



STATE BOARD OF CORRECTIONS

**BOARD POLICY NUMBER: 30-3**

SUBJECT: Review of Death of Inmates in Local Correctional Facilities

DATE: October 1, 2017

30-3.1 **POLICY** The Board of Corrections has the responsibility to review the death of any inmate who was incarcerated in a local correctional facility at the time of death or cause of death in order to determine the circumstances surrounding the inmate's death, including identifying any act or omission by the facility or any employee or agent thereof that may have directly or indirectly contributed to the inmate's death, and whether the facility and employee(s) or agent(s) were acting or operating in compliance with the regulations promulgated by the Board.

30-3.2 **AUTHORITY** Code of Virginia, Sections

[53.1-5](#), Powers and Duties of Board

[53.1-6](#), Board may administer oaths, conduct hearings and issue subpoenas

[53.1-69](#), Board may prohibit confinement and require transfer of prisoners in substandard facilities

[53.1-69.1](#), Review of death of inmates in local correctional facilities

[53.1-70](#), Jurisdiction of court to enforce orders of Board; proceedings

[53.1-125](#), Failure of sheriffs or jail superintendents to comply with requirements of board; filing of complaint; withholding salary

30-3.3 **REFERENCES**

[6VAC15-40-110](#), Serious Incident Reports

30-3.4 **IMPLEMENTING PROCEDURES**

A. Administration

1. This policy is developed and implemented in accordance with subdivision 5 of [§53.1-5](#) for the review of the death of any inmate that the Board determines warrants review that occurs in any local, regional, or community correctional facility. For purposes of this policy, inmate is defined as any person under the custody and control of any local, regional, or community correctional facility or lockup authorized by the Virginia Board of Corrections for the confinement of prisoners.
2. The Chairman of the Board of Corrections shall designate three Board members to serve on the Jail Review Committee.
3. The Department of Corrections shall designate staff to serve as the Jail Review Unit.
  - a. Jail Review Unit staff shall conduct reviews of jail incidents under the authority and guidance of the Board of Corrections and the Jail Review Committee.
  - b. The Certification Supervisor of the Compliance and Accreditation Unit, Department of Corrections (DOC) shall provide administrative supervision as required.
  - c. Jail Review Unit staff and any other DOC staff conducting reviews under this policy shall be considered agents of the Board of Corrections.
4. On motion and vote by the Board of Corrections, the Jail Review Committee may be directed to review and report to the Board on other serious incidents reportable under [§6VAC15-40-110](#), *Serious Incident Reports*, such as discharge of firearms, erroneous releases, escapes, fires, and hostage situations.

## B. Notification and Initial Review of Inmate Deaths

1. In accordance with the *Minimum Standards for Jails and Lockups*, §6VAC15-40-110, *Serious Incident Reports*, the pertinent facts of deaths and other serious incidents are reported to the Certification Supervisor of the Compliance and Accreditation Unit, Department of Corrections (DOC). Inmate deaths should be reported using the *Report of Inmate Death* (see Attachment 1)
2. Upon receiving notification of an inmate death, the Certification Supervisor or designee shall forward the report to the Jail Review Unit.
3. The Jail Review Unit shall review the report and gather additional information from the facility and other sources, as needed, to determine the initial category of death.
4. Jail Review Unit staff shall communicate their initial findings to the Jail Review Committee of the Board of Corrections using the *Initial Death Review Checklist* (see Attachment 2).
5. The Jail Review Committee shall provide guidance to the Jail Review Unit staff whether to consider the review complete i.e., death due to normal progression of a chronic illness, or whether further review is needed.
6. If the review of an inmate death is closed after the Initial Review, it may be re-opened if additional information becomes available that indicates further review is warranted.

## C. Death Review

1. If the Jail Review Committee determines that a full review is needed for a specific inmate death, Jail Review Unit staff shall conduct an administrative quality assurance review to determine the circumstances surrounding the inmate's death, including identifying any act or omission by the facility or any employee or agent thereof that may have directly or indirectly contributed to the inmate's death, and whether the facility and employee(s) or agent(s) were acting or operating in compliance with the regulations promulgated by the Board.
2. A review conducted by Jail Review Unit staff shall be separate and apart from any criminal investigation related to the incident.
3. If Jail Review Unit staff are unable to conduct a particular review because of another or other ongoing jail review(s) by the Jail Review Unit, the Board may request that the DOC assist in the conduct of such review.
4. Staff conducting death reviews in accordance with this policy shall be considered agents of the Board of Corrections operating under the authority of COV §53.1-6.
5. In conducting a death review, staff should collect all relevant information including but not limited to:
  - a. Intake Records
  - b. Medical/Mental Health Records
  - c. Inmate Requests, Complaints, Grievances
  - d. Visitor Logs
  - e. Phone Calls and any other Electronic Communications
  - f. Inspection Notes
  - g. Jail Reports, Records, Logs
  - h. Inmate Records
  - i. Video Footage
  - j. Medical Examiner Reports
  - k. Staff Interviews
  - l. Witness Interviews
  - m. Court Records

- n. Any other relevant records, reports, or interviews
- 6. If Jail Review Unit staff determines during the conduct of a death review that it is necessary to review the operation of an entity other than the local correctional facility in order to complete the review, they shall communicate with the Jail Review Committee for the Board to request that the Office of the State Inspector General review the operation of such entity if such entity falls within the authority vested in the Office of the State Inspector General pursuant to Chapter 3.2 (§ [2.2-307](#) et seq.) of Title 2.2.
- 7. Staff shall maintain the confidentiality of any confidential records or information obtained from a facility during the course of a review in accordance with state and federal law.

#### D. Reporting

- 1. Upon completion of a death review, Jail Review Unit staff shall prepare a detailed report of the findings of the review for immediate submission to the Board of Corrections Chairman and the Jail Review Committee. The Chairman shall determine if Board action is needed prior to the next scheduled Board meeting and initiate proceedings as appropriate.
- 2. Other than reports presented in public meetings of the Board of Corrections, all reports of death reviews conducted under this policy are excluded from the mandatory disclosure provisions of the Virginia Freedom of Information Act (VFOIA).
- 3. Jail Review Unit staff shall make a summary report at each Board of Corrections meeting to include reported deaths since the last meeting, initial reviews that did not proceed to full reviews, reviews completed since the previous meeting, and reviews currently active.

#### E. Board Actions

- 1. The Board shall evaluate each death review report to determine its adequacy and appropriateness under Board policies and procedures and whether there is any need for changes to the minimum standards for the construction, equipment, administration, and operation of local correctional facilities in order to prevent problems, abuses, and deficiencies in and improve the effectiveness of such facilities in preventing such deaths.
- 2. The Board may issue any order authorized under [§53.1-69](#) to correct any failure by employees, agents or the facility to comply with the Board's regulations.
- 3. Consistent with the requirements of the VFOIA, discussion of specific death review reports by the Board may be held in closed meetings conducted in accordance with [§2.2-3711](#) to maintain the confidentiality of any confidential records or information obtained from a facility during the course of a review.
- 4. After evaluation by the Board, the Jail Review Unit staff shall prepare a detailed report of the findings of any review, which shall be approved by the Jail Review Committee and submitted to the Governor, the Speaker of the House of Delegates, and the President pro tempore of the Senate. Such report may contain intended changes to the minimum standards for the construction, equipment, administration, and operation of local correctional facilities in order to prevent problems, abuses, and deficiencies in and improve the effectiveness of such facilities in preventing avoidable deaths in custody.
- 5. Any changes needed to the minimum standards for the construction, equipment, administration, and operation of local correctional facilities shall be communicated by the Board of Corrections to the DOC Agency Regulatory Coordinator to be initiated through the Administrative Process Act.

#### 30-3.5 EFFECTIVE DATE

October 1, 2017

30-3.6 SUPERSESSSION

First Issue

30-3.7 REVIEW DATE This policy must be reviewed and updated as necessary.

*Adopted by the Board of Corrections on September 20, 2017.*

*Signature Copy on File*

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Phyllis J. Randall, Chairman  
Board of Corrections



## Report of Inmate Death

Inmate Name:		DOC Number:	
Facility:		Intake Date:	
Date of Birth:		Date/Time of Death:	
Charge(s):			
Sentence:			
Housing Status:			
Legal Status:	<input type="checkbox"/> Intake	<input type="checkbox"/> Pre-trial	<input type="checkbox"/> Convicted/ not sentenced
		<input type="checkbox"/> Jail Sentence	<input type="checkbox"/> State Sentence
			<input type="checkbox"/> Other
Type of Death	(Preliminary assumption):	<input type="checkbox"/> Suicide	<input type="checkbox"/> Homicide
		<input type="checkbox"/> Accidental	<input type="checkbox"/> Natural
Location of Death:	<input type="checkbox"/> Inmate Living Area	<input type="checkbox"/> Segregation Cell	<input type="checkbox"/> Hospital
		<input type="checkbox"/> Work Area	<input type="checkbox"/> Other
Agencies investigating this incident:			
<b>Synopsis of Incident:</b>			
<b>Persons Involved:</b>			
Name:	Status: (Officer, Nurse, Inmate, etc.)	Involvement: (Witness, Suspect, etc.)	
<b>Report Submitted By:</b>			
Name Printed	Title	Date	
<b>Contact for Additional Information:</b>			
Name Printed	Title		
Telephone Number/Extension	Email Address		



### Initial Death Review Checklist

Inmate Name:		DOC Number:	
Facility:		Intake Date:	
Date of Birth:		Date/Time of Death:	
Charge(s):			
Sentence:			
Legal Status:	<input type="checkbox"/> Intake	<input type="checkbox"/> Pre-trial	<input type="checkbox"/> Convicted/ not sentenced
		<input type="checkbox"/> Jail Sentence	<input type="checkbox"/> State Sentence
			<input type="checkbox"/> Other
Type of Death	(Preliminary assumption):	<input type="checkbox"/> Suicide	<input type="checkbox"/> Homicide
		<input type="checkbox"/> Accidental	<input type="checkbox"/> Natural
Location of Death:	<input type="checkbox"/> Inmate Living Area	<input type="checkbox"/> Segregation Cell	<input type="checkbox"/> Hospital
		<input type="checkbox"/> Work Area	<input type="checkbox"/> Other
Other agencies investigating this incident:			
<b>Synopsis of Incident:</b>			
<b>Persons Involved:</b>			
Name:		Status: (Officer, Nurse, Inmate, etc.)	Involvement: (Witness, Suspect, etc.)
<b>Information Collected and Reviewed:</b>			
<input type="checkbox"/> Incident Report	<input type="checkbox"/> Medical/MH Records	<input type="checkbox"/> Inmate Requests, Grievances	
<input type="checkbox"/> Intake Records	<input type="checkbox"/> Medical Examiner Reports	<input type="checkbox"/> Visitor Logs	
<input type="checkbox"/> Jail Reports, Records, Logs	<input type="checkbox"/> Inmate Records	<input type="checkbox"/> Phone Calls	
<input type="checkbox"/> Inspection Notes	<input type="checkbox"/> Staff Interviews	<input type="checkbox"/> Witness Interviews	
<input type="checkbox"/> Video Footage	Other:		



**Jail Review Unit Observations:**

**Any Violations of Jail Standards Related To This Incident:**

- The Jail Review Unit recommends that this Review be closed at the Initial Review stage.**  
 **The Jail Review Unit recommends that further review of this incident is needed.**

Comments (Include recommendations of other agencies to be included in the review):

**Checklist submitted to the Board of Corrections Jail Review Committee:**

By:		
Name Printed	Signature	Date

**Jail Review Committee Actions:**

- This Review is closed at the Initial Review stage.  
 Further review of this incident is needed.

Comments (Include other agencies to be included in the review):

**Jail Review Committee members:**

Name	Name	Name	Date
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