be considered on a case-by-case basis.
 - b. Outside Work Classification I or II
 - c. Medical Location Code A or medically cleared for CCU, ESU, or OMU
 - d. Mental Health Classification Code 0
 - e. Not Adult Basic Education (ABE) Program eligible preferred but not required.
 - f. Within seven years of GTRD/ MPRD
 - g. Disciplinary convictions will be considered on a case-by-case basis.

D. Type II "Restricted" Assignment

1. Inmates are temporarily assigned to CCU, ESU, or OMU and are housed at a designated institution.
2. Inmates are restricted to work inside the security perimeter only.
3. Security Level 1-3

E. Inmates approved for the CCU, ESU, or OMU will complete the *Reentry Planning* interactive journal and view the video "*Money Smart: Making Cents of Your Finances*".

F. Staff must notify CCS when an inmate is no longer eligible or suitable for CCU, ESU, or OMU assignment. Upon notification that an inmate is no longer eligible or suitable for assignment, CCS staff will review the inmate for appropriate reassignment.

VII. Emergency Transfers

- A. In situations that require the immediate removal of an inmate from an institution, CCS staff, during business hours, or the Regional Administrator or Regional Duty Officer, during non-working hours, holidays, and weekends, may authorize the transfer of an inmate to any equal or higher security level institution.
 - 1. Emergency transfers will be in accordance with levels established in the *Institutional Assignment Criteria*.
 - 2. Such decisions may be made for security and health reasons only and must conform to the definition of *Emergency Transfer* in this operating procedure.
- B. The Facility Unit Head can coordinate the emergency transfer of inmates from their Work Center, Security Level 1 institution, or Deerfield Correctional Center to their parent/host institution using an *Intra-Regional Transfer Authorization 050_F8*; see Operating Procedure 050.3, *Facility Release*.
 - 1. If the Facility Unit Head of the parent/host institution accepts the inmate for transfer, no further authorization is necessary.
 - 2. The Facility Unit Head or designee must notify the Transportation Coordinator by telephone or email immediately.
 - 3. All inmate eligibility standards for assignment and ICA hearing requirements apply; see Operating Procedure 830.1, *Institution Classification Management*.
- C. Where possible, staff will assign inmates to vacant beds and will swap inmates only as a last resort.
 - 1. Staff should coordinate all emergency transfers with the Transportation Coordinator.
 - 2. The Regional Administrator or designee should contact, email is acceptable, the Transportation Coordinator the next business day to confirm that the transfer presents no conflict with already committed beds.
- D. All emergency transfer decisions are subject to review and approval by CCS staff. Staff must observe all formal ICA hearing requirements.
- E. Inmates Eligible for Emergency Transfer:
 - 1. Any inmate who cannot be safely controlled at their current institution while awaiting standard reclassification due to their disruptive or violent/aggressive infractions. These inmates should not be assigned to a general population status at time of transfer.
 - 2. Any inmate whose health care needs require immediate transfer to an institution with 24 hr. medical coverage, specialized medical equipment, or proximity to a major medical facility.
- F. Processing Emergency Transfers
 - 1. During normal business hours of 8:00 a.m. - 5:00 p.m. the Facility Unit Head or the Assistant Facility Unit Head will contact CCS to request an emergency transfer. (4-ACRS-5A-06[I])
 - 2. This Facility Unit Head or Assistant Facility Unit Head will provide a detailed written explanation of the rationale for the inmate's assignment to the Restorative Housing Unit, the need for an immediate transfer from their current institution, and a recommendation on the level of security housing needed for the inmate.
 - 3. CCS staff will issue a *Temporary Reclassification* to affect the necessary transfer.
- G. Processing Emergency Intra-Regional Transfers:
 - 1. During non-working hours, holidays, and weekends the Regional Administrator or Regional Duty Officer is responsible for determining whether an emergency transfer is necessary based on the Facility Unit Head's or Administrative Duty Officer's, in the Facility Unit Head's absence, request. (4-ACRS-

5A-06(I)

2. The Regional Administrator or designee will:
 - a. Ensure the inmate is eligible for transfer to the receiving institution based on the *Institutional Assignment Criteria*.
 - b. Ensure the sending institution completes a thorough records check for any documented keep separates, prior to the inmate's transfer, to ensure the transfer will not place the inmate in jeopardy.
3. Regional Office staff will maintain a permanent ledger or file of all emergency transfers approved at the regional level.
4. The Regional Administrator or designee must ensure institutional compliance with Operating Procedure 830.1, *Institution Classification Management*.
5. Staff must complete and distribute the *Intra-Regional Transfer Authorization* 050_F8, along with a detailed, written explanation of the need for an emergency transfer from the inmate's current institution; see Operating Procedure 050.3, *Facility Release*.
6. Staff must notify Central Transportation Services by telephone and fax or by emailing a copy of the *Intra-Regional Transfer Authorization* 050_F8 by 9:00 a.m. the following working day.
7. When an emergency transfer conflicts with a bed commitment, CCS staff, when possible, will select an alternate location on the first working day following the move.

H. Institution Responsibilities:

1. Staff at the sending institution will:
 - a. Provide CCS staff or the Regional Administrator, as applicable, with clear concise information regarding the need for an emergency transfer.
 - b. Conduct a record check for keep separates to ensure the inmate has no documented keep separates at the receiving institution.
 - c. Conduct an ICA hearing at the same time as the transfer when the inmate is transferred for assignment to a Restorative Housing Unit. When an ICA hearing cannot be conducted, staff at the sending institution will ensure at a minimum that the following is completed prior to the inmate's physical move:
 - i. The inmate will sign and receive a copy of the *Institutional Classification Authority Hearing Notification*, for their assignment to restorative housing, see Operating Procedure 830.1, *Institution Classification Management*.
 - ii. The Reporting Officer will provide a signed written statement describing the pertinent facts and action(s) taken concerning the incident that prompted or resulted in the emergency transfer.
 - d. Staff must forward the following documents to the receiving institution with the inmate's facility folder or historical hardcopy record at the time of transfer:
 - i. *Institutional Classification Authority Hearing* report indicating the reason for transfer.
 - ii. Reporting Officer's original written statement.
 - iii. Any untried disciplinary infractions as well as the originals of any infractions.
 - iv. *Disciplinary Offense Reports* that are pending possible inmate appeal action.
 - v. Other pertinent documents, statements and/or reports concerning the incident and/or transfer, e.g., keep separate lists or completed request sheets, ICA results, etc.
2. Staff at the receiving institution's will:
 - a. Notify the Facility Unit Head or their designee at the receiving institution of the pertinent facts surrounding the case.
 - b. Conduct an ICA hearing within three working days if an ICA hearing was not conducted prior to the inmate's physical transfer.
 - i. The ICA or MDT, as appropriate, may address whether the assignment is a temporary

- assignment pending the outcome of an investigation or disciplinary hearing or a permanent assignment, whichever is appropriate.
- ii. If the assignment is temporary pending completion of an investigation or disciplinary action, an additional ICA hearing will be required to address the inmate's permanent assignment.
- c. Ensure all procedural safeguards are observed per applicable operating procedures.
- 3. Staff conducting the ICA hearing will note in the VACORIS classification module under *Actions*:
 - a. That the inmate was temporarily transferred
 - b. The date of the transfer
 - c. The to and from transfer locations.
 - d. The specific reason(s) for the emergency transfer and recommendations for institutional assignment
- I. Central Classification Services Responsibilities
 - 1. The Manager of CCS or designee will determine the priority when a temporary regional transfer conflicts with an earlier bed commitment and will advise the Transportation Coordinator to redirect inmates as deemed necessary and appropriate.
 - 2. CCS staff will forward all *Intra-Regional Transfer Authorizations* to the Transportation Coordinator who will upload the *Transfer Authorizations* into the classification module of VACORIS.
 - a. CCS staff will review each classification action involving inmates temporarily transferred intra-regionally.
 - b. CCS staff will require staff at the institution where the inmate is housed to provide additional information for any classification action that does not specifically address the rationale for emergency transfer.
 - 3. CCS staff will ensure all necessary procedural safeguards are in place and will initiate final action for each emergency transfer.

VIII. Protective Custody

- A. The Director or designee determines the location of the Protective Custody Units and the number of beds assigned for that purpose.
 - 1. The Facility Unit Head or designee will identify the specific beds allocated for protective custody use.
 - 2. Staff may double cell or double bunk inmates for population management in Protective Custody Units.
- B. An inmate may declare a need for protection at any time.
 - 1. After a thorough investigation, the Facility Unit Head or designee may recommend an inmate's transfer to the Protective Custody Unit, when deemed appropriate.
 - 2. The institution(s) operating a Protective Custody Unit may be a higher security level than the inmate's assigned security level.
 - 3. Staff will designate all inmates assigned to the Protective Custody Unit as Security Level P.
- C. Classification to Protective Custody Units
 - 1. The ICA or MDT, as appropriate, should reach a decision for a protective custody assignment based on substantial, credible information, and after an investigation confirms the need for protective custody; see Operating Procedure 830.1, *Institution Classification Management*, and Operating Procedure 830.6, *Inmate Keep Separate Management*. For example, the inmate:
 - a. Has multiple documented keep separates.
 - b. Is a documented former public official, law enforcement or other employee from a criminal justice agency.
 - c. Gave documented testimony against gang or other crime organization.

- d. Is High Risk Sexual Victim (HRSV) or is a sexual abuse victim; see Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted).
 - e. Gang members will be considered on a case-by-case basis.
 2. When an inmate's need for personal protection is documented and no alternatives exist, the Shift Commander may authorize an inmate's placement in the Restorative Housing Unit on Alt-GP status pending review for protective custody assignment; see Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted), and Operating Procedure 841.4, *Restorative Housing Units*.
 3. Inmates with documented aggressive behavior or other potential for causing management problems should not be classified to a Protective Custody Unit. The inmate should be considered for other alternatives that meet their protective custody needs without endangering the safety of staff or other inmates.
 4. Staff will submit their recommendations for protective custody assignment through VACORIS to CCS staff for review and final decision. Inmates should not be moved from a general population or Restorative Housing Unit assignment to a Protective Custody Unit without the approval of CCS.
 5. CCS staff may assign an inmate to the Protective Custody Unit for one or more of the following reasons:
 - a. Keep separate claims, whether inmate or administrative, that have been approved by CCS staff; see Operating Procedure 830.6, *Inmate Keep Separate Management*.
 - b. The inmate's background, crimes, lifestyle, behavior, etc. indicates a high likelihood they will be preyed upon by other inmates in a general population setting.
 6. The following information should be provided in the *Institutional Classification Authority Hearing* report: (§115.43[d], §115.68)
 - a. The reason(s) the inmate needs protective custody.
 - b. How long the inmate has been assigned to Alt-GP status in the Restorative Housing Unit for their protection.
 - c. Any disciplinary infractions the inmate received while assigned to the Restorative Housing Unit for protection.
 - d. Any other documentation that would provide CCS staff with information to assess the institution's recommendation for an assignment to the Protective Custody Unit
- D. General Provisions of Protective Custody Units (§115.43[b], §115.68)
1. Protective Custody Units, to the extent feasible should provide programs and services like those available to general population inmates.
 2. The Facility Unit Head at institutions operating Protective Custody Units should develop local written procedures to specify the services and programs available to protective custody inmates. Written procedures should generally address the following programs and services:
 - a. Commissary
 - b. Correspondence
 - c. Counseling
 - d. Education
 - e. Exercise/Recreation
 - f. Legal Services/Law Library
 - g. Medical Services
 - h. Orientation
 - i. Personal Property
 - j. Telephone Calls

k. Visitation

l. Work Assignments

E. Classification Reviews

1. Assignment to a Protective Custody Unit is a specialized general population housing status.
 - a. Inmates housed in a Protective Custody Unit should have an annual review of their good time class level with an updated Re-entry Case Plan and Home Plan.
 - b. Security level and transfer requests should not be considered.
2. Protective custody inmates who become disruptive should be assigned to the institution's Restorative Housing Unit; see Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted), and Operating Procedure 841.4, *Restorative Housing Units*.
3. An inmate may be referred administratively to the ICA for transfer out of the Protective Custody Unit for the following: **(5-ACI-4A-08)**
 - a. Staff determine the inmate can no longer be managed in the Protective Custody Unit
 - b. Staff determine that the threat to the inmate's safety no longer exists.
 - c. The inmate requests release or refuses an assignment to the Protective Custody Unit. When an inmate requests release or refuses assignment, the *Protective Custody Release and Refusal* 830_F7 must be completed and attached to the ICA in VACORIS.
 - d. All institutional recommendations will be escalated in VACORIS to CCS staff for a final decision.
 - e. If approved, the inmate will be assigned to an appropriate security level and institution.

F. Keep separates within the Protective Custody Unit

1. Inmates who claim a keep separate within the Protective Custody Unit must report and identify the inmate; see Operating Procedure 830.6, *Inmate Keep Separate Management*.
2. CCS staff should evaluate keep separate claims for validity. This requirement is an additional precaution that applies only to Protective Custody Units.
3. Staff assigned to the Protective Custody Unit should take reasonable steps to separate inmates who claim a keep separate pending CCS staff decision.

IX. Court, Medical, Mental Health and Religious Diet Transfers

A. Court Appearance

1. An inmate summoned by Court order to appear may be housed in a local jail facility for court appearances. Inmates transferred to local jail facilities for court purposes will be returned to the sending institution upon completion of their involvement in court proceedings.
2. When it is deemed necessary to transfer an inmate from one institution to another to facilitate Court appearance in the absence of a court order, the Facility Unit Head or their designee receiving verbal instructions from the court, or the Attorney General's office, must promptly notify the Director of Offender Management Services.
 - a. The Facility Unit Head or their designee will indicate the date of the scheduled Court appearance.
 - b. The Director of Offender Management Services or designee will issue a *Temporary Reclassification* authorizing the necessary transfer to an appropriate institution.
 - c. Upon completion of the court appearance, the inmate will be returned to the sending institution, if suitable.

B. Medical and Mental Health Transfers

1. Health Services Unit staff will coordinate inmate transfers for medical purposes; see Operating Procedure 720.2, *Medical Screening, Classification, and Levels of Care*, and Operating Procedure

720.7, Emergency Medical Equipment and Care.

2. The Mental Health Clinician Senior at CCS will coordinate inmates transfers for mental health needs; see Operating Procedure 730.3, *Mental Health and Wellness Services: Levels of Service*.

C. Religious Diet Transfers

1. Staff will assign inmates to the Common Fare or Sealed Religious diet in accordance with Operating Procedure 841.3, *Inmate and CCAP Probationer/Parolee Religious Programs*.
2. Staff will escalate transfer requests from institutions that do not offer the requested religious diet to CCS for assignment to an appropriate institution.
3. Staff will submit Security Level W and Security Level 1 inmates who are transferred to a higher security level institution for the Common Fare or Sealed Religious diet and then voluntarily withdraws from the diet, for an administrative transfer to an institution that houses Security Level W and Security Level 1 inmates.

X. Disciplinary/Keep Separate, Restorative Housing Unit, and Security Level S Transfers

- A. Inmates may be referred administratively to the ICA or MDT, as appropriate, for transfer consideration to another appropriate institution when institution staff determine that the inmate is a threat to the secure and orderly operation of the institution due to disciplinary infractions or a documented keep separate situation.

1. When the inmate is assigned to the Restorative Housing Unit, the ICA or MDT, as appropriate, may, with documentation, recommend the inmate transfer to a suitable institution or return to the general population.
2. Inmates assigned to a Restorative Housing Unit for investigative purposes should not be recommended for a transfer until the investigation is completed.
3. Transfer to Other Regional Facilities for Restorative Housing
 - a. Facility Unit Heads or their designees may authorize the transfer of an inmate to another institution's Restorative Housing Unit when the sending institution does not have adequate restorative housing resources.
 - b. In such cases, upon the inmate's release to general population the inmate is normally returned to their assigned institution.
 - c. The ICA or MDT, as appropriate, will review inmates who, for security reasons, cannot be returned to their assigned institution.

B. Security Level S Transfers

1. Security Level S is a type of housing reserved for special purpose bed assignment, utilized under proper administrative process at institutions, for the protective care and management of inmates.
2. Staff at the eligible inmate's current institution should conduct an ICA hearing to initiate the inmate's assignment to Security Level S and transfer to the designated institution. Staff will document the inmate's eligibility and the recommend assignment in accordance with Operating Procedure 830.1, *Institution Classification Management*, and Operating Procedure 830.2, *Security Level Classification*.
3. CCS staff will review each assignment and in VACORIS and will escalate eligible inmates to the Facility Unit Head or their designee and the Regional Operations Chief for review and approval.

XI. Cognitive Therapeutic Community (CTC) Program Transfers

- A. CTC programs are intensive residential substance use disorder treatment programs that utilize a hierarchical structure within the community to create inmate accountability and responsibility through role modeling and confrontation of unhealthy lifestyles and operated at institutions designated by the Chief of Corrections Operations.

B. CTC Admission Criteria

1. Inmates must meet the institution assignment criteria for the institution with a CTC program as follows:
 - a. Indian Creek Correctional Center (ICCC)
 - i. Security Level W, 1, or 2
 - ii. Mental Health Code 0, 1, or 2
 - iii. 6-12 months for CTC participation only
 - iv. 24-36 months to MPRD/GTRD to accommodate vocational and educational programming and CTC participation.
 - v. No felony detainees
 - vi. COMPAS *Substance Abuse Scale* and *Cognitive Behavioral Scale* required rating or a documented history of substance abuse at the discretion of CCS; see Operating Procedure 841.1, *Inmate Programs*.
 - vii. Basic general mental ability to participate meaningfully in group process.
 - b. Virginia Correctional Center for Women (VCCW)
 - i. Security Level W, 1, or 2
 - ii. Mental Health Code 0, 1, or 2
 - iii. 24-36 months to MPRD/GTRD to accommodate vocational and educational programming and CTC participation.
 - iv. 6-12 months for CTC participation only
 - v. No felony detainees
 - vi. COMPAS *Substance Abuse Scale* and *Cognitive Behavioral Scale* rating and/or a documented history of substance abuse at the discretion of CCS; see Operating Procedure 841.1, *Inmate Programs*
 - vii. VCCW staff will screen their population for inmate assignments to the CTC.
 - c. Lawrenceville Correctional Center (LVCC)
 - i. Security Level 3.
 - ii. 18 to 36 months to projected release date.
 - iii. Documented history of substance abuse
 - iv. Stable adjustment and at least four months infraction free.
 - v. Accepts only voluntary referrals.

C. Inmate Assignment to a CTC

1. The Court may sentence eligible inmates directly to a CTC program by a Court Order or a Behavior Correction Program (BCP) Court Order.
 - a. CCS staff will administratively review and assign Behavioral Correctional Program (BCP) inmates to a CTC.
 - b. Inmates sentenced to the BCP will complete a minimum of 24 months in the program as required by Court Order.
2. CCS staff may administratively assign an inmate to participate in a CTC program for substance use when it is determined that such an assignment is appropriate.
3. Inmates may request a CTC transfer at their annual review.
4. The Institutional Classification Authority (ICA) will review an inmate for assignment to a CTC any time after determining the inmate is eligible and suitable for participation. The ICA should review any inmate who is:
 - a. Whose COMPAS scores on the *Substance Abuse Scale* and *Cognitive Behavioral Scale* reflect medium to high substance use treatment needs combined with medium to high cognitive behavioral treatment needs:

- i. A score of *highly probable* on the COMPAS/WRNA *Substance Abuse Scale* combined with a score of *probable* on the COMPAS/WRNA *Cognitive Behavioral Scale*.
 - ii. A score of *probable* on the COMPAS/WRNA *Substance Abuse Scale* plus a score of *highly probable* on the COMPAS/WRNA *Cognitive Behavioral Scale*.
 - iii. A documented history of substance use disorder history at the discretion of Central Classification Services
- b. The ICA will refer eligible inmates to CCS for review and a final decision.
- 5. Staff at CTC designated institutions will enroll eligible inmates in the CTC program at that institution.
- 6. Staff will refer inmates who are identified for CTC assignment at other institutions to a CTC and will recommend a transfer to a designated CTC institution.
 - a. The ICA will, when necessary, will submit a transfer request in the VACORIS classification module designated with an *Action Type* - Transfer; Priority 3, Priority Reason of Program Needs, and Transfer Reason of Substance Abuse Program.
 - b. The ICA must include a signed copy of Attachment 1, *LVCC New Hope Therapeutic Community Admissions Contract* with the transfer request assignments to the CTC program at LVCC.
 - c. CCS staff will determine an inmate's eligibility and suitability for assignment to a specific institution and will have final authority for approval or disapproval.
 - d. If approved for participation, CCS staff will affect the necessary transfer.
 - i. Transfers to a CTC will take priority over vocational programming for those inmates who the Court has ordered or recommended for a CTC.
 - ii. Transfers to a CTC will take priority for those inmates who have been enrolled in a vocational program for four months or less at the time their transfer is submitted to CCS.
 - e. If disapproved, CCS will note the disapproval on the *Institutional Classification Authority Hearing Report*.
- 7. Staff will complete a formal substance use disorder assessment on the inmate once the inmate is received at the CTC institution.
 - a. Staff must use a standard evidence-based substance use disorder screening and assessment instrument approved for use in the DOC.
 - b. Staff must conduct an Institutional Classification Authority (ICA) hearing prior to inmate admission into the CTC, with documentation provided in VACORIS specifying that the inmate has met the required eligibility criteria.

D. Inmate Removal from a CTC:

- 1. Staff will review any inmate who refuses to participate in the CTC program or whose behavior warrants removal from the CTC program due to their non-compliant or disruptive behavior.
 - a. A member of the Cognitive Community Treatment Team will complete a *Progressive Action Log 841_F26* and charge the inmate with offense code 119e, *Refusal to participate in or removal from a residential cognitive community program*; see Operating Procedure 861.1, *Inmate Discipline*.
 - b. Staff will upload the *Progressive Action Log 841_F26* as an external document and will submit the *Progressive Action Log* with the *Disciplinary Offense Report (DOR)* in VACORIS.
- 2. Staff should remove any inmate using alcohol, illicit drugs, or marijuana from the CTC program for at least 30 days, during which time staff will test the inmate frequently for substance use. After the minimum of 30-days staff will determine whether the inmate will be readmitted to the CTC program based on the inmate's commitment to change.
- 3. Staff will refer any inmate determined to be physically or mentally incapable of CTC participation to the ICA with documentation from the institutional Physician or Mental Health Clinician for program removal without sanctions.
 - a. The institution Principal, Physician, or Psychology Associate, depending on the area of deficit will

- review any inmate determined to be physically or mentally incapable of CTC participation.
- b. Designated institutional staff will conduct an ICA hearing for program removal, and with appropriate documentation, inmates determined to be physically or cognitively impaired will be removed without sanctions.
- 4. Staff will refer any inmate found guilty of offense code 119e to the ICA for a formal hearing to address the inmate's removal from the CTC program, assignment to Good Time Class Level IV, review of security level, and appropriate institutional assignment.
 - a. Staff will reduce the inmate's good time class level to IV utilizing the required 7 override upon removal from the CTC program; see Operating Procedure 830.3, *Good Time Awards* and COV §53.1-200, Conditions for good conduct allowance.
 - i. Staff will not raise the inmate's good time class level until the inmate re-enters and successfully participates in a CTC program for substance use.
 - ii. When the inmate is transferred to another institution, staff will not raise the inmate's good time class level if the inmate does not re-enter and successfully participate in a CTC for substance use.
 - b. Staff must increase the inmate's security level upon the inmate's second conviction for using alcohol, illicit drugs, or marijuana unless staff determine other recommendations or sanctions are more appropriate.
- 5. ICA recommendations for CTC program removal are submitted for final review and approval to CCS as a "transfer".

XII. Secure Diversionary Treatment Program (SDTP) Transfer

- A. The Secure Diversionary Treatment Program (SDTP) is designed to provide treatment in a secure setting to eligible inmates with Serious Mental Illness (SMI). The following inmates are eligible for assignment to a SDTP:
 - 1. Inmates on restorative housing status who will not be released to General Population or moved into SD-1 or SD-2 within 28 days.
 - 2. Inmates who were committed to Marion Correctional Treatment Center for Acute Care from an SDTP site.
 - 3. Inmates assigned to Security Level S who are classified as SMI.
 - 4. Inmates transferring from one SDTP to another for appropriate housing.
- B. The ICA or Multi-Disciplinary Team (MDT) must conduct a formal ICA hearing to initiate the SDTP review process and will escalate their recommendations to the Mental Health Clinical Supervisor (MHCS) of the referring region in VACORIS for their review and approval.
 - 1. The ICA or MDT recommendation, as appropriate, must include a transfer request to Wallens Ridge State Prison, Marion Correctional Treatment Center, and River North Correctional Center.
 - 2. When the ICA or MDT recommends assignment to an SDTP, the CHAP or designee at the referring institution must complete the *Assignment to Secure Diversionary Treatment Program* 830_F10 and forward it by email to DOCSMI by the end of the following workday.
 - 3. The Mental Health Clinician Senior at the referring institution will complete the *Mental Health Clinical Supervisor - External Review* 830_F11 and a new *Mental Health Serious Mental Illness (SMI) Determination* 730_F34. Both documents must be submitted to the MHCS of the referring region for review and approval by the end of the following working day.
 - 4. The MHCS will conduct an external review and document their decision on the *Mental Health Clinical Supervisor - External Review* 830_F11.
 - a. If approved, the completed Mental Health Clinical Supervisor - External Review and Mental Health Serious Mental Illness (SMI) Determination 730_F34 will be forwarded by email to DOCSMI.

- b. The MHCS will escalate the ICA in VACORIS to the Regional Operations Chief of the Western Region who will approve or disapprove the inmate's assignment.
 - c. If approved, the ICA will then be escalated to the Mental Health Clinician Senior at CCS.
- 5. The Special Program Manager for Diversionary Housing will verify the Assignment to Secure Diversionary Treatment Program 830_F10, Mental Health Clinical Supervisor - External Review 830_F11 and Mental Health Serious Mental Illness (SMI) Determination 730_F34 are complete and accurate.
 - a. The Special Program Manager for Diversionary Housing will prepare the documents for further review and approval by the Multi-Institution Treatment Team (MITT).
 - b. The MITT will review the inmate and if approved, determine the appropriate SDTP institutional assignment.
 - c. The Psychology Associate Senior at CCS will approve the inmate's transfer in VACORIS to the approved SDTP location on behalf of the MITT.
- C. After successful completion of the SDTP, staff may refer inmates with additional mental health needs to a SAM Unit as outlined in this operating procedure.
 - 1. The referring staff member at the SDTP Unit must also forward a copy of the *Shared Allied Management (SAM) Unit Admission Screening* 830_F8 to the CHAP at the receiving SAM Unit.
 - 2. The Mental Health Clinician at the referring SDTP Unit will send an *Electronic Notification of Mental Health Inmate Transfer* 730_F11 to the Mental Health Clinician Senior at the receiving SAM Unit.

XIII. Sex Offender Residential Treatment Program (SORT)

All inmates housed at institutions that are incarcerated on a sexual offense will be screened for residential treatment by the Sex Offender Screening and Assessment Unit; see Operating Procedure 735.2, *Sex Offender Treatment Services (Institutions)*.

XIV. Shared Allied Management (SAM) Unit Transfers

- A. The purpose of a SAM Unit is to promote safety within institutions by avoiding the use of restorative housing to manage inmates that typically require a high level of services from security, mental health, or medical staff. Three specific inmate populations are eligible for assignment to a SAM Unit.
 - 1. Mental Health Population: Mentally ill or seriously mentally ill (SMI) inmates who are at a greater risk to cycle in and out of restorative housing and/or Mental Health Units for disruptive behavior related to their mental health diagnoses and symptoms to include:
 - a. Inmates with a Mental Health Code 2 or 2S, who are housed in a Restorative Housing Unit with a history of repeated misbehavior due to their mental illness.
 - b. Inmates recently released from an Acute Care Unit or other Mental Health Units.
 - c. Inmates who had suicidal/self-harm incidents or thoughts in the last three months.
 - d. Inmates who are having a difficult time adapting to the basic demands of their current housing status due to the symptoms of their mental health diagnosis but do not meet the criteria for a Mental Health Unit.
 - 2. Medical Population: Medically infirmed inmates requiring intensive medical attention but not requiring admission to the infirmary.
 - 3. Vulnerable Population: Inmates who are at a greater risk for victimization or being bullied in general population due to characteristics such as cognitive challenge, age (seniors and youthful), small in stature, or timid personalities.
- B. SMI inmates who require assignment to a restorative housing status for longer than 28 days, inmates with a history of repeated or recent predatory behavior, and inmates attempting to manipulate their housing due to debt, threat, other social factors, or personal gain are not eligible for assignment to a SAM Unit.

- C. To refer any inmate for assignment to any SAM Unit, designated staff must prepare the *Shared Allied Management (SAM) Unit Admission Screening 830_F8* for review by the SAM Unit Committee and approval of the Chief of Housing and Programs (CHAP).
1. Inmates must first be referred and reviewed for placement in the SAM Unit at their current institution.
 - a. To assign an inmate to the SAM Unit at their current institution, the ICA will conduct an informal ICA hearing.
 - b. Submission of the *SAM Admission Screening* to DOCSAM for internal assignments is not required.
 2. When the inmate's assignment to a SAM Unit requires a transfer, the ICA will conduct a formal ICA hearing and must submit their recommendation in VACORIS to the Mental Health Clinician Senior at CCS or designee for review.
 - a. The ICA must review the inmate's security level score and status to determine if the inmate's current security level is appropriate. When the inmate's behavior or other factors indicate that the current security level assignment may not be appropriate, the inmate's security level must be updated in VACORIS; see Operating Procedure 830.2, *Security Level Classification*.
 - b. The ICA should include a transfer request to a SAM Unit at an appropriate institution consistent with the *Institutional Assignment Criteria* in their recommendation for transfer.
 - c. Upon conclusion of the ICA and recommendation of inmate assignment to a SAM Unit, the final institution approver will:
 - i. Escalate the transfer action in VACORIS to the Mental Health Clinician Senior at CCS or designee.
 - ii. Forward the completed *Shared Allied Management (SAM) Unit Admission Screening 830_F8* by email on the same day to DOCSAM.
 3. The Mental Health Clinician Senior at CCS or designee will review each recommended assignment and, taking into consideration bed availability, will determine the appropriate SAM Unit assignment.
 - a. The Mental Health Clinician Senior at CCS or designee will forward the *Shared Allied Management (SAM) Unit Admission Screening 830_F8* to the CHAP at the receiving SAM Unit for their review and approval.
 - b. Within five working days, the SAM Unit Committee will review all incoming referrals and inform the CHAP of their decision.
 - c. The CHAP or their designee must notify the Mental Health Clinician Senior at CCS or designee by email of their decision to either accept, accept with waitlist, or deny an inmate's assignment to the SAM Unit.
 - i. If the inmate is accepted, the Mental Health Clinician Senior at CCS or designee will approve the inmate's admission into the SAM Unit and finalize the ICA's recommendation for transfer in VACORIS.
 - ii. If the inmate is accepted with waitlist, the Mental Health Clinician Senior or designee will add the inmate to the statewide wait list for SAM Unit beds.
 - iii. If the inmate is denied admission, the CHAP or their designee must clearly document the reason for denial on the *Shared Allied Management (SAM) Unit Admission Screening 830_F8*. Denial of a SAM Unit referral is limited to legitimate operational or security reasons i.e., validated keep separates, inappropriate classification, bottom bunk availability, etc.
 4. When an inappropriate referral is submitted or an inmate's admission into a SAM Unit is denied, the Mental Health Clinician Senior at CCS or their designee will consult with the Special Program Manager for Diversionary Housing.
 - a. The Special Program Manager for Diversionary Housing will make the final determination on the appropriateness of the referral and on the inmate's institutional SAM Unit assignment.
 - b. The Mental Health Clinician Senior or their designee will approve or disapprove an inmate's admission into a SAM Unit on behalf of the Special Program Manager for Diversionary Housing,

finalize the ICA's recommendation for transfer in VACORIS, and notify appropriate staff of the decision.

D. All inmates should sign the *Shared Allied Management (SAM) Unit Contract* 830_F9 as a condition of their assignment to the institution's SAM Unit. An inmate's refusal to sign the Contract will be documented on the Contract and may result in removal from the unit.

E. Inmate Removal from SAM Unit

1. Staff must conduct a formal ICA hearing to remove an inmate from the SAM Unit, whether the removal is involuntarily, voluntarily by inmate request, graduation, or administrative and document the specific reason for removal on the *Institutional Classification Authority Hearing Notification*.
2. The staff member requesting removal, or a SAM Unit Committee co-facilitator will complete the *Shared Allied Management (SAM) Removal* 830_F15 for review and approval by the SAM Unit Committee and CHAP.

XV. Steps to Achieve Reintegration (STAR) Program Transfers

A. Staff should review any inmate assigned to a Restorative Housing Unit who refuses assignment to general population due to fear, threat, violent or aggressive behavior, or legitimate protective custody needs, for transfer to the Steps to Achieve Reintegration (STAR) Program.

1. Security level W through 4 inmates will be considered for the STAR Program at Keen Mountain Correctional Center (KMCC).
2. Security Level 5 inmates and inmates not eligible for placement at KMCC will be considered for the high security level STAR Program at Wallens Ridge State Prison (WRSP).

B. To recommend a transfer to either STAR Program, staff will prepare the *Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5 for review and approval by the Facility Unit Head or designee.

C. The staff member preparing the *Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5 must notify a Mental Health Clinician who will complete the *Steps to Achieve Reintegration (STAR) Program - Mental Health Review* 830_F6.

1. The ~~*Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5~~ *Steps to Achieve Reintegration (STAR) Program - Mental Health Review* 830_F6 must be sent directly to the KMCC or the WRSP Psychology Associate Senior, as appropriate, for review. (corrected 4/5/24)
2. Failure to submit the ~~*Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5~~ *Steps to Achieve Reintegration (STAR) Program - Mental Health Review* 830_F6 to KMCC or WRSP will result in CCS staff disapproval of the inmate for participation in the STAR Program. (corrected 4/5/24)
3. Staff must not upload the ~~*Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5~~ *Steps to Achieve Reintegration (STAR) Program - Mental Health Review* 830_F6 into VACORIS. (corrected 4/5/24)

D. The ICA must conduct a formal ICA hearing and will escalate the ICA in VACORIS to CCS staff for review; see Operating Procedure 830.1, *Institution Classification Management*.

1. The ICA must confirm and document on the *Institutional Classification Authority Hearing Notification* that the *Steps to Achieve Reintegration (STAR) Program - Mental Health Review* 830_F6 was completed and submitted to Mental Health Clinician Senior at KMCC or WRSP.
2. The completed *Inmate Case Analysis for Steps to Achieve Reintegration (STAR) Program* 830_F5 must be uploaded to VACORIS as an external document and forwarded with the ICA recommendation for assignment to the STAR Program.

E. CCS staff will review all inmates recommended for assignment to the STAR Program and will escalate

eligible inmates in VACORIS to the Facility Unit Head or designee at the institution operating the STAR Program and the appropriate Regional Operations Chief for review.

1. The Facility Unit Head or designee and the Regional Operations Chief must approve the inmate's admission into the STAR Program.
2. The Transportation Coordinator will arrange the transfer of inmates accepted into the program.
3. Staff should re-evaluate inmates disapproved for assignment to the STAR Program for alternative options, i.e., release to general population or transfer.

F. After completing the STAR Program at KMCC, inmates must be in general population at KMCC for six months prior to requesting a transfer.

XVI. Voluntary Substance Use Disorder Treatment (V-SUDT) Transfers

A. Any inmate who voluntarily admits to a substance use problem or the possession of alcohol or other drugs for personal use, prior to notification of an alcohol or drug test or notification of a search and who have a minimum 12 months left on their sentence may request assignment to a V-SUDT program.

1. The inmate must document their voluntary admission on a *Substance Use Voluntary Admission 841_F9* to participate in a V-SUDT program.
 - a. The *Voluntary Admission Form* must be signed, dated, and witnessed.
 - b. The inmate's voluntary admission does not prevent the inmate from being tested for substance use.
 - c. If the inmate requests assignment to the V-SUDT program, staff will not charge the inmate for a positive test for 30 days after the inmate's completion of a *Substance Use Voluntary Admission 841_F9*.
 - d. The inmate will review and sign the *V-SUDT Program Contract*; a staff member must witness the inmate's signature; see Operating Procedure 841.5, *Substance Use Testing and Treatment Services*.
2. Staff will refer any inmate requesting V-SUDT program assignment to their counselor and will forward the inmate's signed *V-SUDT Program Contract*.
3. Within 24-hours of the inmate's voluntary admission staff must test the inmate for substance use and enter the results of the test into VACORIS.
4. The inmate's counselor will review the *Institutional Assignment Criteria* for the receiving institution and determine if the inmate meets the criteria for assignment:
 - a. Male Inmates
 - i. The V-SUDT program, for Security Level W, 1, & 2 male inmates, is at Indian Creek Correctional Center. Security Level W, 1, & 2 male inmates must be within 20 years or less of their Mandatory Parole Release Date (MPRD)/Good Time Release Date (GTRD) in lieu of the 6 months minimum and 36 months maximum required by the *Institutional Assignment Criteria* for ICC.
 - ii. The V-SUDT program, for Security Level 3 male inmates, is at Green Rock Correctional Center (GROC); Security Level 2 inmates at GROC will apply for GROC's V-SUDT program.
 - iii. Substance use disorder treatment for Security Level 4 and above male inmates is provided at the inmate's current institutional assignment; inmates will not be transferred for treatment.
 - b. Female Inmates
 - i. The V-SUDT program, for Security Level W, 1 & 2 female inmates, is at Virginia Correctional Center for Women.
 - ii. Substance use disorder treatment for Security Level 3 female inmates is at Fluvanna Correctional Center for Women.
5. The counselor will notify the ICA and prepare the *Institutional Classification Authority Hearing Notification* in VACORIS; see Operating Procedure 830.1, *Institution Classification Management*.

6. The ICA will review the inmate for transfer to the appropriate V-SUDT program, conduct the ICA hearing, and will escalate all recommendations for transfer s in VACORIS to CCS for a final decision.
 - a. Before the ICA can recommend an inmate transfer to participate in a V-SUDT program the ICA must confirm the inmate reviewed and signed the *Substance Use Voluntary Admission* 841_F9 and Attachment 3, *V-SUDT Program Contract*.
 - b. Staff will upload the completed *Substance Use Voluntary Admission* 841_F9 and *V-SUDT Program Contract* as an external document to the ICA recommendation for transfer.
 - c. The ICA, when applicable, will expedite the inmate's transfer to the appropriate institution for participation in a V-SUDT program.
- B. Any inmate who voluntarily admits to alcohol or drug possession for their personal use are required to surrender the substance to investigative staff.
 1. If the inmate requests assignment to the V-SUDT program, the inmate will not be subject to a disciplinary offense for possession.
 2. Staff will charge the inmate for any alcohol or drugs found in their possession after their initial surrender and request for assignment to the V-SUDT program.
- C. For any documented overdose, positive test for substance use, or conviction for drug possession within the previous 30 calendar days, the counselor should:
 1. Offer Security Level W - 3 male inmates and Security Level W - 2 female inmates with the opportunity to request assignment to a V-SUDT program.
 2. Offer Security Level 4 and above male inmates and Security Level 3 female inmates with treatment at their current institutional assignment.
 3. Process the inmate's request in accordance with this operating procedure if the inmate voluntarily requests assignment to the program.
 4. Document the inmate's refusal as a *Facility Note* in VACORIS if the inmate refuses assignment to the program.
- D. Upon admission to the V-SUDT program, the inmate is required to:
 1. Complete the *National Institute on Drug Abuse (NIDA) Assist V2.0* screening and *Addiction Severity Index (ASI)*, which will guide the development of the inmate's individualized substance use disorder treatment plan.
 2. Submit to a test for substance use and sign a participant agreement/consent to treatment.
 3. Participate in and complete the program.
- E. V-SUDT program refusals and removals
 1. Staff will charge inmates who refuse to participate in the V-SUDT program after their transfer is scheduled or completed and inmates who are removed due to disruptive, non-participatory, or non-compliant behavior with offense code 200b, *Refusal to participate in or removal from any voluntary (non-reentry) program*.
 - a. Staff must complete a *V-SUDT Program Progressive Action Log* 841_F27 when issuing a *Disciplinary Offense Report* (DOR) for offense code 200b.
 - b. Upon completion, staff will upload the *V-SUDT Program Progressive Action Log* 841_F27 as an external document and will submit the *Progressive Action Log* with the DOR in VACORIS.
 2. The ICA will conduct a formal ICA hearing for any inmate convicted of offense code 200b, *Refusal to participate in or removal from any voluntary (non-reentry) program* to address the inmate's security level, Good Time Class Level, and institutional assignment.
 - a. The ICA will review the inmate for a mandatory reduction to Good Time Class Level IV effective

the date the charge was written; see Operating Procedure 830.3, *Good Time Awards*.

- b. Staff will use a #7 override, *Refusal of or removal from any required educational, program, vocational, or work assignment must result in an automatic override to Level IV regardless of the inmate's class level score*.
 - c. This override will flag the inmate's file so that they are not allowed to earn good time for two years.
 - d. The ICA will escalate their recommendations to CCS for a final decision.
- F. Inmates who successfully complete the V-SUDT program and do not receive an additional offense code 122 a-d, f or a 145c conviction will have:
- 1. All visitation and phone privileges lost due to any of the 122 a-d, f and 145c convictions restored twelve-months after program completion.
 - 2. Future sanctions related to a new 122 a-d, f or 145c conviction will not include prior 122 a-d, f and 145c convictions received over the past two years.
 - 3. Their Good Time Class Level IV reviewed 12 months after program completion for advancement to an appropriate Class Level; see Operating Procedure 830.3, *Good Time Awards*.
 - 4. Their security level reviewed 12 months after program completion for a security level decrease; see Operating Procedure 830.2, *Security Level Classification*.
 - 5. Their institutional assignment reviewed for a transfer to an appropriate institution. The ICA will escalate their recommendations for transfer in VACORIS to CCS for a final decision.
 - 6. Their 122a-d, f and 145c convictions overturned in VACORIS after 12 months to remove the offense from the inmate's list of convictions.
- G. Inmates who successfully complete a V-SUDT program, and who voluntarily admit to continued substance use may reapply for reassignment to a V-SUDT program. Staff will consider the inmate's application and reassignment to a V-SUDT program on a case-by-case basis.
- H. Inmates who did not successfully complete the V-SUDT program or who were removed from the V-SUDT program, and who voluntarily admit to continued substance use may reapply 90 days after program removal for reassignment to a V-SUDT program. Staff will consider the inmate's application and reassignment to a V-SUDT program on a case-by-case basis.

XVII. Inmate Appeals

- A. An inmate may appeal any final classification decision through the Inmate Grievance Procedure.
- B. The ICA recommendation and the final approval are one issue and cannot be grieved separately.

REFERENCES

[COV §53.1-200, Conditions for good conduct allowance](#)

[Operating Procedure 050.3, Facility Release of Inmates and CCAP Probationers/Parolees](#)

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

[Operating Procedure 720.2, Medical Screening, Classification, and Levels of Care](#)

[Operating Procedure 720.7, Emergency Medical Equipment and Care](#)

[Operating Procedure 730.2, Mental Health and Wellness Services: Screening, Assessment, and Classification](#)

[Operating Procedure 730.3, Mental Health and Wellness Services: Levels of Service](#)

[Operating Procedure 735.2, Sex Offender Treatment Services \(Institutions\)](#)

[Operating Procedure 830.1, Institution Classification Management](#)

[Operating Procedure 830.2, Security Level Classification](#)

[Operating Procedure 830.3, *Good Time Awards*](#)

[Operating Procedure 830.6, *Inmate Keep Separate Management*](#)

[Operating Procedure 841.1, *Inmate Programs*](#)

[Operating Procedure 841.3, *Inmate and CCAP Probationer/Parolee Religious Programs*](#)

[Operating Procedure 841.4, *Restorative Housing Units*](#)

[Operating Procedure 841.5, *Substance Use Testing and Treatment Services*](#)

[Operating Procedure 861.1, *Inmate Discipline*](#)

ATTACHMENTS

[Attachment 1, *LVCC New Hope Therapeutic Community Admissions Contract*](#)

FORM CITATIONS

[*Intra-Regional Transfer Authorization* 050_F8](#)

[*Interdepartmental Transfer Notice \(CA4\)* 050_F9](#)

[*Electronic Notification of Mental Health Inmate Transfer* 730_F11](#)

[*Mental Health Serious Mental Illness \(SMI\) Determination* 730_F34](#)

[*Sex Offender Residential Treatment \(SORT\) Program Referral DOC SO 3 735* F3](#)

[*Inmate Case Analysis for Steps to Achieve Reintegration \(STAR\) Program* 830_F5](#)

[*Steps to Achieve Reintegration \(STAR\) Program - Mental Health Review* 830_F6](#)

[*Protective Custody Release and Refusal* 830_F7](#)

[*Shared Allied Management \(SAM\) Unit Admission Screening* 830_F8](#)

[*Shared Allied Management \(SAM\) Unit Contract* 830_F9](#)

[*Assignment to Secure Diversionary Treatment Program* 830_F10](#)

[*Mental Health Clinical Supervisor - External Review* 830_F11](#)

[*Shared Allied Management \(SAM\) Removal* 830_F15](#)

[*Substance Use Voluntary Admission* 841_F9](#)

[*Progressive Action Log* 841_F26](#)

[*V-SUDT Program Progressive Action Log* 841_F27](#)



Virginia Department of Corrections

Offender Management and Programs

Operating Procedure 841.4

Restorative Housing Units

Authority:

Directive 841, *Program Management*

Effective Date: July 1, 2023

Amended: 7/1/23, 2/1/24, 7/1/24

Supersedes:

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5-ACI-4A-01, 5-ACI-4A-02, 5-ACI-4A-04,
5-ACI-4A-05, 5-ACI-4A-07, 5-ACI-4A-08,
5-ACI-4A-10, 5-ACI-4A-11, 5-ACI-4A-12,
5-ACI-4A-15, 5-ACI-4A-16, 5-ACI-4A-20,
5-ACI-4A-21, 5-ACI-4A-22, 5-ACI-4A-23,
5-ACI-4A-24, 5-ACI-4A-25, 5-ACI-4A-27,
5-ACI-4B-02, 5-ACI-4B-03, 5-ACI-4B-04,
5-ACI-4B-08, 5-ACI-4B-09, 5-ACI-4B-10,
5-ACI-4B-12, 5-ACI-4B-14, 5-ACI-4B-15,
5-ACI-4B-16, 5-ACI-4B-20, 5-ACI-4B-21,
5-ACI-4B-22, 5-ACI-4B-23, 5-ACI-4B-24,
5-ACI-4B-25, 5-ACI-4B-26, 5-ACI-4B-28,
5-ACI-4B-29, 5-ACI-4B-30, 5-ACI-4B-31,
5-ACI-4B-32, 5-ACI-4B-33, 5-ACI-5C-08

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Signatory:	A. David Robinson Chief of Corrections Operations	<i>Signature Copy on File</i>	5/30/23
		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 June 2024 and determined that no changes are needed.

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

Acute Care Unit - A designated treatment unit licensed to provide inpatient mental health and wellness services for inmates whose functioning is so severely impaired by a mental disorder that they meet the criteria for involuntary admission.

“At Risk” Inmate - An inmate who meets criteria for being “at risk” for deterioration, self-harm, and/or being a danger to others in a Restorative Housing Unit as determined by a Mental Health Clinician; see *Mental Health and Wellness Services Screening 730_F12*.

Central Classification Services (CCS) - Staff members from the Offender Management Services Unit who review certain recommendations made by the Institutional Classification Authority and Multi-Disciplinary Team to render a final decision regarding inmate statuses and assignments.

Cool-down Space - A safe and secure room in general population for inmates to reflect on their behavior choices, manage their emotions, reduce stress, and practice self-directed behavior.

Discharge (Facility Release) - The release of an inmate or probationer/parolee from a facility due to satisfying the requirements for release from that facility; discharge may be due to parole, good time release, pardon, court order, completion of Community Corrections Alternative Program or other reasons. Discharge may be to the community with or without probation/parole/post-release obligations or discharge may be to law enforcement authorities for other legal obligations or deportation.

Health Trained Staff – A DOC employee, generally a Corrections Officer, who has been trained to administer health screening questionnaires, including training as to when to refer to qualified health care personnel and with what level of urgency.

High Risk Sexual Victim (HRSV) - As identified by the Classification Assessment and Mental Health Clinician assessment, any inmate/probationer/parolee confirmed as a sexual victim or identified as being at high risk of being sexually victimized.

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.

Institutional Classification Authority (ICA) - The institutional employee designated to conduct inmate case review hearings.

Keep Separate - A classification action whereby an inmate is not to be housed at a specific location, or with access to specific staff or inmates; a “Keep Separate” determination is not required but may be based on:

- Two or more inmates who are a serious threat to one another as demonstrated by a verified, prior, aggravated assault (or contract for assault) where serious harm or death was clearly the intent of the aggressor.
- One inmate has testified against another inmate in Court and the inmate's conviction and/or length of sentence was likely influenced by the testimony.
- An inmate's felony was committed against staff, another inmate, or the immediate family of a staff member or inmate.
- The inmate is a family member, friend, and/or prior associate with a staff member.
- The inmate's crime was committed against a current or former institutional staff member or in the locality where the institution is located.
- The inmate is subject to a substantial risk of sexual abuse from a specific, identified inmate.

Meaningful Out-Of-Cell Time - Out-of-cell programmatic interventions or other congregate activities aimed at promoting personal development or addressing underlying causes of problematic behavior, which may include recreation in a congregate setting as defined in COV 53.1-39.2, *Restorative housing; restrictions on use*. (added 2/1/24)_

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.

Mental Health Residential Treatment Unit - A designated treatment unit where mental health and wellness services are provided to inmates who are unable to function in a general population setting due to a mental disorder but who typically do not meet the criteria for admission to an Acute Care Unit.

Multi-Disciplinary Team (MDT) - MDT members are responsible to review individual inmates related to restorative housing and step-down statuses and act as the Institutional Classification Authority to make recommendations for housing status, transfer, security level, good time class, etc.; decisions are the responsibilities of the Facility Unit Head and Regional Administrator.

Protective Custody Unit - A special purpose general population housing unit designated by the Director for inmates classified as requiring separation from other inmates as a result of their personal security needs; inmates requesting and requiring assignment to a Protective Custody Unit may be managed in the Restorative Housing Unit, pending assignment and transfer.

Qualified Health Care Personnel - A Licensed Practical Nurse, Registered Nurse, Physician Assistant, Nurse Practitioner, or Physician.

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.

Secure Diversionary Treatment Program (SDTP) - A residential programming unit with bed assignments designated for eligible inmates who are classified as Seriously Mentally ill, and who meet the criteria for program admission. The SDTP is a formalized program that operates within structured security regulations and procedures and provides for programming and treatment services conducive with evidence based treatment protocols and individualized treatment plans.

Serious Mental Illness (SMI) - Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified mental health clinician.

Psychological - *as relating to the mental and emotional state of an individual.*

Cognitive - *as relating to cognitive or intellectual abilities.*

Behavioral - *as relating to actions or reactions in response to external or internal stimuli that is observable and measurable.*

Shared Allied Management (SAM) Unit - A residential programming unit operated at designated institutions to deliver intensive services in a safe environment to specific inmate populations that typically require a high level of services from security, mental health and wellness services, and/or health services staff.

Steps to Achieve Reintegration (STAR) Program - A program operated at designated institutions for inmates, who motivated by unspecified fear, refuse to leave restorative housing, and enter general population.

Transitional Action Plan - The status in the Restorative Housing Unit to which the inmate is assigned and the transitional steps required for the inmate to enter full privilege general population as soon as safely possible.

Working Day - Weekdays, Monday through Friday, not counting official state holidays.

PURPOSE

This operating procedure provides for the assignment of inmates housed in Department of Corrections (DOC) institutions to Restorative Housing Units, establishes the minimum standards for the operation of these units and for the care and custody of the inmates and will serve as the Facility Unit Head's procedure and process, approved by the Director, to transition an inmate placed in the Restorative Housing Unit out of the unit and back to full privilege general population.

PROCEDURE

I. Restorative Housing Units

- A. This operating procedure provides inmates with information on the operation of Restorative Housing Units and for the supervision of inmates under Restorative Housing (RHU), and Step-down (SD-1 and SD-2) statuses; see Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted), for security considerations relating to Restorative Housing Units. (5-ACI-4A-04, 5-ACI-4B-03)
- B. Security Level W institutions, Security Level 1 institutions, Baskerville Correctional Center, and Deerfield Correctional Center do not have a Restorative Housing Unit.
 1. When warranted, inmates will be expeditiously transferred to the designated parent/host institution for placement in the Restorative Housing Unit.
 2. The Shift Commander or a higher authority may authorize the use of restraints and/or placement of an inmate in a holding cell pending transfer to the designated parent/host institution.
- C. The Red Onion State Prison/Wallens Ridge State Prison Local Operating Procedure for the *Restorative Housing Reduction Step Down Program*, governs Restorative Housing Units for Security Level 6 and S inmates.
- D. Restorative Housing Units at institutions designated to house multiple security level inmates will operate in accordance with Attachment 1, *Restorative Housing Operating Level Designation*.
- E. In the event of a widespread institutional disruption, natural disaster, or other unusual occurrence that requires emergency action, the Facility Unit Head may temporarily suspend any or all portions of this operating procedure.
 1. Inmates involved in the emergency may be detained without being served an *Institutional Classification Authority Hearing Notification* or conducting an ICA Hearing throughout the course of the emergency.
 2. Upon restoration of institutional order, all detained inmates will be subject to ICA and other reviews in accordance with this operating procedure.

II. Restorative Housing Unit and Initial Inmate Placement

- A. Cool-Down Spaces
 1. Cool-down spaces provide inmates with a safe and secure place in general population without the use of the additional resources required by placing the inmate in a Restorative Housing Unit.
 2. When appropriate, staff can utilize the institution's cool-down space to manage an inmate during a potentially disruptive situation as an alternative to placement in the Restorative Housing Unit; see ~~Attachment 1, Cool-Down Space Operations Plan~~. (changed 7/1/24)
- B. Restorative Housing Units provide for personal protection and custodial management measures, exercised for the welfare of the inmate, the institution, or both and staff will not place an inmate in the Restorative Housing Unit as punishment. The goals of a Restorative Housing Unit are to: (5-ACI-4B-02)
 1. Manage inmates in a safe and secure manner.
 2. Provide a consistent, systems approach to the operation of Restorative Housing Units in all institutions

- to maximize positive outcomes in inmate adjustment.
3. Provide opportunities for inmates to increase their likelihood for success in a full privilege general population.
- C. Only the Shift Commander or above has the authority to authorize an inmate's placement in the Restorative Housing Unit.
1. Staff, such as but not limited to a Corrections Officer, Investigator, Mental Health Clinician, or Health Authority may, when warranted, refer an inmate to the Restorative Housing Unit.
 2. The Shift Commander will meet with the referring staff member and the inmate to decide whether to place the inmate in the Restorative Housing Unit or return the inmate to general population.
 3. The Shift Commander will only place inmates in a Restorative Housing Unit when:
 - a. An inmate voluntarily requests placement for their personal protection.
 - b. An inmate needs placement for their personal protection.
 - c. An inmate's placement is necessary to prevent imminent threat of physical harm to the inmate or others.
 - d. An inmate's behavior threatens the orderly operation of the institution.
 4. If the inmate is making an informed voluntary request for Restorative Housing Unit placement, the inmate must complete an *Informed Voluntary Request for Restorative Housing Unit* 841_F28. (5-ACI-4A-05)
 - a. When an inmate requests placement in the Restorative Housing Unit for their personal protection the institution bears the burden of establishing a basis for refusing the inmate's request.
 - b. Inmates in the Restorative Housing Unit because they voluntarily requested placement for their personal protection may voluntarily refuse continued placement in the Restorative Housing Unit and will document their refusal on the *Informed Voluntary Request for Restorative Housing Unit* 841_F28. (added 7/1/23)
 - c. The MDT will review all inmates requesting placement in the Restorative Housing Unit for their own protection for assignment to Protective Custody.
 5. Staff must provide inmates in the Restorative Housing Unit for their own protection who are subject to removal from the Restorative Housing Unit, not by their own request, with a timely and meaningful opportunity to contest their removal.
 - a. Any inmate may contest their removal from the Restorative Housing Unit by submitting a *Written Complaint* 866_F3 directly to the Facility Unit Head.
 - b. Once an inmate submits a *Written Complaint* 866_F3, staff must not move the inmate from the Restorative Housing Unit until the Facility Unit Head responds to the inmate's *Written Complaint* 866_F3.
 - c. Staff must contact the Institutional Ombudsman immediately prior to removing an inmate from the Restorative Housing Unit to determine if the inmate submitted a *Written Complaint* 866_F3 and whether the Facility Unit Head responded to the inmate's complaint.
 - d. The Facility Unit Head's response will determine if the inmate is to be removed or if the inmate can remain in the Restorative Housing.
 6. The Shift Commander must not place an inmate identified as High Risk Sexual Victim (HRSV) or alleged to have suffered sexual abuse or sexual harassment in the Restorative Housing Unit without the inmate's consent unless an assessment of all available alternatives has been made, and the Mental Health Clinician in consultation with the Shift Commander and Regional PREA Analyst has determined that there are no available alternative means of separation from likely abusers.
- D. The Shift Commander will assign the inmate to an appropriate housing status as follows:
1. When an inmate is removed from general population and placed in the Restorative Housing Unit for

exhibiting behavior that presents an imminent threat of physical harm to the themselves or another person, or that threatens the orderly operation of the institution because there is no other alternative to ensure the safety and security of the inmate and the institution; the Shift Commander or above will initially assign the inmate to RHU status .

2. When an inmate is removed from general population and placed in the Restorative Housing Unit with the inmate's informed and voluntary request for personal protection or when the inmate needs such confinement for their protection, the Shift Commander or above will assign the inmate to Alt-GP status when there is no other alternative to ensure the safety and security of the inmate. (5-ACI-4A-05) (5-ACI-4B-02)

III. Restorative Housing Unit Assignment Mental Health and Medical Reviews

- A. Qualified health care personnel will conduct an assessment per protocols established by the Health Authority. This assessment will determine the impact on any medical conditions exhibited by the inmate and the possible alternatives that may be available to compensate for such conditions. (5-ACI-4A-01, 5-ACI-4B-28)
- B. A Mental Health Clinician will screen the inmate before the inmate's placement or within one working day after placement in the Restorative Housing Unit to evaluate the impact an inmate's assignment to RHU status will have on the mental health conditions exhibited by the inmate. (5-ACI-4B-10)
- C. Health Care or health trained staff, at institutions without a Mental Health Clinician, should interview the inmate within one working day after placement in the Restorative Housing Unit.

IV. Inmate Classification Reviews

- A. The Facility Unit Head or other Administrative Duty Officer, not involved in the initial placement, must review the inmate's assignment to RHU status within 24 hours of to determine if the placement is warranted. The Facility Unit Head or other Administrative Duty Officer can either approve the inmate's assignment to RHU status or return the inmate to their previous status. (5-ACI-4B-02)
- B. The MDT conducts all ICA hearings to review inmates assigned to the Restorative Housing Units and will make a recommendation concerning the inmate's transitional action plan as well as the inmate's security level, good time class level, transfer, etc. (5-ACI-4B-31)
- C. Within three working days of an inmate's initial assignment to RHU status, the MDT will review all available, relevant information and will conduct a formal ICA hearing to:
 1. Determine if the inmate can return to their previous status (general population or step-down), another appropriate internal status in the Restorative Housing Unit, or if the inmate will remain on RHU status.
 2. Develop an initial transitional action plan if the inmate will remain on RHU status to transition the inmate out of the Restorative Housing Unit as soon as safely possible.
 3. Review all SMI inmates and determine if each inmate can be released to full privilege general population or be assigned to SD-1 or SD-2 status at their current institution within 28 days of their initial assignment to RHU status. (5-ACI-4B-30)
 - a. If an SMI inmate will not release to full privilege general population or be assigned in SD-1 or SD-2 within 28 days, the MDT will refer the inmate to Marion Correctional Treatment Center's (MCTC) Acute Care Unit, a Mental Health Residential Treatment Unit or other Mental Health Unit, a Secure Diversionary Treatment Program (SDTP) or a Secured Allied Management Unit (SAM).
 - b. The Chief of Housing and Programs or the Unit Manager in their absence must notify the Special Program Manager for Diversionary Housing by email to the DOCSMI mailbox and will provide the inmate's name and number, date assigned to RHU status, proposed transitional action plan, and any supporting documentation on the same day that the MDT holds the formal ICA hearing.
- D. Within 10 working days of an inmate's initial assignment to RHU status, the MDT will conduct a formal

ICA hearing to: (5-ACI-4B-31)

1. Evaluate the inmate and determine if the inmate will remain in the Restorative Housing Unit on RHU status or be released to general population at their current institutional assignment.
2. Review any inmate who will remain in the Restorative Housing Unit for placement in a step-down status and as soon the risk is reduced to an acceptable level return the inmate to general population.
3. Recommend a transfer for inmates who cannot return to the full privilege general population at the current institution but would be suitable for general population at another equal or higher-level institution.
4. Review all pregnant inmates and inmates under the age of 18 to evaluate the inmate and determine: (5-ACI-4B-32, 5-ACI-4B-33)
 - a. If the inmate can be released to full privilege general population or be assigned to SD-1 or SD-2 status at their current institution within 28 days of their initial assignment to RHU status.
 - b. If the inmate cannot release to full privilege general population or be assigned in SD-1 or SD-2 status within 28 days; the MDT will review the inmate to determine appropriate alternate housing.
 - c. If a pregnant inmate or inmate under the age of 18 is also SMI and cannot be released to full privileged general population or be assigned to SD-1 or SD-2 status within 28 days; the MDT will consult with the Mental Health Clinician Senior at CCS to determine appropriate alternate housing. (5-ACI-4B-30)

V. Transitional Action Plan Development

- A. MDT members will evaluate each inmate assigned to RHU status and develop the inmate's initial transitional action plan at the first formal ICA hearing in accordance with this operating procedure.
 1. Evaluation tools and program components include but are not limited to the following: (5-ACI-4B-31)
 - a. Review of COMPAS findings
 - b. Case Plan review and development
 - c. History of behavior
 - d. Risk/Needs assessment
 - e. An assessment of:
 - i. Disciplinary Violation Goals - Reduce or eliminate disciplinary violations.
 - ii. Mental Health Goals - Medication compliant, number of office visits per month, etc.
 - iii. Responsible Behavior Goals - Including personal hygiene, standing for count, cell compliance, deportment; satisfactory rapport with staff, and inmates, and others with compliance as documented in VACORIS during MDT reviews. on the *Responsible Behavior Goals Progress Report 841-F22*. (changed 2/1/24)
 - iv. Journaling and/or program assignments relevant to inmate needs and goals.
 2. The Transitional Action Plan is designed to address inmate behaviors and needs so the inmate can enter a full privilege general population as soon as safely possible. The inmate's Transitional Action Plan can include but are not limited to the following options:
 - a. RHU Status

For inmates that must be managed under maximum security conditions.
 - b. Step-down 1 (SD-1) Status

For inmates, whose behavior does not warrant assignment to RHU status or whose behavior has improved since assignment to RHU status to include completion of required programmatic goals.
 - c. Step-down 2 (SD-2) Status

For inmates identified as needing a more structured living environment than in full privileged general population but do not need the level of control provided in RHU or SD-1 status and/or

inmates whose behavior has improved since assignment to RHU or SD-1 status to include completion of required programmatic goals.

d. Steps to Achieve Reintegration (STAR) Program

For inmates who refuse assignment to full a general population setting due to an unspecified fear and not for a specific fear or threat, violent or aggressive behavior, or legitimate protective custody; see Operating Procedure 830.5, *Transfers, Institution Reassignments*.

e. Protective Custody

For inmates in need of personal protection and require separation from other inmates due to their personal security needs; inmates voluntarily requesting assignment to and requiring assignment to a Protective Custody Unit may be managed in restorative housing, as appropriate, pending assignment and transfer; see Operating Procedure 830.1, *Institution Classification Management*, and Operating Procedure 830.5, *Transfers, Institution Reassignments*.

f. Marion Correctional Treatment Center's (MCTC) Acute Care Unit

For SMI inmates meeting the legal commitment criteria; see Operating Procedure 730.3, *Mental Health Services: Levels of Service*.

g. Mental Health Residential Treatment Unit or Mental Health Unit

For SMI inmates who do not meet the criteria for commitment to an Acute Care Unit but is unable to function in a general population; see Operating Procedure 730.3, *Mental Health Services: Levels of Service*.

h. SDTP

For inmates frequently engaging in assaultive, disruptive, and/or unmanageable behavior; see Operating Procedure 830.5, *Transfers, Institution Reassignments* s.

i. SAM Unit

For SMI inmates needing specialized placement, see Operating Procedure 830.5, *Transfers, Institution Reassignments*.

B. Inmates who refuse to participate in their transitional action plan are subject to disciplinary action; see Operating Procedure 861.1, *Offender Discipline, Institutions*.

1. Staff will give inmates at Security Level 2 and 3 institutions refusing to journal and/or participate in other program assignments a warning for their first refusal. Staff will charge the inmate with Offense Code 200a, *Refusing to work or refusing to attend school or other program assignments mandated by procedure or by law, or failure to perform work or program assignment as instructed* if the inmate again refuses to participate.
2. Staff will charge inmates at Security Level 4 and above institutions who refuse to participate with Offense Code 119f, *Refusal to participate in the Restorative Housing Unit assignment* and managed in the Restorative Housing Unit at their current location.
3. Staff can only charge the inmate once during a continued period of refusal.
 - a. After the first refusal and warning, staff must give the inmate the opportunity to comply.
 - b. Staff cannot charge the inmate until the next seven-day *Restorative Housing Status Review*.
4. Upon conviction for refusal to participate, staff should review the inmate for a reduction to Good Time Class IV; see Operating Procedure 830.3, *Good Time Awards*.

VI. Mental Health and Health Care Reviews and Care

- A. No inmate will be denied necessary or proper health, dental, and or mental health care while assigned to the Restorative Housing Unit.
- B. A Mental Health Clinician, within three working days after the inmate's initial assignment to RHU status, must review each SMI inmate.

1. Unless mental health attention is needed more frequently, a Mental Health Clinician will visit each inmate on RHU status weekly; see Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*. (5-ACI-4B-26, 5-ACI-4B-28, 5-ACI-4B-30)
 - a. Staff will announce and record the presence of a Mental Health Clinician in the Restorative Housing Unit.
 - b. A Mental Health Clinician will personally interview each inmate remaining on RHU status for more than seven days.
 - c. If the inmate's confinement on RHU status continues beyond seven days, a Mental Health Clinician will conduct a mental health screening every seven days thereafter or more frequently if clinically indicated. (5-ACI-4A-10, 5-ACI-4B-10)
2. Any inmate with identified mental health problems who is placed on RHU status will be monitored per Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.

C. Health Care Reviews and Care

1. Health Care services will be provided in accordance with Operating Procedure 720.1, *Access to Health Services*, and Operating Procedure 720.2, *Medical Screening, Classification, and Levels of Care*.
 - a. Inmates may request dental services, if needed; dental staff will determine the need to provide dental care while the inmate is in a Restorative Housing Unit.
 - b. Staff will provide the inmate with their prescribed medications in accordance with Operating Procedure 720.5, *Pharmacy Services*. (5-ACI-4A-15, 5-ACI-4B-14)
 2. Qualified health care personnel should conduct a physical screening i.e., weight and vital signs taken on each "at risk" inmate and should check each inmate for symptoms of possible side-effects to prescribed medication no less than once every 14 days.
 3. Unless medical attention is needed more frequently, each inmate in on RHU status will receive a daily visit from qualified health care personnel to ensure the inmate has access to the health care system; not required for institutions that do not have qualified health care personnel on duty on weekends. (5-ACI-4A-01, 5-ACI-4A-12, 5-ACI-4B-12, 5-ACI-4B-28)
 - a. Staff will announce and record the presence of qualified health care personnel.
 - b. Staff will record inmate health care requests, qualified health care personnel visits, and medications administered or refused.
 - c. Medical Practitioners are not required to visit the Restorative Housing Unit; inmates will submit a request to be seen by the Medical Practitioner through the established sick call process.
- D. When an in-person assessment or examination of an inmate in RHU status by a Mental Health Clinician or other qualified health care personnel is conducted in the cell, the inmate will be restrained and instructed to sit on their bunk.

VII. Restorative Housing Unit - Status Reviews

A. Review by the Facility Unit Head and MDT

1. The MDT will conduct a review of all inmates assigned to RHU, Alt-GP, SD-1, and SD-2 status, every seven days to monitor the appropriateness of the inmate's status. (5-ACI-4A-07, 5-ACI-4B-08)
 - a. The MDT will document their reviews on the *Multi-Disciplinary Team Hearing Docket*.
 - b. The Facility Unit Head will sign a printed copy of the *Multi-Disciplinary Team Hearing Docket* documenting their approval.
 - c. If a formal review of the inmate's status is warranted, the inmate will be served an *Institutional Classification Authority Hearing Notification*; see Operating Procedure 830.1, *Institution Classification Management*. (5-ACI-4A-07, 5-ACI-4B-08)
2. The Facility Unit Head will conduct a weekly review of all inmates assigned to RHU, Alt-GP, SD-1,

- and SD-2 status, to include inmates on Restorative Housing, SD-1, and SD-2 status. The Facility Unit Head will review:
- a. The reasons why a less restrictive setting could not be utilized.
 - b. An action plan for transitioning the inmate out of the Restorative Housing Unit as soon as safely as possible.
 - c. The date and duration of the inmate's placement in the Restorative Housing Unit.
 - d. The statutory basis for such placement; see COV §53.1-39.2, *Restorative housing; restrictions on use*.
3. The Facility Unit Head and MDT will review all inmates identified as HRSV or an alleged victim of sexual abuse to determine whether there is a continuing need for separation from full privileged general population.
- B. The MDT will formally review an inmate's status at least once every 30 days while the inmate is assigned to the Restorative Housing Unit. (5-ACI-4A-08, 5-ACI-4B-09, 5-ACI-4B-31)
1. Staff will notify the inmate of the formal hearing and their due process rights using the *Institution Classification Authority Hearing Notification*.
 2. The MDT will conduct a formal due process hearing and review the inmate's adjustment and behavior; see Operating Procedure 830.1, *Institution Classification Management*.
 - a. The MDT will evaluate the inmate and determine whether to recommend the inmate continue in their current housing status in the Restorative Housing Unit or be assigned to another status.
 - b. The MDT should base its recommendation on the reason for the assignment, the inmate's behavior, and any progress made on the transitional action plan and their treatment objectives.
 3. The MDT should determine whether the inmate poses an unacceptable risk to them self to include personal protection and keep separates in the general population, or is a threat to other inmates, staff, or the safe, secure operation of the institution.
 4. The MDT may recommend a transfer to another institution when return to the full privilege general population at the institution is not appropriate.
 5. When the MDT determines that an inmate's behavior or circumstances no longer warrant their current housing status in the Restorative Housing Unit, the MDT should recommend assignment to a different housing status in the Restorative Housing Unit, transfer to a higher or equal security level institution, or release to full privilege general population.
- C. Inmates assigned to a Restorative Housing Unit in excess of 30 days should not be discharged directly to the community. (5-ACI-4B-29)
1. If the inmate will be discharged from the Restorative Housing Unit, a request for approval must be submitted via email to the ~~Statewide~~ Special Program Manager for Restorative Housing. (changed 7/1/23)
 2. In addition to the release requirements mandated for all inmate in Operating Procedure 050.3, *Facility Release of Offenders*, Operating Procedure 720.3, *Health Maintenance Program*, and Operating Procedure 820.2, *Inmate Re-Entry Planning*, staff at a minimum must:
 - a. Develop a release plan tailored to specific needs of the inmate.
 - b. Notify the inmate's supervising P&P Office who will contact state and local law enforcement.
 - c. Notify the releasing inmate of applicable community resources.
 - d. Notify the Victim through Victim Services, if applicable.
- D. The MDT may conduct a formal ICA hearing any time a significant change in circumstances or the inmate's behavior warrants a review; see Operating Procedure 830.1, *Institution Classification Management*.

VIII. Restorative Housing Unit Operational Management

A. Restorative Housing Unit Staff Duties and Responsibilities

1. A Corrections Officer must check each inmate assigned to RHU status twice per hour, no more than 40 minutes apart, on an irregular schedule. (5-ACI-4A-11)
 - a. Corrections Officers should check inmates assigned to SD-1 or SD-2 status on a similar schedule.
 - b. Corrections Officers will conduct more frequent checks or maintain continuous observation of inmates who are violent, mentally disordered, demonstrate unusual or bizarre behavior, or are suicidal; see Operating Procedure 730.5, *Mental Health and Wellness Services: Behavior Management*.
2. Corrections Officers must strip search each inmate before the inmate is removed or allowed to leave their cell.
3. A Corrections Officer must frisk the inmate, immediately after removal from their cell or other secure area and prior to return the inmate to their cell.
4. A Corrections Officer must search all items entering the Restorative Housing Unit to detect and eliminate contraband.
5. Corrections Officers will only remove one inmate out of a secure area at a time unless each inmate is restrained with separate security escorts.
 - a. With approval of the Facility Unit Head, an exception may be made for inmates participating in small group programs (SD-2 - maximum ten inmates) within the Restorative Housing Unit. (5-ACI-4B-31)
 - b. Corrections Officers must keep inmates apart from all known keep separates. Protective custody inmates and their keep separates must be housed in separate cells and have no direct contact unless both inmates are restrained with separate security escorts.
6. A Corrections Officer must inspect each Restorative Housing Unit cell prior to the inmate's initial placement in the cell and when an inmate is removed from the cell upon the inmate's removal from the cell and will document the results of the inspection. (changed 7/1/23)
 - a. This inspection is a general review of sanitation conditions and scan for contraband.
 - b. One Corrections Officer may conduct the cell inspection and the inmate need not be present.
 - c. The Corrections Officer must document they completed a thorough search and inspection of the cell before another inmate is moved into the cell.
7. Corrections Officer must search (strip search for Security Level 3 and higher) inmate workers upon entering and exiting the Restorative Housing Unit.
 - a. Inmates from other general population housing units may provide housekeeping and other services in the Restorative Housing Unit if specifically authorized by the Chief of Security.
 - b. A Corrections Officer must always maintain direct supervision of the inmate.
 - c. Inmate workers must not have physical contact with a Restorative Housing Unit inmate except as required for services rendered, i.e., barber.
8. On days that showers and/or outside recreation are scheduled at the institution, a Security Supervisor will blow their whistle and make an announcement, at the beginning of their round, to alert inmates to their presence and to determine which inmates want to participate in showers and/or outside recreation.
9. The Shift Commander or higher authority will visit the Restorative Housing Unit daily. (5-ACI-4A-12, 5-ACI-4B-12)

IX. Restorative Housing Unit Orientation, Services, and General Living Conditions

- A. Staff will provide all inmates upon their placement in the Restorative Housing Unit with written orientation materials, on the services available and how to access them.

1. During orientation staff will provide, at a minimum, the following institution specific information:
 - a. How to access legal services.
 - b. How to access telephone services including legal and emergency calls. (5-ACI-4A-25, 5-ACI-4B-25)
 - c. How to access counseling services and program staff upon request and for emergencies. (5-ACI-4A-12, 5-ACI-4B-12)
 - d. How to access the Chaplain or other available religious services.
 2. Each inmate must sign an institution specific document confirming their receipt of the written orientation materials.
- B. In general, the living conditions for inmates placed in the Restorative Housing Unit approximate the living conditions provided to inmates in full privilege general population, but there are certain exceptions. All exceptions are clearly documented in this operating procedure. (5-ACI-4A-02, 5-ACI-4B-04)
1. Housing Conditions
 - a. Restorative Housing Unit cells/rooms should be well ventilated, adequately lighted, appropriately heated and should always be maintained in a sanitary condition.
 - b. Inmates can converse with and be observed by staff while in their cell/room. (5-ACI-4A-02, 5-ACI-4B-04)
 - c. Except in an emergency, the number of inmates confined to each cell/room should not exceed the number for which it is designed, usually one inmate per cell/room.
 - i. With the approval of the Facility Unit Head, in cells with proper equipment, suitable inmates in SD-2 status may be double bunked if the inmates are screened in accordance with Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted).
 - ii. If in an emergency the number of inmates exceeds the design capacity, the Facility Unit Head, or designee, should provide temporary written approval for staff to exceed the design capacity, and alleviate the situation as promptly as possible by providing other housing for the inmates so confined.
 - d. Treatment staff have space available to them inside the Restorative Housing Unit or external to the unit for consultation with inmates. (5-ACI-4B-04)
 - e. All housing areas in the Restorative Housing Unit, to include cells housing inmates identified as potentially suicidal, have readily accessible equipment, and supplies necessary in an emergency.
 2. Inmate Correspondence
 - a. Inmates are generally subject to the same correspondence regulations and privileges as inmates assigned to full privilege general population; see Operating Procedure 803.1, *Inmate and Probationer/Parolee Correspondence*. (5-ACI-4A-20, 5-ACI-4B-20)
 - b. Secure messaging is a privilege, staff will not provide inmates on RHU status access to a kiosk to retrieve or send their secure messages; when feasible, inmates assigned to SD-1 and SD-2 status will be provided access the kiosk. (5-ACI-4B-31)
 3. Inmate Packages
 - a. Inmates will not receive the contents of packages unless approved by the Facility Unit Head.
 - b. Staff may store disapproved items if the items are approved for full privilege general population; disapproved items will be returned to the sender at the expense of the inmate or the sender, or disposed of in accordance with Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 4. Inmate Meals
 - a. Staff must not use food as a disciplinary measure; punitive diets i.e., bread and water are prohibited. (5-ACI-5C-08)

- b. Staff will provide inmates with the same number and type of meals served to full privilege general population.
 - i. Inmates on a religious will be provided their religious diets meal trays if the meals are available at that institution.
 - ii. Inmates not on a religious diet will designate whether they want to receive regular or alternate entrée meal trays.
 - c. The Restorative Housing Unit Supervisor must allow inmates the opportunity to change their chosen meal tray every 90 days that they remain in a Restorative Housing Unit.
 - d. Staff will document and manage inmates who refuse to eat and abuse tray or food products served to them in accordance with Operating Procedure 420.2, *Use of Restraints and Management of Inmate Behavior*.
5. Legal Access
- a. Inmates are not prohibited from conducting litigation on their own behalf; staff will afford inmates with access to the Facility Court Appointed Attorney and to law library materials; see Operating Procedure 866.3, *Inmate and CCAP Probationer/Parolee Legal Access*. (5-ACI-4A-22, 5-ACI-4B-22)
 - b. Attorney visits will occur during normal working hours of the institution unless otherwise approved by the Facility Unit Head or designee; see Operating Procedure 851.1, *Visiting Privileges*.
 - c. Inmates will conduct legal calls through the telephone system; see Operating Procedure 866.3, *Inmate and CCAP Probationer/Parolee Legal Access*.
6. Telephone Services (5-ACI-4A-25, 5-ACI-4B-25)
- a. Staff will allow inmates to place telephone calls in accordance with Operating Procedure 803.3, *Inmate and CCAP Probationer/Parolee Telephone Service*. (5-ACI-4B-31)
 - b. Inmates are allowed access to the telephone system based on their housing status:
 - i. RHU status inmates are allowed two calls per month.
 - ii. SD-1 status inmates are allowed four calls per month.
 - iii. SD-2 status inmates are allowed six calls per month.
- C. Staff will provide inmates with laundry, clothing, bedding, and linen exchange, barbering, and hair care services and access to privileges, and work opportunities to the extent possible while ensuring the inmate's safety.
- 1. Staff must provide all inmates clothing that is not degrading, linen, and bedding upon the inmate's placement in the Restorative Housing Unit. (5-ACI-4A-15, 5-ACI-4B-15)
 - a. Staff will strip search the inmate, remove any inmate personal clothing, and issue the required state clothing, linen, and bedding; see Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 - b. At least three times per week, staff must issue clean state clothing so that such clothing is immediately available when an inmate removes their dirty clothes to be laundered.
 - c. Staff will issue a clean washcloth and towel on a one-for-one exchange basis when the inmate takes a shower or during a weekly linen exchange.
 - i. Linens must be exchanged weekly.
 - ii. Blankets will be exchanged as needed per the institution's schedule.
 - d. At the discretion of the Facility Unit Head, inmates may be issued the required amount of state clothing, wash clothes, towels, and linens on a weekly basis.
 - 2. Staff will provide inmates with the opportunity to shower and shave not less than three times each week and to sponge bathe whenever they choose. (5-ACI-4A-16, 5-ACI-4B-16)
 - a. Staff will allow inmates to possess a reasonable quantity of personal hygiene items consistent with the security needs of the institution and as determined by the Facility Unit Head. The following

- personal hygiene items are not permitted: (5-ACI-4A-15, 5-ACI-4B-15)
- i. Personal toothbrushes.
 - ii. Oils and lotions, except prayer oil.
 - iii. Razors.
- b. Because inmates can easily use toothbrushes and razors as a weapon, staff will provide inmates with these items.
- c. If the institution provides inmate's access to an electric razor, the razor should be cordless with removable cutting heads. Cutting heads and screen covers should be sanitized after each use by soaking in a solution of suitable disinfectant in accordance with manufacturer's instructions.
- d. Inmates will be allowed to take only the minimum hygiene items needed with them to shower. If the inmate does not have basic personal hygiene items and is indigent, staff should furnish them.
- e. Inmates will move directly to and from the showers.
3. Staff must ensure barbering and hair care services are available on a regular basis; see Operating Procedure 801.6, *Inmate and CCAP Probationer/Parolee Services*.
4. Personal Property
- a. Inmates will have access to basic personal items for use in their cells unless there is imminent danger that the inmate or any other inmate(s) will destroy an item, use it as a weapon or instrument of escape, or induce self-injury. (5-ACI-4A-15, 5-ACI-4B-15)
 - b. A Corrections Officer and the inmate, or two Corrections Officers in the inmate's absence, will inventory all personal property items when an inmate is placed in the Restorative Housing Unit; see Operating Procedure 802.1, *Inmate and CCAP Probationer/Parolee Property*.
 - i. Staff will issue only those items authorized on the appropriate *Authorized Personal Property Matrix*.
 - ii. In addition to property items allowed on the *Authorized Personal Property Matrix*, inmates assigned to SD-2 status, will be permitted to purchase consumable food items sold through the institution's commissary. (5-ACI-4B-31)
 - c. Other personal property items that are not issued to the inmate but are allowed at the inmate's security level and current institution will be placed in storage.
 - i. The inmate may submit a written request to receive their authorized personal property in storage i.e., hygiene items to replace items that have been consumed.
 - ii. Staff must document all property items removed from the inmate's property storage and issued to the inmate on the initial inventory completed when the inmate was placed in the Restorative Housing Unit.
 - d. Staff will give the inmate a copy of the property inventory and the inmate must sign for all property issued to them while assigned to the Restorative Housing Unit.
 - e. Inmates will only be allowed to purchase personal property items listed on the appropriate *Authorized Personal Property Matrix* while in the Restorative Housing Unit.
 - i. Staff will hold pre-approved personal property items received but not authorized in Personal Property and will issue these items to the inmate upon their return to full privilege general population.
 - (a) The Personal Property Officer will notify the inmate using the *Personal Property Request - Add/Drop* 802_F1.
 - (b) The inmate will not be allowed to view, try-on, or examine this property.
 - ii. The Restorative Housing Unit Supervisor will be notified when an inmate will be returned to full privilege general population and will have the inmate's property ready for issuance to the inmate. The inmate must sign for the property.
5. Visiting Privileges
- a. Inmates will have opportunities for visitation unless there are substantial reasons for withholding

- such privileges. (5-ACI-4A-21, 5-ACI-4B-21)
- b. The Facility Unit Head determines the visitation schedule based on available staff and resources.
 - i. Staff should provide inmates a maximum of one visit per week for one hour with no more than five visitors.
 - ii. The Facility Unit Head may set a lower limit on the number of visitors due to space limitations.
 - iii. Unless the Facility Unit Head approves otherwise, visitation will be non-contact.
- D. Within the resources available, unless security or safety considerations dictate otherwise, staff will provide inmates with meaningful access to programs such as Interactive Journals and group elective options, educational services, commissary services, library services, social services, treatment services, religious guidance, and recreation programs. (5-ACI-4A-27, 5-ACI-4B-26)
1. Interactive Journals and Group Electives
 - a. Inmates will complete one hour of Interactive Journaling with group facilitation twice per week.
 - b. Daily group elective options will be provided during non-programming days.
 2. Commissary
 - a. Commissary orders will be taken at least three times per month on scheduled days.
 - b. Inmates are allowed a \$45.00 spend limit per month. Inmates on SD-2 status will be allowed an additional \$15.00 per month of consumable items. (5-ACI-4B-31)
 - c. Glass, metal, and other hazardous containers or products may be restricted if determined by the institution to pose a risk to security.
 - d. Security writing instruments should be provided by the institution. Inmates assigned to a Restorative Housing Unit more than 30 days may be required to purchase personal security writing instruments after the initial issue.
 - e. A list of approved commissary items should be available in the Restorative Housing Unit.
 3. Educational and Library Book Services (5-ACI-4A-23, 5-ACI-4B-23)
 - a. Inmates will have access to library books for personal use see Operating Procedure 801.6, *Inmate and CCAP Probationer/Parolee Services*.
 - b. Inmates will have access to educational services as determined by the institution Principal.
 4. Counseling Services (5-ACI-4A-12, 5-ACI-4B-12)

At a minimum, each inmate on RHU status will receive a weekly visit from treatment staff.
 5. Religious Guidance
 - a. Inmates are afforded access to religious guidance.
 - b. Inmates may request visits from spiritual leaders in accordance with Operating Procedure 851.1, *Visiting Privileges*.
 6. **Meaningful** Out of Cell Activity (5-ACI-4A-24, 5-ACI-4B-24, 5-ACI-4B-31) (added 2/1/24)
 - a. All inmates in the Restorative Housing Unit will be offered a minimum of four hours of meaningful out of cell activity, **cell** programmatic interventions, or other congregate activities per day aimed at promoting personal development or addressing underlying causes of problematic behavior. (changed 2/1/24)
 - b. Out of cell time may include recreation in a congregate setting unless exceptional circumstances mean that doing so would create significant and unreasonable risk to the safety and security of other incarcerated persons, the staff, or the institution.
 - c. Staff may offer an inmate less than four hours of out-of-cell programmatic interventions or other congregate activities per day only when the Facility Unit Head determines a lockdown is required to ensure the safety of the institution.
 - d. **Staff are encouraged to utilize trained and carefully selected peer mentors to assist with facilitating**

out-of-cell programs and activities in RHU settings. (added 7/1/24)

- E. Staff will provide inmates on Alt-GP status with similar opportunities for activities, movement, and social interactions as provided to inmates in general population, taking into consideration the inmate's safety and the safety of others. Staff will manage inmates on Alt-GP status with the same movement and privileges afforded to inmates in SD-2 status.
- F. Staff must provide security Level S inmates housed in the Restorative Housing Unit more than 90 consecutive days (SM-Special Management) or 180 consecutive days (IM-Intensive Management) with adequate recreation, program services, and privileges consistent with the requirements of the Red Onion State Prison/Wallens Ridge State Prison local operating procedure addressing the *Restorative Housing Reduction Step-Down Plan*.
- G. The Shift Commander must approve any exception to the normally provided living conditions, activities, and services; exceptions must be documented in accordance with Operating Procedure 425.4, *Management of Bed and Cell Assignments* (Restricted). (5-ACI-4A-24, 5-ACI-4B-16, 5-ACI-4B-24)
- H. If access to activities and services is more restrictive for inmates identified as HRSV or who have alleged to have suffered sexual abuse or sexual harassment than for others in their housing status, staff must document the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.

REFERENCES

COV §53.1-39.2, *Restorative housing; restrictions on use*

[Operating Procedure 050.3, Facility Release of Offenders](#)

[Operating Procedure 420.2, Use of Restraints and Management of Inmate Behavior](#) (Restricted)

[Operating Procedure 720.1, Access to Health Services](#)

[Operating Procedure 720.2, Medical Screening, Classification, and Levels of Care](#)

[Operating Procedure 720.3, Health Maintenance Program](#)

[Operating Procedure 720.5, Pharmacy Services](#)

[Operating Procedure 730.3, Mental Health Services: Levels of Service](#)

[Operating Procedure 730.5, Mental Health and Wellness Services: Behavior Management](#)

[Operating Procedure 801.6, Inmate and CCAP Probationer/Parolee Services](#)

[Operating Procedure 802.1, Inmate and CCAP Probationer/Parolee Property](#)

[Operating Procedure 803.1, Inmate and Probationer/Parolee Correspondence](#)

[Operating Procedure 803.3, Inmate and CCAP Probationer/Parolee Telephone Services](#)

[Operating Procedure 820.2, Inmate Re-Entry Planning](#)

[Operating Procedure 830.1, Institution Classification Management](#)

[Operating Procedure 830.3, Good Time Awards](#)

[Operating Procedure 830.5, Transfers, Institution Reassignments](#)

[Operating Procedure 851.1, Visiting Privileges](#)

[Operating Procedure 861.1, Offender Discipline, Institutions](#)

[Operating Procedure 866.3, Inmate and CCAP Probationer/Parolee Legal Access](#)

ATTACHMENTS

[Attachment 1, Restorative Housing Operating Level Designation](#)

FORM CITATIONS

[*Mental Health and Wellness Services Screening 730_F12*](#)

[*Personal Property Request Add/Drop 802_F1*](#)

~~Responsible Behavior Goals Progress Report 841_F22~~ (deleted 2/1/24)

[*Informed Voluntary Request for Restorative Housing Unit 841_F28*](#)

[*Written Complaint 866_F3*](#)