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| **Part I General Provisions** | | | | | |
| **Certification** | | | | | |
| **6VAC35-101-40 (A). Certification.**  A. The detention center shall comply with the provisions of the Regulations Governing the Monitoring, Approval, and Certification of Juvenile Justice Programs (6VAC35-20). The detention center shall:  1. Demonstrate compliance with this chapter, other applicable regulations issued by the board, and applicable statutes and regulations;  2. Implement approved plans of action to correct findings of noncompliance and  3. Ensure no non-compliances may pose any immediate and direct danger to residents. |  |  |  |  |  |
| **6VAC35-101-40 (B). Certification.**  B. Documentation necessary to demonstrate compliance with this chapter shall be maintained for a minimum of three years. |  |  |  |  |  |
| **6VAC35-101-40 (C). Certification.**  C. The current certificate shall be posted at all times in a place conspicuous to the public. |  |  |  |  |  |
| **Relationship to the regulatory authority.** | | | | | |
| **6VAC35-71-40. Relationship to the regulatory authority.**  All reports and information as the regulatory authority may require to establish compliance with this chapter and other applicable regulations and statutes shall be submitted to or made available to the regulatory authority. |  |  |  |  |  |
| **Variances** | | | | | |
| **6VAC35-71-50 (A). Variances.**  A. Board action may be requested by the superintendent to relieve a JCC from having to meet or develop a plan of action for the requirements of a specific section or subsection of this regulation, either permanently or for a determined period of time, as provided in the Regulations Governing the Monitoring, Approval, and Certification of Juvenile Justice Programs (6VAC35-20) and in accordance with written procedures. |  |  |  |  |  |
| **6VAC35-71-50 (B). Variances.**  B. A variance may not be implemented prior to approval of the board. |  |  |  |  |  |
| **Operational procedures** | | | | | |
| **6VAC35-71-55. Operational procedures.**  Current operational procedures shall be accessible to all staff. |  |  |  |  |  |
| **Serious incident reports** | | | | | |
| **6VAC35-71-60 (A). Serious incident reports.**   1. The following events shall be reported as soon as practicable, but no later than 24 hours after the incident, and in accordance with department procedures to the director or his designee: 2. Any serious illness, incident, injury, or accident involving injury of a resident; 3. Any absence from the facility without permission; and 4. All other situations required by written procedures. |  |  |  |  |  |
| **6VAC35-71-60 (B). Serious incident reports.**  B. As appropriate and applicable, the facility shall, as soon as practicable, but no later than 24 hours after the incident, and in accordance with written procedures, report the incidents listed in subsection A of this section to (i) the parent or legal guardian and (ii) the supervising court service unit or agency. |  |  |  |  |  |
| **6VAC35-71-60 (C). Serious incident reports.**  C. Any incident involving the death of a resident shall be reported to the individuals specified in subsections A and B without undue delay. |  |  |  |  |  |
| **6VAC35-71-60 (D). Serious incident reports.**  D. The facility shall prepare and maintain a written report of the events listed in subsections A and C which shall contain the following information:  1. The date and time the incident occurred;  2. A brief description of the incident;  3. The action taken as a result of the incident;  4. The name of the person who completed the report;  5. The name or identifying information of the person who made the report to the supervising agency and to the parent or legal guardian; and  6. The name or identifying information of the person to whom the report was made, including any law enforcement or child protective service personnel. |  |  |  |  |  |
| **6VAC35-71-60 (E). Serious incident reports.**  E. The resident's record shall contain a written reference (i) that an incident occurred and (ii) of all applicable reporting. |  |  |  |  |  |
| **6VAC35-71-60 (F). Serious incident reports.**  F. In addition to the requirements of this section, any suspected child abuse and neglect shall be governed by 6VAC35-71-70 (suspected child abuse or neglect). |  |  |  |  |  |

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| **Suspected child abuse or neglect.** |

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| **6VAC35-71-70 (A). Suspected child abuse or neglect.**  A. When there is reason to suspect that a resident is an abused or neglected child, the matter shall be reported immediately to the local department of social services as required by § 63.2-1509 of the Code of Virginia and in accordance with written procedures. |  |  |  |  |  |
| **6VAC35-71-70 (B). Suspected child abuse or neglect. CRITICAL**  B. Any case of suspected child abuse or neglect occurring at the JCC, occurring on a JCC sponsored event or excursion, or involving JCC staff shall be reported within 24 hours, in accordance with written procedures, to (i) the director or his designee, (ii) the court services unit, and (iii) the resident's parent or legal guardian, as appropriate and applicable. |  |  |  |  |  |
| **6VAC35-71-70 (C). Suspected child abuse or neglect.**  C. When a case of suspected child abuse or neglect is reported to child protective services a record shall be maintained at the facility that contains the following information:  1. The date and time the suspected abuse or neglect occurred;  2. A brief description of the suspected abuse or neglect;  3. Action taken as a result of the suspected abuse or neglect; and  4. The name or identifying information of the person to whom the report was made at the local child protective services unit. |  |  |  |  |  |
| **6VAC35-71-70 (D). Suspected child abuse or neglect.**  D. The resident’s record shall contain a written reference that a report was made. |  |  |  |  |  |
| **6VAC35-71-70 (E). Suspected child abuse or neglect.**  E. Written procedures shall be accessible to staff regarding the following:  1. Handling accusations of child abuse or neglect, including those made against staff;  2. Reporting, consistent with requirements of the Code of Virginia, and documenting suspected cases of child abuse or neglect to the local child protective services unit;  3. Cooperating during any investigation; and  4. Measures to be taken to ensure the safety of the resident and the staff. |  | | | | |
| Reporting criminal activity. | | | | | |
| **6VAC35-71-75 (A). Reporting criminal activity.**  A. Staff shall be required to report all known criminal activity by residents or staff, including, but not limited to, any physical abuse, sexual abuse, or sexual harassment of residents, to the superintendent or designee. |  |  |  |  |  |
| **6VAC35-71-75 (B). Reporting criminal activity.**  B. The superintendent, in accordance with written procedures, shall notify the appropriate persons or agencies, including law enforcement and child protective services if applicable and appropriate, of suspected criminal violations by residents or staff. |  |  |  |  |  |
| **6VAC35-71-75 (C). Reporting criminal activity.**  C. The JCC shall assist and cooperate with the investigation of any such complaints and allegations as necessary. |  |  |  |  |  |
| **Grievance procedure.** | | | | | |
| **6VAC35-71-80 (A). Grievance procedure.**  A. The superintendent or designee shall ensure the facility's compliance with the department's grievance procedure. The grievance procedure shall provide for the following:  1. Resident participation in the grievance process, with assistance from staff upon request;  2. Investigation of the grievance by an impartial and objective person who is not the subject of the grievance;  3. Documented, timely responses to all grievances with the supporting reasons for the decision;  4. At least one level of appeal;  5. Administrative review of grievances;  6. Protection of residents from retaliation or the threat of retaliation for filing a grievance; and  7. Immediate review of emergency grievances with resolution as soon as practicable but no later than eight hours after the initial review. |  |  |  |  |  |
| **6VAC35-71-80 (B). Grievance procedure.**  B. Residents shall be oriented to the grievance procedure in an age or developmentally appropriate manner. |  |  |  |  |  |
| **6VAC35-71-80 (C). Grievance procedure.**  C. The grievance procedure shall be (i) written in clear and simple language, (ii) posted in an area accessible to residents, and (iii) posted in an area easily accessible to parents and legal guardians. |  |  |  |  |  |
| **6VAC35-71-80 (D). Grievance procedure.**  D. Staff shall assist and work cooperatively with other employees in facilitating the grievance process. |  |  |  |  |  |
| **Resident advisory committee.** | | | | | |
| **6VAC35-71-90 (A). Resident advisory committee.**  Each JCC, except RDC, shall have a resident advisory committee that (i) is representative of the facility's population and (ii) shall meet monthly with the superintendent or designees during which time the residents shall be given the opportunity to raise matters of concern to the residents and the opportunity to have input into planning, problem-solving, and decision-making in areas of the residential program that affect their lives. |  |  |  |  |  |
| Part II Administrative and Personnel | | | | | |
| **Administration and organization.** | | | | | |
| **6VAC35-71-110 (A). Organizational communications.**  A. The superintendent or designee shall meet, at least monthly, with all department heads and key staff members. |  |  |  |  |  |
| **6VAC35-71-110 (B). Organizational communications.**  B. The superintendent or the assistant superintendent, chief of security, treatment program supervisor, or counseling supervisor, if designated by the superintendent, shall visit the living units and activity areas at least weekly to encourage informal contact with employees and residents and to observe informally the facility's living and working conditions. The superintendent shall make such visits, at a minimum, one time per month. |  |  |  |  |  |
| **Community relationships.** | | | | | |
| **6VAC35-71-120. Community relationships.**  Each JCC shall designate a community liaison and, if appropriate, a community advisory committee that serves as a link between the facility and the community, which may include neighbors, local law enforcement, and local government officials. |  |  |  |  |  |
| **Participation of residents in human research.** | | | | | |
| **6VAC35-71-130 (A). Participation of residents in human research.**  A. Residents shall not be used as subjects of human research except as provided in 6VAC35-170 and in accordance with Chapter 5.1 (§ 32.1-162.16 et seq.) of Title 32.1 of the Code of Virginia. |  |  |  |  |  |
| **6VAC35-71-130 (B). Participation of residents in human research.**  B. For the purpose of this section, human research means any systematic investigation using human subjects as defined by § 32.1-162.16 of the Code of Virginia and 6VAC35-170. Human research shall not include research prohibited by state or federal statutes or regulations or research exempt from federal regulations or mandated by any applicable statutes or regulations. The testing of medicines or drugs for experimentation or research is prohibited. |  |  |  |  |  |
| **Background checks.** | | | | | |
| **6VAC35-71-140 (A). Background checks. CRITICAL**  A. Except as provided in subsection B, all persons who (i) accept a position of employment or (ii) provide contractual services directly to a resident on a regular basis and will be alone with a resident in the performance of his duties in a JCC shall undergo the following background checks, in accordance with § 63.2-1726 of the Code of Virginia, to ascertain whether there are criminal acts or other circumstances that would be detrimental to the safety of residents in the JCC:  1. A reference check;  2. A criminal history record check;  3. Fingerprint checks with the Virginia State Police and Federal Bureau of Investigations (FBI);  4. A central registry check with Child Protective Services; and  5. A driving record check, if applicable to the individual's job duties. |  |  |  |  |  |
| **6VAC35-71-140 (B). Background checks.**  B. To minimize vacancy time, when the fingerprint checks required by subdivision 3 of subsection A have been requested, employees may be hired, pending the results of the fingerprint checks, provided:  1. All of the other applicable components of this subsection have been completed;  2. The applicant is given written notice that continued employment is contingent on the fingerprint check results as required by subdivision 3 of this subsection; and  3. Employees hired under this exception shall not be allowed to be alone with residents and may work with residents only when under the direct supervision of staff whose background checks have been completed until such time as all the requirements of this section are completed. |  |  |  |  |  |
| **6VAC35-71-140 (C). Background checks.**  C. Documentation of compliance with this section shall be retained. |  |  |  |  |  |
| **6VAC35-71-140 (D). Background checks.**  D. Written procedures shall provide for the supervision of nonemployee persons, who are not subject to the provisions of this section who have contact with residents. |  |  |  |  |  |
| **Required initial orientation.** | | | | | |
| **6VAC35-71-150 (A). Required initial orientation.**  A. Before the expiration of the employee's seventh work day at the facility, each employee shall be provided with a basic orientation on the following:  1. The facility;  2. The population served;  3. The basic objectives of the program;  4. The facility's organizational structure;  5. Security, population control, emergency preparedness, and evacuation procedures in accordance with 6VAC35-71-460 (emergency and evacuation procedures);  6. The practices of confidentiality;  7. The residents' rights; and  8. The basic requirements of and competencies necessary to perform in their positions. |  |  |  |  |  |
| **6VAC35-71-150 (B). Required initial orientation.**  B. Prior to working with residents while not under the direct supervision of staff who have completed all applicable orientations and training, each direct care staff shall receive a basic orientation on the following:  1. The facility's program philosophy and services;  2. The facility's behavior management program;  3. The facility's behavior intervention procedures and techniques, including the use of least restrictive interventions and physical restraint;  4. The residents' rules of conduct and responsibilities;  5. The residents' disciplinary and grievance procedures;  6. Child abuse and neglect and mandatory reporting;  7. Standard precautions; and  8. Documentation requirements as applicable to their duties. |  |  |  |  |  |
| **6VAC35-71-150 (C). Required initial orientation.**  C. Volunteers shall be oriented in accordance with 6VAC35-71-240 (volunteer and intern orientation and training). |  |  |  |  |  |
| **Required initial training.** | | | | | |

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| **6VAC35-71-160 (A). Required initial training.**  A. Each employee shall complete initial, comprehensive training that is specific to the individual's occupational class, is based on the needs of the population served, and ensures that the individual has the competencies to perform the position responsibilities. Contractors shall receive training required to perform their position responsibilities in a correctional environment. |  |  |  |  |  |
| **6VAC35-71-160 (B). Required initial training.**  B. Direct care staff and employees responsible for the direct supervision of residents shall, before that employee is responsible for the direct supervision of a resident, complete at least 120 hours of training which shall include training in the following areas:  1. Emergency preparedness and response;  2. First aid and cardiopulmonary resuscitation, unless the individual is currently certified, with certification required as applicable to their duties;  3. The facility's behavior management program;  4. The residents' rules of conduct and the rationale for the rules;  5. The facility's behavior interventions, with restraint training required as applicable to their duties;  6. Child abuse and neglect;  7. Mandatory reporting;  8. Maintaining appropriate professional relationships;  9. Appropriate interaction among staff and residents;  10. Suicide prevention;  11. Residents' rights, including, but not limited to, the prohibited actions provided for in 6VAC35-71-550 (prohibited actions);  12. Standard precautions;  13. Recognition of signs and symptoms and knowledge of actions required in medical emergencies;  14. Adolescent development;  15. Procedures applicable to the employees' position and consistent with their work profiles; and  16. Other topics as required by the department and any applicable state or federal statutes or regulations. |  |  |  |  |  |
| **6VAC35-71-160 (C). Required initial training.**  C. Administrative and managerial staff shall receive at least 40 hours of training during their first year of employment. Clerical and support staff shall receive at least 16 hours of training. |  |  |  |  |  |
| **6VAC35-71-160 (D). Required initial training.**  D. Employees who administer medication shall, prior to such administration, successfully complete a medication training program approved by the Board of Nursing or be licensed by the Commonwealth of Virginia to administer medication. |  |  |  |  |  |
| **6VAC35-71-160 (E). Required initial training.**  E. Employees providing medical services shall be trained in tuberculosis control practices. |  |  |  |  |  |
| **6VAC35-71-160 (F). Required initial training.**  F. When an individual is employed by contract to provide services for which licensure by a professional organization is required, documentation of current licensure shall constitute compliance with this section. |  |  |  |  |  |
| **6VAC35-71-160 (G). Required initial training.**  G. Volunteers and interns shall be trained in accordance with 6VAC35-71-240 (volunteer and intern orientation and training). |  |  |  |  |  |
| **Retraining.** | | | | | |
| **6VAC35-71-170 (A). Retraining.**  A. Each employee shall complete retraining that is specific to the individual's occupational class, the position's job description, and address any professional development needs.  1. Direct care staff and employees who provide direct supervision of the residents shall complete 40 hours of training annually, inclusive of the requirements of this section.  2. Administrative and managerial staff shall receive at least 40 hours of training annually.  3. Clerical and support staff shall receive at least 16 hours of training annually.  4. Contractors shall receive retraining as required to perform their position responsibilities in the correctional environment. |  |  |  |  |  |
| **6VAC35-71-170 (B). Retraining.**  B. All staff shall complete an annual training refresher on the facility's emergency preparedness and response plan and procedures. |  |  |  |  |  |
| **6VAC35-71-170 (C). Retraining.**  C. All direct care staff and employees who provide direct supervision of the residents shall complete annual retraining in the following areas:  1. Suicide prevention;  2. Maintaining appropriate professional relationships;  3. Appropriate interaction among staff and residents;  4. Child abuse and neglect;  5. Mandatory reporting;  6. Resident rights, including, but not limited to, the prohibited actions provided for in 6VAC35-71-550 (prohibited actions);  7. Standard precautions;  8. Behavior management techniques; and  9. Other topics as required by the department and any applicable state or federal statutes or regulations. |  |  |  |  |  |
| **6VAC35-71-170 (D). Retraining. CRITICAL**  D. All direct care staff shall receive training sufficient to maintain a current certification in first aid and cardiopulmonary resuscitation. |  |  |  |  |  |
| **6VAC35-71-170 (E). Retraining.**  E. Employees who administer medication shall complete annual refresher training on the administration of medication. |  |  |  |  |  |
| **6VAC35-71-170 (F). Retraining.**  F. When an individual is employed by contract to provide services for which licensure by a professional organization is required, documentation of current licensure shall constitute compliance with this section. |  |  |  |  |  |
| **6VAC35-71-170 (G). Retraining.**  G. All staff approved to apply physical restraints as provided for in 6VAC35-71-1130 (physical restraint) shall be trained as needed to maintain the applicable current certification. |  |  |  |  |  |
| **6VAC35-71-170 (H). Retraining.**  H. All staff approved to apply mechanical restraints shall be retrained annually as required by 6VAC35-71-1180 (mechanical restraints). |  |  |  |  |  |
| **6VAC35-71-170 I. Retraining.**  I. Staff who has not timely completed required retraining shall not be allowed to have direct care responsibilities pending completion of the retraining requirements. |  |  |  |  |  |
| **Code of ethics.** | | | | | |
| **6VAC35-71-180. Code of ethics.**  A written set of rules describing acceptable standards of conduct for all employees shall be available to all employees. |  |  |  |  |  |
| **Employee tuberculosis screening and follow-up.** | | | | | |
| **6VAC35-71-185 (A). Employee tuberculosis screening and follow-up.**  A. On or before the employee's start date at the facility and at least annually thereafter each employee shall submit the results of a tuberculosis screening assessment that is no older than 30 days. The documentation shall indicate the screening results as to whether there is an absence of tuberculosis in a communicable form. |  |  |  |  |  |
| **6VAC35-71-185 (B). Employee tuberculosis screening and follow-up.**  B. Each employee shall submit evidence of an annual evaluation of freedom from tuberculosis in a communicable form. |  |  |  |  |  |
| **6VAC35-71-185 (C). Employee tuberculosis screening and follow-up.**  C. Employees shall undergo a subsequent tuberculosis screening or evaluation, as applicable, in the following circumstances:  1. The employee comes into contact with a known case of infectious tuberculosis; or  2. The employee develops chronic respiratory symptoms of three weeks duration. |  |  |  |  |  |
| **6VAC35-71-185 (D). Employee tuberculosis screening and follow-up.**  D. Employees suspected of having tuberculosis in a communicable form shall not be permitted to return to work or have contact with staff or residents until a physician has determined that the individual does not have tuberculosis in a communicable form. |  |  |  |  |  |
| **6VAC35-71-185 (E). Employee tuberculosis screening and follow-up.**  E. Any active case of tuberculosis developed by an employee or a resident shall be reported to the local health department in accordance with the requirements of the Virginia Board of Health Regulations for Disease Reporting and Control (12VAC5-90). |  |  |  |  |  |
| **6VAC35-71-185 (F). Employee tuberculosis screening and follow-up.**  F. Documentation of any screening results shall be retained in a manner that maintains the confidentiality of information. |  |  |  |  |  |
| **6VAC35-71-185 (G). Employee tuberculosis screening and follow-up.**  G. The detection, diagnosis, prophylaxis, and treatment of pulmonary tuberculosis shall be performed consistent with the current requirements of the Virginia Department of Health, Division of Tuberculosis Prevention and Control and the Department of Health and Human Services Centers for Disease Control and Prevention. |  |  |  |  |  |
| **Selection and duties of volunteers and interns.** | | | | | |
| **6VAC35-71-220 (A). Selection and duties of volunteers and interns.**  A. Any JCC that uses volunteers or interns shall implement written procedures governing their selection and use. Such procedures shall provide for the evaluation of persons and organizations in the community who wish to associate with the residents. |  |  |  |  |  |
| **6VAC35-71-220 (B). Selection and duties of volunteers and interns.**  B. Volunteers and interns shall have qualifications appropriate for the services provided. |  |  |  |  |  |
| **6VAC35-71-220 (C). Selection and duties of volunteers and interns.**  C. The responsibilities of interns and individuals who volunteer on a regular basis shall be clearly defined in writing. |  |  |  |  |  |
| **6VAC35-71-220 (D). Selection and duties of volunteers and interns.**  D. Volunteers and interns may not be responsible for the duties of direct care staff. |  |  |  |  |  |
| **Volunteer and intern background checks.** | | | | | |
| **6VAC35-71-230 (A). Volunteer and intern background checks.**  A. Any individual who (i) volunteers or is an intern on a regular basis in a JCC and (ii) will be alone with a resident in the performance of the position's duties shall be subject to the background check requirements provided for in of 6VAC35-71-140 A (background checks). |  |  |  |  |  |
| **6VAC35-71-230 (B). Volunteer and intern background checks.**  B. Documentation of compliance with the background check requirements shall be maintained for each volunteer or intern for whom a background check is required. |  |  |  |  |  |
| **6VAC35-71-230 (C). Volunteer and intern background checks.**  C. A JCC that uses volunteers or interns shall implement written procedures for supervising volunteers or interns, on whom background checks are not required or whose background checks have not been completed, who have contact with residents. |  |  |  |  |  |
| **Volunteer and intern orientation and training.** | | | | | |
| **6VAC35-71-240 (A). Volunteer and intern orientation and training.**  A. Any individual who (i) volunteers on a regular basis or is an intern in a JCC and will be alone with the resident or (ii) is the designated leader for a group of volunteers shall be provided with a basic orientation on the following:  1. The facility;  2. The population served;  3. The basic objectives of the department;  4. The department and facility organizational structure;  5. Security, population control, emergency preparedness, and evacuation procedures;  6. The practices of confidentiality;  7. The residents' rights including, but not limited to, the prohibited actions provided for in 6VAC35-71-550 (prohibited actions); and  8. The basic requirements of and competencies necessary to perform their duties and responsibilities. |  |  |  |  |  |
| **6VAC35-71-240 (B). Volunteer and intern orientation and training.**  B. Volunteers and interns shall be trained within 30 days from their start date at the facility in the following:  1. Any procedures that are applicable to their duties and responsibilities; and  2. Their duties and responsibilities in the event of a facility evacuation as provided in 6VAC35-71-460 (emergency and evacuation procedures). |  |  |  |  |  |
| **Maintenance of records.** | | | | | |
| **6VAC35-71-260 (A). Maintenance of records.**  A. A separate written or automated case record shall be maintained for each resident, which shall include all correspondence and documents received by the JCC relating to the care of that resident and documentation of all case management services provided. |  |  |  |  |  |
| **6VAC35-71-260 (B). Maintenance of records.**  B. Separate health care records, including behavioral health, as applicable, and medical records, shall be kept on each resident. Health care records shall be maintained in accordance with 6VAC35-71-1020 (residents' health records) and applicable statutes and regulations. Behavioral health care records may be kept separately from other medical records. |  |  |  |  |  |
| **6VAC35-71-260 (C). Maintenance of records.**  C. Each case record and health care record shall be kept up to date and in a uniform manner in accordance with written procedures. Case records shall be released in accordance with §§ 16.1-300 and 16.1-309.1 of the Code of Virginia and applicable state and federal laws and regulations. |  |  |  |  |  |
| **6VAC35-71-260 (D). Maintenance of records.**  D. The procedures for management of residents' records, written and automated, shall describe confidentiality, accessibility, security, and retention of records including:  1. Access, duplication, dissemination, and acquiring of information only to persons legally authorized according to federal and state laws;  2. Security measures to protect records from loss, unauthorized alteration, inadvertent or unauthorized access, disclosure of information, and transportation of records between service sites; and  3. Designation of the person responsible for records management. |  |  |  |  |  |
| **6VAC35-71-260 (E). Maintenance of records.**  E. Active and closed records shall be kept in secure locations or compartments that are accessible only to authorized employees and are protected from unauthorized access, fire, and flood. |  |  |  |  |  |
| **6VAC35-71-260 (F). Maintenance of records.**  F. Each resident's written case and health care records shall be stored separately subsequent to the resident's discharge in accordance with applicable statutes and regulations. |  |  |  |  |  |
| **6VAC35-71-260 (G). Maintenance of records.**  G. Residents' inactive records shall be retained as required by The Library of Virginia. |  |  |  |  |  |
| **Face sheet.** | | | | | |
| **6VAC35-71-270 (A). Face sheet.**  A. At the time of admission, each resident's record shall include a completed face sheet that contains (i) the resident's full name, last known residence, birth date, birthplace, gender, race, social security number or other unique identifier, religious preference, and admission date; and (ii) names, addresses, and telephone numbers of the resident's legal guardians, supervising agency, emergency contacts, and parents, if appropriate. |  |  |  |  |  |
| **6VAC35-71-270 (A). Face sheet.**  B. The face sheet shall be updated when changes occur and maintained in accordance with written procedures. |  |  |  |  |  |
| Part III Physical Environment | | | | | |
| **Buildings and inspections.** | | | | | |
| **6VAC35-71-280 (A). Buildings and inspections.**  A. All newly constructed buildings, major renovations to buildings, and temporary structures shall be inspected and approved by the appropriate building officials. There shall be a valid, current certificate of occupancy available at each JCC. |  |  |  |  |  |
| **6VAC35-71-280 (B). Buildings and inspections. CRITICAL**  B. A current copy of the facility's annual inspection by fire prevention authorities indicating that all buildings and equipment are maintained in accordance with the Virginia Statewide Fire Prevention Code (13VAC5-51) shall be maintained. If the fire prevention authorities have failed to timely inspect the facility's buildings and equipment, the facility shall maintain documentation of its request to schedule the annual inspection, as well as documentation of any necessary follow-up. For this subsection, the definition of annual shall be defined by the Virginia Department of Fire Programs, State Fire Marshal's Office. |  |  |  |  |  |
| **6VAC35-71-280 (C). Buildings and inspections.**  C. The facility shall maintain a current copy of its compliance with annual inspection and approval by an independent, outside source in accordance with state and local inspection laws, regulations, and ordinances, of the following:  1. General sanitation;  2. The sewage disposal system, if applicable;  3. The water supply, if applicable;  4. Food service operations; and  5. Swimming pools, if applicable. |  |  |  |  |  |
| **Equipment and systems inspections and maintenance.** | | | | | |
| **6VAC35-71-290 (A). Equipment and systems inspections and maintenance.**   1. All safety, emergency, and communications equipment and systems shall be inspected, tested, and maintained by designated staff in accordance with the manufacturer’s recommendations or instruction manuals or, absent such requirements, in accordance with a schedule that is approved by the superintendent.    1. The facility shall maintain a listing of all safety, emergency, and communications equipment and systems and the schedule established for inspections and testing.    2. Testing of such equipment and systems shall, at a minimum, be conducted quarterly. |  |  |  |  |  |
| **6VAC35-71-290 (B). Equipment and systems inspections and maintenance.**  B. Whenever safety, emergency, and communications equipment or a system is found to be defective, immediate steps shall be taken to rectify the situation and to repair, remove, or replace the defective equipment. |  |  |  |  |  |
| **Alternate power source.** | | | | | |
| **6VAC35-71-300. Alternate power source.**  Each JCC shall have access to an alternate power source to maintain essential services in an emergency. |  |  |  |  |  |
| **Heating and cooling systems and ventilation.** | | | | | |
| **6VAC35-71-310 (A). Heating and cooling systems and ventilation.**  A. Heat shall be distributed in all rooms occupied by the residents so that a temperature no less than 68°F is maintained, unless otherwise mandated by state or federal authorities. |  |  |  |  |  |
| **6VAC35-71-310 (B). Heating and cooling systems and ventilation.**  B. Air conditioning or mechanical ventilating systems, such as electric fans, shall be provided in all rooms occupied by residents when the temperature in those rooms exceeds 80°F. |  |  |  |  |  |
| **Lighting.** | | | | | |
| **6VAC35-71-320 (A). Lighting.**  A. Sleeping and activity areas shall provide natural lighting. |  |  |  |  |  |
| **6VAC35-71-320 (B). Lighting.**  B. All areas within buildings shall be lighted for safety, and the lighting shall be sufficient for the activities being performed. |  |  |  |  |  |
| **6VAC35-71-320 (C). Lighting.**  C. Night lighting shall be sufficient to observe residents. |  |  |  |  |  |
| **6VAC35-71-320 (D). Lighting.**  D. Operable flashlights or battery-powered lanterns shall be accessible to each direct care staff on duty. |  |  |  |  |  |
| **6VAC35-71-320 (E). Lighting.**  E. Outside entrances and parking areas shall be lighted. |  |  |  |  |  |
| **Plumbing and water supply; temperature.** | | | | | |
| **6VAC35-71-330 (A). Plumbing and water supply; temperature.**  A. Plumbing shall be maintained in operational condition, as designed. |  |  |  |  |  |
| **6VAC35-71-330 (B). Plumbing and water supply; temperature.**  B. An adequate supply of hot and cold running water shall be available at all times. |  |  |  |  |  |
| **6VAC35-71-330 (C). Plumbing and water supply; temperature.**  C. Precautions shall be taken to prevent scalding from running water. Hot water temperatures should be maintained at 100°F to 120°F. |  |  |  |  |  |
| **Drinking water.** | | | | | |
| **6VAC35-71-340 (A). Drinking water.**  A. In all JCCs constructed after January 1, 1998, all sleeping areas shall have fresh drinking water for residents' use. |  |  |  |  |  |
| **6VAC35-71-340 (B). Drinking water.**  B. All activity areas shall have potable drinking water available for residents' use. |  |  |  |  |  |
| **Toilet facilities.** | | | | | |
| **6VAC35-71-350 (A). Toilet facilities.**  A. There shall be toilet facilities available for resident use in all sleeping areas for each JCC constructed after January 1, 1998. |  |  |  |  |  |
| **6VAC35-71-350 (B). Toilet facilities.**  B. There shall be at least one toilet, one hand basin, and one shower or tub for every eight residents for facilities certified before July 1, 1981. There shall be one toilet, one hand basin, and one shower or tub for every four residents in any building constructed or structurally modified after July 1, 1981. |  |  |  |  |  |
| **6VAC35-71-350 (C). Toilet facilities.**  C. There shall be at least one bathtub in each facility. |  |  |  |  |  |
| **6VAC35-71-350 (D). Toilet facilities.**  D. The maximum number of employees on duty in the living unit shall be counted in determining the required number of toilets and hand basins when a separate bathroom is not provided for staff. |  |  |  |  |  |
| **Sleeping areas.** | | | | | |
| **6VAC35-71-360 (A). Sleeping areas.**  A. Male and female residents shall have separate sleeping areas. |  |  |  |  |  |
| **6VAC35-71-360 (B). Sleeping areas.**  B. Beds in all facilities or sleeping areas established, constructed, or structurally modified after July 1, 1981, shall be at least three feet apart at the head, foot, and sides; and double-decker beds in such facilities shall be at least five feet apart at the head, foot, and sides. Facilities or sleeping areas established, constructed, or structurally modified before July 1, 1981, shall have a bed placement plan approved by the director or designee. |  |  |  |  |  |
| **6VAC35-71-360 (C). Sleeping areas.**  C. Mattresses shall be fire retardant as evidenced by documentation from the manufacturer, except in buildings equipped with an automated sprinkler system as required by the Virginia Uniform Statewide Building Code (13VAC5-63). |  |  |  |  |  |
| **6VAC35-71-360 (D). Sleeping areas.**  D. Sleeping quarters established, constructed, or structurally modified after July 1, 1981, shall have:  1. At least 80 square feet of floor area in a bedroom accommodating one person;  2. At least 60 square feet of floor area per person in rooms accommodating two or more persons; and  3. Ceilings with a primary height at least 7-1/2 feet in height exclusive of protrusions, duct work, or dormers. |  |  |  |  |  |
| **Furnishings.** | | | | | |
| **6VAC35-71-370. Furnishings.**  All furnishings and equipment shall be safe, clean, and suitable to the ages and for the number of residents. |  |  |  |  |  |
| **Disposal of garbage and waste.** | | | | | |
| **6VAC35-71-380. Disposal of garbage and waste. CRITICAL**  Provision shall be made for the collection and legal disposal of all garbage and waste materials. |  |  |  |  |  |
| **Hazardous materials and chemicals.** | | | | | |
| **6VAC35-71-390 (A). Hazardous materials and chemicals. CRITICAL**  A. Each facility shall have a hazard communication plan that (i) governs the evaluation of the potential hazards of chemicals used at the facility and (ii) requires the communication of information to employees concerning hazards and appropriate protective measures. |  |  |  |  |  |
| **6VAC35-71-390 (B). Hazardous materials and chemicals. CRITICAL**  B. All flammable, toxic, medical, and caustic materials within the JCC shall be stored, used, and disposed of in appropriate receptacles and in accordance with federal, state, and local requirements. |  |  |  |  |  |
| **Smoking prohibition.** | | | | | |
| **6VAC35-71-400. Smoking prohibition.**  Residents shall be prohibited from using, possessing, purchasing, or distributing any tobacco products. Tobacco products, including cigarettes, cigars, pipes, and smokeless tobacco, such as chewing tobacco or snuff, shall not be used by staff or visitors in any areas of the facility or its premises where residents may see or smell the tobacco product. |  |  |  |  |  |
| **Space utilization.** | | | | | |
| **6VAC35-71-410 (A). Space utilization.**  A. Each JCC shall provide for the following:  1. An indoor recreation area with appropriate recreation materials;  2. An outdoor recreation area;  3. Kitchen facilities and equipment for the preparation and service of meals;  4. A dining area equipped with tables and seating;  5. Space and equipment for laundry, if laundry is done on site;  6. Space for the storage of items such as first aid equipment, household supplies, recreational equipment, and other materials;  7. A designated visiting area that permits informal communication between residents and visitors, including opportunity for physical contact in accordance with written procedures;  8. Space for administrative activities including, as appropriate to the program, confidential conversations and the storage of records and materials; and  9. A central medical room with medical examination facilities equipped in consultation with the health authority. |  |  |  |  |  |
| **6VAC35-71-410 (B). Space utilization.**  B. If a school program is operated at the facility, school classrooms shall be designed in consultation with appropriate education authorities to comply with applicable state and local requirements. |  |  |  |  |  |
| **6VAC35-71-410 (C). Space utilization.**  C. Spaces or areas may be interchangeably utilized but shall be in functional condition for the designated purpose. |  |  |  |  |  |
| **Kitchen operation and safety.** | | | | | |
| **6VAC35-71-420 (A). Kitchen operation and safety.**  A. Each facility shall have a food service operation maintenance plan that addresses the following: (i) food sanitation and safety procedures; (ii) the inspection of all food service, preparation, and dining areas and equipment; (iii) a requirement for sanitary and temperature-controlled storage facilities for food; and (iv) the monitoring of refrigerator and water temperatures. |  |  |  |  |  |
| **6VAC35-71-420 (B). Kitchen operation and safety. CRITICAL**  B. The facility shall follow written procedures governing (i.) access to all areas where food or utensils are stored and (ii) the inventory and control of culinary equipment to which residents reasonably may be expected to have access. |  |  |  |  |  |
| **6VAC35-71-420 (C). Kitchen operation and safety.**  C. Walk-in refrigerators and freezers shall be equipped to permit emergency exits. |  |  |  |  |  |
| **6VAC35-71-420 (D). Kitchen operation and safety.**  D. Bleach or another sanitizing agent approved by the federal Environmental Protection Agency to destroy bacteria shall be used in laundering table and kitchen linens. |  |  |  |  |  |
| **Maintenance of the buildings and grounds.** | | | | | |
| **6VAC35-71-430 (A). Maintenance of the buildings and grounds.**  A. The interior and exterior of all buildings and grounds shall be safe, maintained, and reasonably free of clutter and rubbish. This includes but is not limited to (i) required locks, mechanical devices, indoor and outdoor equipment, and furnishings; and (ii) all areas where residents, staff, and visitors may reasonably be expected to have access. |  |  |  |  |  |
| **6VAC35-71-430 (B). Maintenance of the buildings and grounds.**  B. All buildings shall be reasonably free of stale, musty, or foul odors. |  |  |  |  |  |
| **6VAC35-71-430 (C). Maintenance of the buildings and grounds.**  C. Each facility shall have a written plan to control pests and vermin. Buildings shall be kept reasonably free of flies, roaches, rats, and other vermin. Any condition conducive to harboring or breeding insects, rodents, or other vermin shall be eliminated immediately. Each facility shall document efforts to eliminate such conditions, as applicable. |  |  |  |  |  |
| **Animals on the premises.** | | | | | |
| **6VAC35-71-440 (A). Animals on the premises.**  A. Animals maintained on the premises shall be housed at a reasonable distance from sleeping, living, eating, and food preparation areas as well as a safe distance from water supplies. |  |  |  |  |  |
| **6VAC35-71-440 (B). Animals on the premises.**  B. Animals maintained on the premises shall be tested, inoculated, and licensed as required by law. |  |  |  |  |  |
| **6VAC35-71-440 (C). Animals on the premises.**  C. The premises shall be kept reasonably free of stray domestic animals. |  |  |  |  |  |
| **6VAC35-71-440 (D). Animals on the premises.**  D. Pets shall be provided with clean sleeping areas and adequate food and water. |  |  |  |  |  |
| **Part IV Safety and Security** | | | | | |

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| **Fire prevention plan.** | | | | | |
| **6VAC35-71-450. Fire prevention plan.**  Each JCC shall develop and implement a fire prevention plan that provides for an adequate fire protection service. |  |  |  |  |  |
| **Emergency and evacuation procedures.** | | | | | |

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| **6VAC35-71-460 (A). Emergency and evacuation procedures. CRITICAL**  A. Each JCC shall have a written emergency preparedness and response plan. The plan shall address:  1. Documentation of contact with the local emergency coordinator to determine (i) local disaster risks; (ii) communitywide plans to address different disasters and emergency situations; and (iii) assistance, if any, that the local emergency management office will provide to the facility in an emergency;  2. Analysis of the facility's capabilities and potential hazards, including natural disasters, severe weather, fire, flooding, workplace violence or terrorism, missing persons, severe injuries, or other emergencies that would disrupt the normal course of service delivery;  3. Written emergency management procedures outlining specific responsibilities for (i) provision of administrative direction and management of response activities; (ii) coordination of logistics during the emergency; (iii) communications; (iv) life safety of employees, contractors, interns, volunteers, visitors, and residents; (v) property protection; (vi) community outreach; (vii) and recovery and restoration; |  |  |  |  |  |
| 4. Written emergency response procedures for (i) assessing the situation; (ii) protecting residents, employees, contractors, interns, volunteers, visitors, equipment, and vital records; and (iii) restoring services shall address:  a. Communicating with employees, contractors, and community responders;  b. Warning and notification of residents;  c. Providing emergency access to secure areas and opening locked doors;  d. Requiring fire and emergency keys that are instantly identifiable by sight and touch;  e. Conducting evacuations to emergency shelters or alternative sites and accounting for all residents;  f. Relocating residents, if necessary;  g. Notifying parents and legal guardians, as applicable and appropriate;  h. Alerting emergency personnel and sounding alarms;  i. Locating and shutting off utilities when necessary; and  j. Providing for a planned, personalized means of effective egress for residents who use wheelchairs, crutches, canes, or other mechanical devices for assistance in walking.  5. Supporting documents that would be needed in an emergency, including emergency call lists, building and site maps necessary to shut off utilities, designated escape routes, and list of major resources such as local emergency shelters; and  6. Schedule for testing the implementation of the plan and conducting emergency preparedness drills. |  |  |  |  |  |
| **6VAC35-71-460 (B). Emergency and evacuation procedures. CRITICAL**  B. All employees shall be trained to ensure they are prepared to implement the emergency preparedness plan in the event of an emergency. Such training shall include the employees' responsibilities for:  1. Alerting emergency personnel and sounding alarms;  2. Implementing evacuation procedures, including evacuation of residents with special needs (i.e., deaf, blind, non-ambulatory);  3. Using, maintaining, and operating emergency equipment;  4. Accessing emergency information for residents including medical information; and  5. Utilizing community support services. |  |  |  |  |  |
| **6VAC35-71-460 (C). Emergency and evacuation procedures.**  C. Contractors and volunteers shall be oriented in their responsibilities in implementing the evacuation plan in the event of an emergency. Such orientation shall be in accordance with the requirements of 6VAC35-71-150 (required initial orientation), 6VAC35-71-160 (required initial training), and 6VAC35-71-240 (volunteer and intern orientation and training). |  |  |  |  |  |
| **6VAC35-71-460 (D). Emergency and evacuation procedures.**  D. The JCC shall document the review of the emergency preparedness plan annually and make necessary revisions. Such revisions shall be communicated to employees, contractors, volunteers, and interns and shall be incorporated into (i) training for employees, contractors, interns, and volunteers; and (ii) orientation of residents to services. |  |  |  |  |  |
| **6VAC35-71-460 (E). Emergency and evacuation procedures.**  E. In the event of a disaster, fire, emergency or any other condition that may jeopardize the health, safety and welfare of residents, the facility shall take appropriate action to protect the health, safety and welfare of the residents and to remedy the conditions as soon as possible. |  |  |  |  |  |
| **6VAC35-71-460 (F). Emergency and evacuation procedures.**  F. In the event of a disaster, fire, emergency, or any other condition that may jeopardize the health, safety and welfare of residents, the facility should first respond and stabilize the disaster or emergency. After the disaster or emergency is stabilized, the facility shall (i) report the disaster or emergency to (a) the legal guardian and (b) the director or his designee of the conditions at the facility and (ii) report the disaster or emergency to the regulatory authority. Such reporting shall be made as soon as possible but no later than 72 hours after the incident is stabilized. |  |  |  |  |  |
| **6VAC35-71-460 (G). Emergency and evacuation procedures.**  G. Floor plans showing primary and secondary means of emergency exiting shall be posted on each floor in locations where they can easily be seen by employees and residents. |  |  |  |  |  |
| **6VAC35-71-460 (H). Emergency and evacuation procedures.**  H. The responsibilities of the residents in implementing the emergency and evacuation procedures shall be communicated to all residents within seven days following admission or a substantive change in the procedures. |  |  |  |  |  |
| **6VAC35-71-460 (I). Emergency and evacuation procedures. CRITICAL**  I. At least one evacuation drill (the simulation of the facility's emergency procedures) shall be conducted each month in each building occupied by residents. During any three consecutive calendar months, at least one evacuation drill shall be conducted during each shift. |  |  |  |  |  |
| **6VAC35-71-460 (J). Emergency and evacuation procedures.**  J. A record shall be maintained for each evacuation drill and shall include the following:  1. Buildings in which the drill was conducted;  2. Date and time of drill;  3. Amount of time to evacuate the buildings; and  4. Specific problems encountered. |  |  |  |  |  |
| **6VAC35-71-460 (K). Emergency and evacuation procedures.**  K. Each JCC shall assign one employee who shall ensure that all requirements regarding the emergency preparedness and response plan and the evacuation drill program are met. |  |  |  |  |  |
| **Security procedures.** | | | | | |
| **6VAC35-71-470. Security procedures**.  Each JCC shall follow written security procedures related to the following:  1. Post orders or shift duties for each security post;  2. Population count;  3. A control center that integrates all external and internal security functions and communications, is secured from residents' access, and is staffed 24 hours a day;  4. Control of the perimeter;  5. Actions to be taken regarding any escapes or absences without permission;  6. Searches of the buildings, premises, and persons; and  7. The control, detection, and disposition of contraband. |  |  |  |  |  |
| **Searches of residents.** | | | | | |
| **6VAC35-71-480 (A). Searches of residents.**  A. Written procedures shall govern searches of residents, including pat downs and frisk searches, strip searches, and body cavity searches, and shall include the following:  1. Searches of residents' persons shall be conducted only for the purposes of maintaining facility security and controlling contraband while protecting the dignity of the resident.  2. Searches are conducted only by personnel who are authorized to conduct such searches.  3. The resident shall not be touched any more than is necessary to conduct the search. |  |  |  |  |  |
| **6VAC35-71-480 (B). Searches of residents.**  B. Pat down and frisk searches shall be conducted by personnel of the same sex as the resident being searched, except in emergencies. |  |  |  |  |  |
| **6VAC35-71-480 (C). Searches of residents.**  C. Strip searches and visual inspections of the vagina and anal cavity areas shall be subject to the following:  1. The search shall be performed by personnel of the same sex as the resident being searched;  2. The search shall be conducted in an area that ensures privacy; and  3. Any witness to the search shall be of the same sex as the resident. |  |  |  |  |  |
| **6VAC35-71-480 (D). Searches of residents.**  D. Manual and instrumental searches of the anal cavity or vagina, not including medical examinations or procedures conducted by medical personnel for medical purposes, shall be:  1. Performed only with the written authorization of the facility administrator or by a court order;  2. Conducted by a qualified medical professional;  3. Witnessed by personnel of the same sex as the resident; and  4. Fully documented in the resident's medical file. |  |  |  |  |  |
| **Communications systems.** | | | | | |
| **6VAC35-71-490 (A). Communications systems.**  A. There shall be at least one continuously operable, non-pay telephone accessible to staff in each building in which residents sleep or participate in programs. |  |  |  |  |  |
| **6VAC35-71-490 (B). Communications systems.**  B. There shall be a means for communicating between the control center and living units. |  |  |  |  |  |
| **6VAC35-71-490 (C). Communications systems.**  C. The facility shall be able to provide communications in an emergency. |  |  |  |  |  |
| **Emergency telephone numbers.** | | | | | |
| **6VAC35-71-500. Emergency telephone numbers.**  An emergency telephone number shall be provided to residents and the adults responsible for their care when a resident is away from the facility and not under the supervision of direct care staff or law-enforcement officials. |  |  |  |  |  |
| **Weapons.** | | | | | |
| **6VAC35-71-510. Weapons.**  No firearms or other weapons shall be permitted on the JCC's premises and during JCC-related activities except as provided in written procedures or authorized by the director or designee. Written procedures shall govern any possession, use, and storage of authorized firearms and other weapons on the JCC's premises and during JCC-related activities. |  |  |  |  |  |
| **Equipment inventory.** | | | | | |
| **6VAC35-71-520. Equipment inventory.**  The facility shall follow procedures governing the inventory and control of all security, maintenance, recreational, and medical equipment of the facility to which residents reasonably may be expected to have access. |  |  |  |  |  |
| **Power equipment.** | | | | | |
| **6VAC35-71-530. Power equipment.**  The facility shall implement written safety rules for use and maintenance of power equipment. |  |  |  |  |  |
| **Transportation.** | | | | | |
| **6VAC35-71-540 (A). Transportation.**  A. Each JCC shall have transportation available or make the necessary arrangements for routine and emergency transportation. |  |  |  |  |  |
| **6VAC35-71-540 (B). Transportation.**  B. There shall be written safety rules for transportation of residents and for the use and maintenance of vehicles. |  |  |  |  |  |
| **6VAC35-71-540 (C). Transportation**  C. Written procedure shall provide for the verification of appropriate licensure for staff whose duties involve transporting residents. |  |  |  |  |  |

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| Part V Resident s' Rights | | | | | |
| **Prohibited actions.** | | | | | |
| **6VAC35-71-550. Prohibited actions. CRITICAL**  Residents shall not be subjected to the following actions:  1. Discrimination in violation of the Constitution of the United States, the Constitution of the Commonwealth of Virginia, and state and federal statutes and regulations.  2. Deprivation of drinking water or food necessary to meet a resident's daily nutritional needs, except as ordered by a licensed physician for a legitimate medical purpose and documented in the resident's record;  3. Denial of contacts and visits with the resident's attorney, a probation officer, the regulatory authority, a supervising agency representative, or representatives of other agencies or groups as required by applicable statutes or regulations;   4. Any action that is humiliating, degrading, abusive, or unreasonably impinges upon the residents' rights, including but not limited to any form of physical abuse, sexual abuse, or sexual harassment;  5. Corporal punishment, which is administered through the intentional inflicting of pain or discomfort to the body through actions such as, but not limited to (i) striking or hitting with any part of the body or with an implement; (ii) pinching, pulling, or shaking; or (iii) any similar action that normally inflicts pain or discomfort;  6. Subjection to unsanitary living conditions;  7. Deprivation of opportunities for bathing or access to toilet facilities, except as ordered by a licensed physician for a legitimate medical purpose and documented in the resident's record; |  |  |  |  |  |
| 8. Denial of health care;  9. Denial of appropriate services, programs, activities, and treatment;  10. Application of aversive stimuli, except as provided in this chapter or permitted pursuant to other applicable state regulations. Aversive stimuli means any physical forces (e.g., sound, electricity, heat, cold, light, water, or noise) or substances (e.g., hot pepper, pepper sauce, or pepper spray) measurable in duration and intensity that when applied to a resident are noxious or painful to the individual resident;  11. Administration of laxatives, enemas, or emetics, except as ordered by a licensed physician or poison control center for a legitimate medical purpose and documented in the resident's record;  12. Deprivation of opportunities for sleep or rest, except as ordered by a licensed physician for a legitimate medical purpose and documented in the resident's record;  13. Use of pharmacological restraints; and  14. Other constitutionally prohibited actions. |  |  |  |  |  |

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| **Vulnerable populations.** | | | | | |
| **6VAC35-71-555 (A). Vulnerable populations.**  A. The facility shall implement a procedure for assessing whether a resident is a member of a vulnerable population. |  |  |  |  |  |
| **6VAC35-71-555 (B). Vulnerable populations.**  B. If the assessment determines a resident is a vulnerable population, the facility shall implement any identified additional precautions such as heightened need for supervision, additional safety precautions, or separation from certain other residents. The facility shall consider on a case-by-case basis whether a placement would ensure the resident’s health and safety and whether the placement would present management or security problems. |  |  |  |  |  |
| **6VAC35-71-555 (C). Vulnerable populations.**  C. For the purposes of this section, vulnerable populations means a resident or group of residents who have been assessed to be reasonably likely to be exposed to the possibility of being attached or harmed, either physically or emotionally (e.g. very young residents; residents who are small in stature; residents who have limited English proficiency; residents who are gay, lesbian, bi-sexual, transgender, or intersex; residents with a history of being bullied or of self-injurious behavior). |  |  |  |  |  |
| **Residents' mail.** | | | | | |
| **6VAC35-71-560 (A). Residents' mail.**  A. A resident's incoming or outgoing mail may be delayed or withheld only in accordance with this section, as permitted by other applicable regulations, or by order of a court. |  |  |  |  |  |
| **6VAC35-71-560 (B). Residents' mail.**  B. Staff may open and inspect residents' incoming and outgoing non-legal mail for contraband. When based on legitimate facility interests of order and security, non-legal mail may be read, censored, or rejected in accordance with written procedures. The resident shall be notified when incoming or outgoing letters are withheld in part or in full. |  |  |  |  |  |
| **6VAC35-71-560 (C). Residents' mail.**  C. In the presence of the recipient and in accordance with written procedures, staff may open to inspect for contraband, but shall not read, legal mail. For the purpose of this section, legal mail means a communication sent to or received from a designated class of correspondents, as defined in written procedures, including but not limited to the court, an attorney, and the grievance system or department administrators. |  |  |  |  |  |
| **6VAC35-71-560 (D). Residents' mail.**  D. Staff shall not read mail addressed to parents, immediate family members, legal guardian, guardian ad litem, counsel, courts, officials of the committing authority, public officials, or grievance administrators unless (i) permission has been obtained from a court or (ii) the director or his designee has determined that there is a reasonable belief that the security of a facility is threatened. When so authorized staff may read such mail, in accordance with written procedures. |  |  |  |  |  |
| **6VAC35-71-560 (E). Residents' mail.**  E. Except as otherwise provided in this section, incoming and outgoing letters shall be held for no more than 24 hours and packages shall be held for no more than 48 hours, excluding weekends and holidays. |  |  |  |  |  |
| **6VAC35-71-560 (F). Residents' mail.**  F. Upon request, each resident shall be given postage and writing materials for all legal correspondence and at least two other letters per week. |  |  |  |  |  |
| **6VAC35-71-560 (G). Residents' mail.**  G. Residents shall be permitted to correspond at their own expense with any person or organization provided such correspondence does not pose a threat to facility order and security and is not being used to violate or to conspire to violate the law. |  |  |  |  |  |
| **6VAC35-71-560 (H). Residents' mail.**  H. First class letters and packages received for residents who have been transferred or released shall be forwarded. |  |  |  |  |  |
| **6VAC35-71-560 (I). Residents' mail.**  I. Written procedure governing correspondence of residents shall be made available to all employees and residents and updated as needed. |  |  |  |  |  |
| **Telephone calls.** | | | | | |
| **6VAC35-71-570. Telephone calls.**  Telephone calls shall be permitted in accordance with written procedures that take into account the need for facility security and order, the resident's behavior, and program objectives. |  |  |  |  |  |
| **Visitation.** | | | | | |
| **6VAC35-71-580 (A). Visitation.**  A. A resident's contacts and visits with immediate family members or legal guardians shall not be subject to unreasonable limitations; and any limitation shall be implemented only as permitted by written procedures, other applicable regulations, or by order of a court. |  |  |  |  |  |
| **6VAC35-71-580 (B). Visitation.**  B. Residents shall be permitted to have visitors, consistent with written procedures that take into account (i) the need for facility security and order, (ii) the behavior of individual residents and the visitors, and (iii) the importance of helping the resident maintain strong family and community relationships. Written procedures shall provide for the accommodation of special circumstances. |  |  |  |  |  |
| **6VAC35-71-580 (C). Visitation.**  C. Copies of the visitation procedures shall be mailed, either electronically or via first class mail, to the residents' parents or legal guardians, as applicable and appropriate, and other applicable persons no later than close of the next business day after arrival at the JCC, unless a copy has already been provided to the individual. |  |  |  |  |  |
| **6VAC35-71-580 (D). Visitation.**  D. Resident visitation at an employee's home is prohibited. |  |  |  |  |  |
| **Contact with attorneys, courts, and law enforcement.** | | | | | |
| **6VAC35-71-590 (A). Contact with attorneys, courts, and law enforcement.**  A. Residents shall have uncensored, confidential contact with their legal representative in writing, as provided for in 6VAC35-71-560 (residents' mail), by telephone, or in person. Reasonable limits may be placed on such contacts as necessary to protect the security and order of the facility. |  |  |  |  |  |
| **6VAC35-71-590 (B). Contact with attorneys, courts, and law enforcement.**  B. Residents shall not be denied access to the courts. |  |  |  |  |  |
| **6VAC35-71-590 (C). Contact with attorneys, courts, and law enforcement.**  C. Residents shall not be required to submit to questioning by law enforcement, though they may do so voluntarily.  1. Written procedures shall be implemented for obtaining a resident's consent prior to any contact with law enforcement.  2. No employee may coerce a resident's decision to consent to have contact with law enforcement. |  |  |  |  |  |
| **Personal necessities.** | | | | | |
| **6VAC35-71-600 (A). Personal necessities.**  A. At admission, each resident shall be provided the following:  1. An adequate supply of personal necessities for hygiene and grooming;  2. Size-appropriate clothing and shoes for indoor and outdoor wear;  3. A separate bed equipped with a mattress, a pillow, blankets, bed linens, and, if needed, a waterproof mattress cover; and  4. Individual washcloths and towels. |  |  |  |  |  |
| **6VAC35-71-600 (B). Personal necessities.**  B. At the time of issuance, all items shall be clean and in good repair. |  |  |  |  |  |
| **6VAC35-71-600 (C). Personal necessities.**  C. Personal necessities shall be replenished as needed. |  |  |  |  |  |
| **6VAC35-71-600 (D). Personal necessities.**  D. The washcloths, towels, and bed linens shall be cleaned or changed, at a minimum, once every seven days and more often, if needed. Bleach or another sanitizing agent approved by the federal Environmental Protection Agency to destroy bacteria shall be used in the laundering of such linens. |  |  |  |  |  |
| **6VAC35-71-600 (E). Personal necessities.**  E. After issuance, blankets shall be cleaned or changed as needed. |  |  |  |  |  |
| **Showers.** | | | | | |
| **6VAC35-71-610. Showers.**  Residents shall have the opportunity to shower daily except as (i) provided in written procedures for the purpose of maintaining facility security or for the special management of maladaptive behavior if approved by the superintendent or designee or a mental health professional or (ii) approved by the regulatory authority. |  |  |  |  |  |
| **Residents' privacy.** | | | | | |
| **6VAC35-71-620. Residents' privacy.**  Residents shall be provided a level of modesty from routine sight supervision by staff members of the opposite sex while bathing, dressing, or conducting toileting activities except (i) in exceptional security circumstances or (ii) when constant supervision is necessary to protect the resident due to mental health issues. This section does not apply to medical personnel performing medical procedures or to staff providing assistance to residents whose physical or mental disabilities dictate the need for assistance with these activities as justified in the resident's record. |  |  |  |  |  |
| **Nutrition.** | | | | | |
| **6VAC35-71-630 (A). Nutrition. CRITICAL**  A. Each resident, except as provided in subsection B of this section, shall be provided a daily diet that (i) consists of at least three nutritionally balanced meals, of which two are hot meals, and an evening snack; (ii) includes an adequate variety and quantity of food for the age of the resident; and (iii) meets the nutritional requirements of all applicable federal dietary requirements, such as U.S.D.A. |  |  |  |  |  |
| **6VAC35-71-630 (B). Nutrition. CRITICAL**  B. Special diets or alternative dietary schedules, as applicable, shall be provided in the following circumstances: (i) when prescribed by a physician; (ii) when necessary to observe the established religious dietary practices of the resident; or (iii) when necessary for the special management of maladaptive behavior or to maintain facility security if approved by the superintendent or designee or a mental health professional. In such circumstances, the meals shall meet the minimum nutritional requirements of all applicable federal dietary requirements, such as U.S.D.A., and any required approval shall be documented. |  |  |  |  |  |
| **6VAC35-71-630 (C). Nutrition.**  C. Menus of actual meals served shall be kept on file for at least six months. |  |  |  |  |  |
| **6VAC35-71-630 (D). Nutrition.**  D. Staff who eats in the presence of the residents shall be served the same meals as the residents unless a special diet has been prescribed by a physician for the staff or residents are observing established religious dietary practices. |  |  |  |  |  |
| **6VAC35-71-630 (E). Nutrition.**  E. There shall not be more than 15 hours between the evening meal and breakfast the following day, except when the superintendent approves an extension of time between meals on weekends and holidays. When an extension is granted on a weekend or holiday, there shall never be more than 17 hours between the evening meal and breakfast. |  |  |  |  |  |
| **6VAC35-71-630 (F). Nutrition.**  F. Each JCC shall assure that food is available to residents who for documented medical or religious reasons need to eat breakfast before the 15 hours have expired. |  |  |  |  |  |
| **Reading materials.** | | | | | |
| **6VAC35-71-640. Reading materials.**  Reading materials that are appropriate to residents' ages and levels of competency shall be available to all residents. |  |  |  |  |  |
| **Religion.** | | | | | |
| **6VAC35-71-650 (A). Religion.**  A. Residents shall not be required or coerced to participate in or unreasonably denied participation in religious activities. |  |  |  |  |  |
| **6VAC35-71-650 (B). Religion.**  B. Residents shall be informed of their rights relating to religious participation during orientation as provided in 6VAC35-71-680 (admission and orientation). |  |  |  |  |  |
| **Recreation.** | | | | | |
| **6VAC35-71-660 (A). Recreation.**  A. Each JCC shall implement a recreational program plan that includes:  1. Opportunities for individual and group activities;  2. Opportunity for large muscle exercise daily;  3. Scheduling so that activities do not conflict with meals, religious services, educational programs, or other regular events; and  4. Regularly scheduled indoor and outdoor recreational activities that are structured to develop skills. Outdoor recreation will be available whenever practicable in accordance with the facility's recreation plan. Staff shall document any adverse weather conditions, threat to facility security, or other circumstances preventing outdoor recreation. |  |  |  |  |  |
| **6VAC35-71-660 (B). Recreation.**  B. Each recreational program plan shall (i) address the means by which residents will be medically assessed for any physical limitations or necessary restrictions on physical activities and (ii) provide for the supervision of and safeguards for residents, including when participating in water related and swimming activities. |  |  |  |  |  |
| **Residents' funds.** | | | | | |
| **6VAC35-71-670. Residents' funds.**  Residents' funds, including any per diem or earnings, shall be used only (i) for their benefit; (ii) for payment of any fines, restitution, costs, or support ordered by a court or administrative judge; or (iii) to pay restitution for damaged property or personal injury as determined by disciplinary procedures. |  |  |  |  |  |
| **Part VI Program Operation** | | | | | |
| **Admission and orientation.** | | | | | |
| **6VAC35-71-680 (A). Admission and orientation.**  A. Written procedure governing the admission and orientation of residents to the JCC shall provide for:  1. Verification of legal authority for placement;  2. Search of the resident and the resident's possessions, including inventory and storage or disposition of property, as appropriate and provided for in 6VAC35-71-690 (residents' personal possessions);  3. Health screening as provided for in 6VAC35-71-940 (health screening at admission);  4. Notification of parent or legal guardian of admission;  5. Provision to the parent or legal guardian of information on (i) visitation, (ii) how to request information, and (iii) how to register concerns and complaints with the facility;  6. Interview with resident to answer questions and obtain information;  7. Explanation to resident of program services and schedules; and  8. Assignment of resident to a living unit, sleeping area, or room. |  |  |  |  |  |
| **6VAC35-71-680 (B). Admission and orientation.**  B. The resident shall receive an orientation to the following:  1. The behavior management program as required by 6VAC35-71-1090 (behavior management).  a. During the orientation, residents shall be given written information describing rules of conduct, the sanctions for rule violations, and the disciplinary process. These shall be explained to the resident and documented by the dated signature of resident and staff.  b. Where a language or literacy problem exists that can lead to a resident misunderstanding the rules of conduct and related regulations, staff or a qualified person under the supervision of staff shall assist the resident.  2. The grievance procedure as required by 6VAC35-71-80 (grievance procedure).  3. The disciplinary process as required by 6VAC35-71-1110 (disciplinary process).  4. The resident's responsibilities in implementing the emergency procedures as required by 6VAC35-71-460 (emergency and evacuation procedures).  5. The resident’s rights, including, but not limited to, the prohibited actions provided for in 6VAC35-71-550 (prohibited actions).  6. The resident's rights relating to religious participation as required by 6VAC35-71-650 (religion). |  |  |  |  |  |
| **Residents' personal possessions.** | | | | | |
| **6VAC35-71-690 (A). Residents' personal possessions.**  A. Each JCC shall inventory residents' personal possessions upon admission and document the information in residents' case records. When a resident arrives at a JCC with items that the resident is not permitted to possess in the facility, staff shall:  1. Dispose of contraband items in accordance with written procedures;  2. If the items are nonperishable property that the resident may otherwise legally possess, securely store the property and return it to the resident upon release; or  3. Make reasonable documented efforts to return the property to the resident, or parent or legal guardian. |  |  |  |  |  |
| **6VAC35-71-690 (B). Residents' personal possessions.**  B. Personal property that remains unclaimed six months after a documented attempt to return the property may be disposed of in accordance with written procedures. |  |  |  |  |  |
| **Classification plan.** | | | | | |
| **6VAC35-71-700 (A). Classification plan.**  A. A JCC shall utilize an objective classification system for determining appropriate security levels, the needs, and the most appropriate services of the residents and for assigning them to living units according to their needs and existing resources. |  |  |  |  |  |
| **6VAC35-71-700 (B). Classification plan.**  B. Residents shall be placed according to their classification levels. Such classification shall be reviewed as necessary in light of (i) the facility's safety and security and (ii) the resident's needs and progress. |  |  |  |  |  |
| **Resident transfer between and within JCCs.** | | | | | |
| **6VAC35-71-710 (A). Resident transfer between and within JCCs.**  A. When a resident is transferred between JCCs, the following shall occur:  1. The resident's case records, including medical and behavioral health records, shall accompany the resident to the receiving facility; and  2. The resident's parents or legal guardian, if applicable and appropriate, and the court service unit or supervising agency shall be notified within 24 hours of the transfer. |  |  |  |  |  |
| **6VAC35-71-710 (B). Resident transfer between and within JCCs.**  B. When a resident is transferred to a more restrictive unit, program, or facility within a JCC or between JCCs, the JCC shall provide due process safeguards for residents prior to their transfer. |  |  |  |  |  |
| **6VAC35-71-710 (C). Resident transfer between and within JCCs.**  C. In the case of emergency transfers, such safeguards and notifications shall be instituted as soon as practicable after transfer. |  |  |  |  |  |
| **Release.** | | | | | |
| **6VAC35-71-720 (A). Release.**  A. Residents shall be released from a JCC in accordance with written procedure. |  |  |  |  |  |
| **6VAC35-71-720 (B). Release.**  B. The case record of each resident serving an indeterminate commitment, who is not released pursuant to a court order, shall contain the following:  1. A discharge plan developed in accordance with written procedures;  2. Documentation that the release was discussed with the parent or legal guardian, if applicable and appropriate, the court services unit, and the resident; and  3. As soon as possible, but no later than 30 days after release, a comprehensive release summary placed in the resident's record and sent to the persons or agency that made the placement. The release summary shall review:  a. Services provided to the resident;  b. The resident's progress toward meeting service plan objectives;  c. The resident's continuing needs and recommendations, if any, for further services and care;  d. The names of persons to whom resident was released;  e. Dates of admission and release; and  f. Date the release summary was prepared and the identification of the person preparing it. |  |  |  |  |  |
| **6VAC35-71-720 (C). Release.**  C. The case record of each resident serving a determinate commitment or released pursuant to an order of a court shall contain a copy of the court order. |  |  |  |  |  |
| **6VAC35-71-720 (D). Release.**  D. As appropriate and applicable, information concerning current medications, need for continuing therapeutic interventions, educational status, and other items important to the resident's continuing care shall be provided to the legal guardian or legally authorized representative, as appropriate and applicable. |  |  |  |  |  |
| **6VAC35-71-720 (E). Release.**  E. Upon discharge, the (i) date of discharge and (ii) the name of the person to whom the resident was discharged, if applicable, shall be documented in the case record. |  |  |  |  |  |
| **Structured programming.** | | | | | |
| **6VAC35-71-740 (A). Structured programming.**  A. Each facility shall implement a comprehensive, planned, and structured daily routine, including appropriate supervision, designed to:  1. Meet the residents' physical and emotional needs;  2. Provide protection, guidance, and supervision;  3. Ensure the delivery of program services; and  4. Meet the objectives of any individual service plan. |  |  |  |  |  |
| **6VAC35-71-740 (B). Structured programming.**  B. Residents shall be provided the opportunity to participate in programming, as applicable, upon admission to the facility. |  |  |  |  |  |
| **Behavior management.** | | | | | |
| **6VAC35-71-745 (A). Behavior management.**  A. Each JCC shall implement a behavior management program approved by the director or designee. Behavior management shall mean those principles and methods employed to help a resident achieve positive behavior and to address and correct a resident's inappropriate behavior in a constructive and safe manner in accordance with written procedures governing program expectations, treatment goals, resident and staff safety and security, and the resident's individual service plan. |  |  |  |  |  |
| **6VAC35-71-745 (B). Behavior management.**  B. Written procedures governing this program shall provide the following:  1. List the behavioral expectations for the resident;  2. Define and list techniques that are used and available for use;  3. Specify the staff members who may authorize the use of each technique;  4. Specify the processes for implementing; and  5. Means of documenting and monitoring of the program's implementation. |  |  |  |  |  |
| **6VAC35-71-745 (C). Behavior management.**  C. When substantive revisions are made to the behavior management program, written information concerning the revisions shall be provided to the residents and direct care staff prior to implementation. |  |  |  |  |  |
| **Behavior support contract.** | | | | | |
| **6VAC35-71-747 (A). Behavior support contract.**  A. When a resident exhibits a pattern of behavior indicating a need for behavioral support in addition to that provided in the facility's behavior management program, a written behavior support contract shall be developed, in accordance with written procedures, with the intent of assisting the resident to self-manage these behaviors. Procedures governing behavior support contracts shall address (i) the circumstances under which such contracts will be utilized and (ii) the means of documenting and monitoring the contract's implementation. |  |  |  |  |  |
| **6VAC35-71-747 (B). Behavior support contract.**  B. Prior to working alone with an assigned resident, each staff member shall review and be prepared to implement the resident's behavior support contract. |  |  |  |  |  |
| **Communication with court service unit staff.** | | | | | |
| **6VAC35-71-750 (A). Communication with court service unit staff.**  A. Each resident's probation or parole officer shall be provided with the contact information for an individual at the facility to whom inquiries on assigned resident cases may be addressed. |  |  |  |  |  |
| **6VAC35-750 (B). Communication with court service unit staff.**  B. The resident's probation or parole officer shall be invited to participate in any scheduled classification and staffing team meetings at RDC and any scheduled treatment team meetings. |  |  |  |  |  |
| **Communication with parents.** | | | | | |
| **6VAC35-71-760 (A). Communication with parents.**  A. Each resident's parent or legal guardian, as appropriate and applicable, shall be provided with the contact information for an individual at the facility to whom inquiries regarding the resident may be addressed. |  |  |  |  |  |
| **6VAC35-71-760 (B). Communication with parents.**  B. The resident's parent or legal guardian, as appropriate and applicable, shall be provided written notice of and the opportunity to participate in any scheduled classification and staffing team meetings at RDC and any scheduled treatment team meetings. |  |  |  |  |  |
| **Case management services.** | | | | | |
| **6VAC35-71-770 (A). Case management services**  A. The facility shall implement written procedures governing case management services, which shall address:  1. The resident's adjustment to the facility, group living, and separation from the resident's family;  2. Supportive counseling, as needed;  3. Transition and community reintegration planning and preparation; and  4. Communicating with (i) staff at the facility; (ii) the parents or legal guardians, as appropriate and applicable; (iii) the court service unit; and (iv) community resources, as needed. |  |  |  |  |  |
| **6VAC35-71-770 (B). Case management services**  B. The provision of case management services shall be documented in the case record. |  |  |  |  |  |
| **Individual service plans.** | | | | | |
| **6VAC35-71-790 (A). Individual service plans.**  A. An individual service plan shall be developed and placed in the resident's record within 30 days following arrival at the facility and implemented immediately thereafter. This section does not apply to residents who are housed at RDC for 60 days or less. If a resident remains at RDC for longer than 60 days, an individual plan shall be developed at that time, placed in the resident's record, and implemented immediately thereafter. |  |  |  |  |  |
| **6VAC35-71-790 (B). Individual service plans.**  B. Individual service plans shall describe in measurable terms the:  1. Strengths and needs of the resident;  2. Resident's current level of functioning;  3. Goals, objectives, and strategies established for the resident;  4. Projected family involvement;  5. Projected date for accomplishing each objective; and  6. Status of the projected release plan and estimated length of stay except that this requirement shall not apply to residents who are determinately committed to the department. |  |  |  |  |  |
| **6VAC35-71-790 (C). Individual service plans.**  C. Each individual service plan shall include the date it was developed and the signature of the person who developed it. |  |  |  |  |  |
| **6VAC35-71-790 (D). Individual service plans.**  D. The resident and facility staff shall participate in the development of the individual service plan. |  |  |  |  |  |
| **6VAC35-71-790 (E). Individual service plans.**  E. The supervising agency and resident's parents, legal guardian, or legally authorized representative, if appropriate and applicable, shall be given the opportunity to participate in the development of the resident's individual service plan. |  |  |  |  |  |
| **6VAC35-71-790 (F). Individual service plans.**  F. Copies of the individual service plan shall be provided to the (i) resident; (ii) parents or legal guardians, as appropriate and applicable, and (iii) placing agency. |  |  |  |  |  |
| **6VAC35-71-790 (G). Individual service plans.**  G. The individual service plan shall be reviewed within 60 days of the development of the individual service plan and within each 90-day period thereafter. |  |  |  |  |  |
| **6VAC35-71-790 (H). Individual service plans.**  H. The individual service plan shall be updated annually and revised as necessary. Any changes to the plan shall be made in writing. All participants shall receive copies of the revised plan. |  |  |  |  |  |
| **Quarterly reports.** | | | | | |
| **6VAC35-71-800 (A). Quarterly reports.**  A. The resident's progress toward meeting his individual service plan goals shall be reviewed, and a progress report shall be prepared within 60 days of the development of the service plan and within each 90-day period thereafter. The report shall review the status of the following:  1. Resident's progress toward meeting the plan's objectives;  2. Family's involvement;  3. Continuing needs of the resident;  4. Resident's progress towards discharge; and  5. Status of discharge planning. |  |  |  |  |  |
| **6VAC35-71-800 (B). Quarterly reports.**  B. Each quarterly progress report shall include the date it was developed and the signature of the person who developed it. |  |  |  |  |  |
| **6VAC35-71-800 (C). Quarterly reports.**  C. All quarterly progress reports shall be reviewed with the resident and distributed to the resident's parents, legal guardian, or legally authorized representative; the supervising agency; and appropriate facility staff. |  |  |  |  |  |
| **Suicide prevention.** | | | | | |
| **6VAC35-71-805. Suicide prevention. CRITICAL**  Written procedure shall provide that (i) there is suicide prevention and intervention program developed in consultation with a qualified medical or mental health professional and (ii) all direct care staff are trained and retrained in the implementation of the program. |  |  |  |  |  |
| **Behavioral health services.** | | | | | |
| **6VAC35-71-810. Behavioral health services.**  Behavioral health services, if provided, shall be provided by an individual (i) licensed by the Department of Health Professions or (ii) who is working under the supervision of a licensed clinician. |  |  |  |  |  |
| **Daily log.** | | | | | |
| **6VAC35-71-815 (A). Daily log.**  A. A daily log shall be maintained, in accordance with written procedures, to inform staff of significant happenings or problems experienced by residents including, but not limited to, health and dental complaints and injuries. |  |  |  |  |  |
| **6VAC35-71-30 815 (B). Daily log.**  B. Each entry in the daily log shall contain (i) the date of the entry, (ii) the name of the individual making the entry, and (iii) the time each entry is made. |  |  |  |  |  |
| **Staff supervision of residents.** | | | | | |
| **6VAC35-71-820 (A). Staff supervision of residents.**  A. Staff shall provide 24-hour awake supervision seven days a week. |  |  |  |  |  |
| **6VAC35-71-820 (B). Staff supervision of residents.**  B. No member of the direct care staff shall be on duty more than six consecutive days without a rest day, except in an emergency. For the purpose of this section, a rest day means a period of not less than 24 consecutive hours during which the direct care staff person has no responsibility to perform duties related to the operation of a JCC. |  |  |  |  |  |
| **6VAC35-71-820 (C). Staff supervision of residents.**  C. Direct care staff shall be scheduled with an average of at least two rest days per week in any four-week period. |  |  |  |  |  |
| **6VAC35-71-820 (D). Staff supervision of residents.**  D. Direct care staff shall not be on duty more than 16 consecutive hours, except in an emergency. |  |  |  |  |  |
| **6VAC35-71-820 (E). Staff supervision of residents.**  E. There shall be at least one trained direct care staff on duty and actively supervising residents at all times that one or more residents are present. |  |  |  |  |  |
| **6VAC35-71-820 (F). Staff supervision of residents.**  F. The facility shall implement written procedures that address staff supervision of residents including contingency plans for resident illnesses, emergencies, and off-campus activities. These procedures shall be based on the:  1. Needs of the population served;  2. Types of services offered;  3. Qualifications of staff on duty; and  4. Number of residents served. |  |  |  |  |  |
| **6VAC35-71-820 (G). Staff supervision of residents.**  G. Staff shall regulate the movement of residents within the facility in accordance with written procedures. |  |  |  |  |  |
| **6VAC35-71-820 (H). Staff supervision of residents.**  H. No JCC shall permit an individual resident or group of residents to exercise control or authority over other residents except when practicing leadership skills as part of an approved program under the direct and immediate supervision of staff. |  |  |  |  |  |
| **Staffing pattern.** | | | | | |
| **6VAC35-71-830 (A). Staffing pattern.**  A. During the hours that residents are scheduled to be awake, there shall be at least one direct care staff member awake, on duty, and responsible for supervision of every 10 residents, or portion thereof, on the premises or participating in off-campus, facility-sponsored activities. |  |  |  |  |  |
| **6VAC35-71-830 (B). Staffing pattern.**  B. During the hours that residents are scheduled to sleep, there shall be no less than one direct care staff member on duty and responsible for supervision of every 16 residents, or portion thereof, on the premises. |  |  |  |  |  |
| **6VAC35-71-830 (C). Staffing pattern.**  C. There shall be at least one direct care staff member on duty and responsible for the supervision of residents in each building or living unit where residents are sleeping. |  |  |  |  |  |
| **Outside personnel.** | | | | | |
| **6VAC35-71-840 (A). Outside personnel.**  A. JCC staff shall monitor all situations in which outside personnel perform any kind of work in the immediate presence of residents. |  |  |  |  |  |
| **6VAC35-71-840 (B). Outside personnel.**  B. Adult inmates shall not work in the immediate presence of any resident and shall be monitored in a way that there shall be no direct contact between or interaction among adult inmates and residents. |  |  |  |  |  |
| **Facility work assignments.** | | | | | |
| **6VAC35-71-850 (A). Facility work assignments.**  A. Work assignments, whether paid or unpaid, shall be in accordance with the age, health, ability, and service plan of the resident. |  |  |  |  |  |
| **6VAC35-71-850 (B). Facility work assignments.**  B. Work assignments shall not interfere with school programs, study periods, meals, or sleep. |  |  |  |  |  |
| **Agreements governing juvenile industries work programs.** | | | | | |
| **6VAC35-71-860 (A). Agreements governing juvenile industries work programs.**  A. If the department enters into an agreement with a public or private entity for the operation of a work program pursuant to § 66-25.1 of the Code of Virginia, the agreement shall:  1. Comply with all applicable federal and state laws and regulations, including but not limited to the Fair Labor Standards Act (29 USC § 201 et seq.), child labor laws, and workers' compensation insurance laws;  2. State the length of the agreement and the criteria by which it may be extended or terminated;  3. Specify where residents will work and, if not at a juvenile correctional center, the security arrangements at the work site; and  4. Summarize the educational, vocational, or job training benefits to residents. |  |  |  |  |  |
| **6VAC35-71-860 (B). Agreements governing juvenile industries work programs.**  B. The agreement shall address how residents will be hired and supervised, including:  1. The application and selection process;  2. The qualifications required of residents;  3. A requirement that there be a job description for each resident's position;  4. Evaluation of each resident's job-related behaviors and attitudes, attendance, and quality of work; and  5. Whether and how either party may terminate a resident's participation. |  |  |  |  |  |
| **6VAC35-71-860 (C). Agreements governing juvenile industries work programs.**  C. The agreement shall address resident's compensation including:  1. The manner by which and through what funding source residents are to be paid; and  2. If applicable, whether any deductions shall be made from the resident's compensation for subsistence payments, restitution to victims, etc. |  |  |  |  |  |
| **6VAC35-71-860 (D). Agreements governing juvenile industries work programs.**  D. As applicable, the agreement shall specify:  1. That accurate records be kept of the work program's finances, materials inventories, and residents' hours of work, and that such records be subject to inspection by either party and by an independent auditor;  2. How the project's goods or services will be marketed;  3. How proceeds from the project will be collected and distributed to the parties; and  4. Which party is responsible for providing:  a. The materials to be worked on;  b. The machinery to be used;  c. Technical training and supervision in the use of equipment or processes;  d. Utilities;  e. Transportation of raw materials and finished goods;  f. Disposal of waste generated in the work project; and  g. Safety and other special equipment and clothing. |  |  |  |  |  |
| **Part VII Health Care Services** | | | | | |
| **Local health authority.** | | | | |  |
| **6VAC35-71-880. Local health authority. CRITICAL**  A physician, health administrator, government authority, health care contractor, supervising registered nurse or head nurse, or health agency shall be designated the local health authority responsible for organizing, planning, and monitoring the timely provision of appropriate health care services, including arrangements for all levels of health care and the ensuring of quality and accessibility of all health services, including medical, nursing, dental, and mental health care, consistent with applicable statutes, prevailing community standards, and medical ethics. All medical, psychiatric, dental, and nursing matters are the province of the physician, dentist, and nurse, respectively. |  |  |  |  |  |
| **Provision of health care services.** | | | | | |
| **6VAC35-71-890 (A). Provision of health care services.**  A. The health care provider shall be guided by recommendations of the American Academy of Family Practice or the American Academy of Pediatrics, as appropriate, in the direct provision of health care services. |  |  |  |  |  |
| **6VAC35-71-890 (B). Provision of health care services.**  B. Treatment by nursing personnel shall be performed pursuant to the laws and regulations governing the practice of nursing within the Commonwealth. Other health trained personnel shall provide care within their level of training and certification. |  |  |  |  |  |
| **Health care procedures.** | | | | | |
| **6VAC35-71-900 (A). Health care procedures. CRITICAL**  A. The department shall have and implement written procedures for promptly:  1. Providing or arranging for the provision of medical and dental services for health problems identified at admission;  2. Providing or arranging for the provision of routine ongoing and follow-up medical and dental services after admission;  3. Providing emergency services for each resident as provided by statute or by the agreement with the resident's legal guardian, if under the age of 18, or the resident, if over the age of 18;  4. Providing emergency services for any resident experiencing or showing signs of suicidal or homicidal thoughts, symptoms of mood or thought disorders, or other mental health problems; and  5. Ensuring that the required information in subsection B of this section is accessible and up to date. |  |  |  |  |  |
| **6VAC35-71-900 (B). Health care procedures.**  B. The following written information concerning each resident shall be readily accessible to designated staff who may have to respond to a medical or dental emergency:  1. The physician or dentist to be contacted;  2. Name, address, and telephone number of a relative or other person to be notified; and  3. Information concerning:  a. Use of medication;  b. All allergies, including medication allergies;  c. Substance abuse and use; and  d. Significant past and present medical problems. |  |  |  |  |  |
| **6VAC35-71-900 (C). Health care procedures.**  C. Other health-trained personnel shall provide care as appropriate to their level of training and certification and shall not administer health care services for which they are not qualified or specifically trained. |  |  |  |  |  |
| **6VAC35-71-900 (D). Health care procedures.**  D. The facility shall retain documentation of the training received by health-trained personnel necessary to perform any designated health care services. Documentation of applicable, current licensure or certification shall constitute compliance with this section. |  |  |  |  |  |
| **Consent and refusal of health care services.** | | | | | |
| **6VAC35-71-930 (A). Consent and refusal of health care services.**  A. The resident or parent or legal guardian, as applicable, shall be advised by an appropriately trained medical professional of (i) the material facts regarding the nature, consequences, and risks of the proposed treatment, examination, or procedure; and (ii) the alternatives to it. |  |  |  |  |  |
| **6VAC35-71-930 (B). Consent and refusal of health care services.**  B. Health care services, as defined in 6VAC35-71-10 (definitions), shall be provided in accordance with § 54.1-2969 of the Code of Virginia. |  |  |  |  |  |
| **6VAC35-71-930 (C). Consent and refusal of health care services.**  C. Residents may refuse, in writing, medical treatment and care. This subsection does not apply to medication refusals that are governed by 6VAC35-71-1070 (medication). |  |  |  |  |  |
| **6VAC35-71-930 (D). Consent and refusal of health care services.**  D. When health care is rendered against the resident's will, it shall be in accordance with applicable laws and regulations |  |  |  |  |  |
| **Health screening at admission.** | | | | | |
| **6VAC35-71-940. Health screening at admission. CRITICAL**  Written procedure shall require that:  1. To prevent newly arrived residents who pose a health or safety threat to themselves or others from being admitted to the general population, all residents shall immediately upon admission undergo a preliminary health screening consisting of a structured interview and observation by health care personnel or health trained staff.  2. Residents admitted to the facility who are identified through the screening required in subdivision 1 of this section as posing a health risk to themselves or others shall be separated from the facility's general population until they are no longer a risk. During the period of separation, the residents shall receive services approximating those available to the facility's general population, as deemed appropriate to their condition.  3. Immediate health care is provided to residents who need it. |  |  |  |  |  |
| **Tuberculosis screening.** | | | | | |
| **6VAC35-71-950 (A). Tuberculosis screening. CRITICAL**  A. Within seven days of placement, each resident shall have had a screening assessment for tuberculosis. The screening assessment can be no older than 30 days. |  |  |  |  |  |
| **6VAC35-71-950 (B). Tuberculosis screening. CRITICAL**  B. A screening assessment for tuberculosis shall be completed annually on each resident. |  |  |  |  |  |
| **6VAC35-71-950 (C). Tuberculosis screening.**  C. The facility's screening practices shall be performed consistent with the current requirements of the Virginia Department of Health, Division of Tuberculosis Prevention and Control and the Department of Health and Human Services Centers for Disease Control and Prevention, for the detection, diagnosis, prophylaxis, and treatment of pulmonary tuberculosis. |  |  |  |  |  |
| **Medical examinations.** | | | | | |
| **6VAC35-71-960 (A). Medical examinations.**  A. Within five days of arrival at a JCC, all residents who are not directly transferred from another JCC shall be medically examined by a physician or a qualified health care practitioner operating under the supervision of a physician to determine if the resident requires medical attention or poses a threat to the health of staff or other residents. This examination shall include the following:  1. Complete medical, immunization, and psychiatric history;  2. Recording of height, weight, body mass index, temperature, pulse, respiration, and blood pressure;  3. Reports of medical laboratory testing and clinical testing results, as deemed medically appropriate, to determine both clinical status and freedom from communicable disease;  4. Medical examination, including gynecological assessment of females, when appropriate;  5. Documentation of immunizations administered; and  6. A plan of care, including initiation of treatment, as appropriate. |  |  |  |  |  |
| **6VAC35-71-960 (B). Medical examinations. CRITICAL**  B. For residents transferring from one JCC to another, the report of a medical examination within the preceding 13 months shall be acceptable. |  |  |  |  |  |
| **6VAC35-71-960 (C). Medical examinations. CRITICAL**  C. Each resident shall have an annual physical examination by or under the direction of a licensed physician. |  |  |  |  |  |
| **Dental examinations.** | | | | | |
| **6VAC35-71-970 (A). Dental examinations. CRITICAL**  A. Within seven days of arrival at a JCC, all residents who are not directly transferred from another JCC shall undergo a dental examination by a dentist. |  |  |  |  |  |
| **6VAC35-71-970 (B). Dental examinations. CRITICAL**  B. For residents transferring from one JCC to another, the report of a dental examination within the preceding 13 months shall be acceptable. |  |  |  |  |  |
| **6VAC35-71-970 (C). Dental examinations. CRITICAL**  C. Each resident shall have an annual dental examination by a dentist and routine prophylactic treatment. |  |  |  |  |  |
| **Immunizations.** | | | | | |
| **6VAC35-71-980. Immunizations.**  Each resident's immunizations shall be updated consistent with the regulations (12VAC5-90-110) of the Virginia Department of Health, Office of Epidemiology, Division of Immunization, at the time the record is reviewed. Exemptions for immunizations shall be granted consistent with state or federal law. |  |  |  |  |  |
| **Health screening for intrasystem transfers.** | | | | | |
| **6VAC35-71-990 (A). Health screening for intrasystem transfers.**  A. All residents transferred between JCCs shall receive a medical, dental, and mental health screening by health-trained or qualified health care personnel upon arrival at the facility. The screening shall include:  1. A review of the resident's health care record;  2. Discussion with the resident on his medical status; and  3. Observation of the resident. |  |  |  |  |  |
| **6VAC35-71-990 (B). Health screening for intrasystem transfers**  B. All findings shall be documented and the resident shall be referred for follow-up care as appropriate. |  |  |  |  |  |
| **Infectious or communicable diseases.** | | | | | |
| **6VAC35-71-1000 (A). Infectious or communicable diseases. CRITICAL**  A. A resident with a known communicable disease that can be transmitted person-to-person shall not be housed in the general population unless a licensed physician certifies that:  1. The facility is capable of providing care to the resident without jeopardizing residents and staff; and  2. The facility is aware of the required treatment for the resident and the procedures to protect residents and staff. |  |  |  |  |  |
| **6VAC35-1000 (B). Infectious or communicable diseases.**  B. The facility shall implement written procedures, approved by a medical professional, that:  1. Address staff (i) interactions with residents with infectious, communicable, or contagious medical conditions; and (ii) use of standard precautions;  2. Require staff training in standard precautions, initially and annually thereafter; and  3. Require staff to follow procedures for dealing with residents who have infectious or communicable diseases. |  |  |  |  |  |
| **6VAC35-1000 (C). Infectious or communicable diseases.**  C. Employees providing medical services shall be trained in tuberculosis control practices. |  |  |  |  |  |
| **Residents' health records.** | | | | | |
| **6VAC35-71-1020 (A). Residents' health records. CRITICAL**  A. Each resident's health record shall include written documentation of (i) the initial physical examination, (ii) an annual physical examination by or under the direction of a licensed physician including any recommendation for follow-up care, and (iii) documentation of the provision of follow-up medical care recommended by the physician. |  |  |  |  |  |
| **6VAC35-71-1020 (B). Residents' health records.**  B. Each physical examination report shall include:  1. Information necessary to determine the health and immunization needs of the resident, including:  a. Immunizations administered at the time of the exam;  b. Vision exam;  c. Hearing exam;  d. General physical condition, including documentation of apparent freedom from communicable disease including tuberculosis;  e. Allergies, chronic conditions, and handicaps, if any;  f. Nutritional requirements, including special diets, if any;  g. Restrictions on physical activities, if any; and  h. Recommendations for further treatment, immunizations, and other examinations indicated.  2. Date of the physical examination; and  3. Signature of a licensed physician, the physician's designee, or an official of a local health department. |  |  |  |  |  |
| **6VAC35-71-1020 (C). Residents' health records.**  C. Each resident's health record shall include written documentation of (i) an annual examination by a licensed dentist and (ii) documentation of follow-up dental care recommended by the dentist based on the needs of the resident. |  |  |  |  |  |
| **6VAC35-71-1020 (D). Residents' health records.**  D. Each resident's health record shall include notations of health and dental complaints and injuries and shall summarize symptoms and treatment given. |  |  |  |  |  |
| **6VAC35-71-1020 (E). Residents' health records.**  E. Each resident's health record shall include, or document the facility's efforts to obtain, treatment summaries of ongoing psychiatric or other mental health treatment and reports, if applicable. |  |  |  |  |  |
| **6VAC35-71-1020 (F). Residents' health records.**  F. Written procedure shall provide that residents' active health records shall be:  1. Kept confidential from unauthorized persons and in a file separate from the case record;  2. Readily accessible in case of emergency; and  3. Made available to authorized staff consistent with applicable state and federal laws. |  |  |  |  |  |
| **First aid kits.** | | | | | |
| **6VAC35-71-1030 (A). First aid kits.**  A. Each facility shall have first aid kits that shall be maintained in accordance with written procedures that shall address the (i) contents; (ii) location; and (iii) method of restocking. |  |  |  |  |  |
| **6VAC35-71-1030 (B). First aid kits.**  B. The first aid kit shall be readily accessible for minor injuries and medical emergencies. |  |  |  |  |  |
| **Sick call.** | | | | | |
| **6VAC35-71-1040 (A). Sick call.**  A. All residents shall have the opportunity daily to request health care services. |  |  |  |  |  |
| **6VAC35-71-1040 (B). Sick call.**  B. Resident requests for health care services shall be documented, reviewed for the immediacy of need and the intervention required, and responded to daily by qualified medical staff. Residents shall be referred to a physician consistent with established protocols and written or verbal orders issued by personnel authorized by law to give such orders. |  |  |  |  |  |
| **6VAC35-71-1040 (C). Sick call.**  C. The frequency and duration of sick call shall be sufficient to meet the health needs of the facility population. For the purpose of this section, sick call shall mean the evaluation and treatment of a resident in a clinical setting, either on or off site, by a qualified health care professional. |  |  |  |  |  |
| **Emergency medical services.** | | | | | |
| **6VAC35-71-1050 (A). Emergency medical services.**  A. Each JCC shall have access to 24-hour emergency medical, mental health, and dental services for the care of an acute illness or unexpected health care need that cannot be deferred until the next scheduled sick call. |  |  |  |  |  |
| **6VAC35-71-1050 (B). Emergency medical services.**  B. Procedures shall include arrangements for the following:  1. Utilization of 911 emergency services;  2. Emergency transportation of residents from the facility;  3. Security procedures for the immediate transfer of residents when appropriate;  4. Use of one or more designated hospital emergency departments or other appropriate facilities consistent with the operational procedures of local supporting rescue squads;  5. Response by on-call health care providers to include provisions for telephonic consultation, guidance, or direct response as clinically appropriate; and  6. On-site first aid and crisis intervention. |  |  |  |  |  |
| **6VAC35-71-1050 (C). Emergency medical services.**  C. Staff who respond to medical or dental emergencies shall do so in accordance with written procedures. |  |  |  |  |  |
| **Hospitalization and other outside medical treatment of residents.** | | | | | |
| **6VAC35-71-1060 (A). Hospitalization and other outside medical treatment of residents.**  A. When a resident needs hospital care or other medical treatment outside the facility:  1. The resident shall be transported safely and in accordance with applicable security procedures that are applied consistent with the severity of the medical condition; and  2. Staff shall escort and supervise residents when outside the facility for hospital care or other medical treatment, until appropriate security arrangements are made. This subdivision shall not apply to the transfer of residents under the Psychiatric Inpatient Treatment of Minors Act (§§ 16.1-355 et seq. of the Code of Virginia). |  |  |  |  |  |
| **6VAC35-71-1060 (B). Hospitalization and other outside medical treatment of residents.**  B. In accordance with applicable laws and regulations, the parent or legal guardian, as appropriate and applicable, shall be informed that the resident was taken outside the facility for medical attention as soon as is practicable. |  |  |  |  |  |
| **Medication.** | | | | | |
| **6VAC35-71-1070 (A). Medication. CRITICAL**  A. All medication shall be properly labeled consistent with the requirements of the Virginia Drug Control Act (§ 54.1-3400 et seq.). Medication prescribed for individual use shall be so labeled. |  |  |  |  |  |
| **6VAC35-71-1070 (B). Medication. CRITICAL**  B. All medication shall be securely locked, except when otherwise ordered by a physician on an individual basis for keep-on-person or equivalent use. |  |  |  |  |  |
| **6VAC35-71-1070 (C). Medication. CRITICAL**  C. All staff responsible for medication administration who do not hold a license issued by the Virginia Department of Health Professions authorizing the administration of medications shall successfully complete a medication training program approved by the Board of Nursing and receive annual refresher training as required before they can administer medication. |  |  |  |  |  |
| **6VAC35-71-1070 (D). Medication.**  D. Staff authorized to administer medication shall be informed of any known side effects of the medication and the symptoms of the effects. |  |  |  |  |  |
| **6VAC35-71-1070 (E). Medication. CRITICAL**  E. A program of medication, including procedures regarding the use of over-the-counter medication pursuant to written or verbal orders signed by personnel authorized by law to give such orders, shall be initiated for a resident only when prescribed in writing by a person authorized by law to prescribe medication. |  |  |  |  |  |
| **6VAC35-71-1070 (F). Medication.**  F. All medications shall be administered in accordance with the physician's or other prescriber's instructions and consistent with the requirements of § 54.2-2408 of the Code of Virginia and the Virginia Drug Control Act (§ 54.1-3400 et seq.). |  |  |  |  |  |
| **6VAC35-71-1070 (G). Medication.**  G. A medication administration record shall be maintained of all medicines received by each resident and shall include:  1. Date the medication was prescribed or most recently refilled;  2. Drug name;  3. Schedule for administration, to include notation of each dose administered or refused;  4. Strength;  5. Route;  6. Identity of the individual who administered the medication; and  7. Dates the medication was discontinued or changed. |  |  |  |  |  |
| **6VAC35-71-1070 (H). Medication. CRITICAL**  H. In the event of a medication incident or an adverse drug reaction, first aid shall be administered if indicated. As addressed in the physician's standing orders, staff shall promptly contact a physician, nurse, pharmacist, or poison control center and shall take actions as directed. If the situation is not addressed in standing orders, the attending physician shall be notified as soon as possible and the actions taken by staff shall be documented. A medical incident shall mean an error made in administering a medication to a resident including the following: (i) a resident is given incorrect medication; (ii) medication is administered to the incorrect resident; (iii) an incorrect dosage is administered; (iv) medication is administered at a wrong time or not at all; and (v) the medication is administered through an improper method. A medication incident does not include a resident's refusal of appropriately offered medication. |  |  |  |  |  |
| **6VAC35-71-1070 (I). Medication.**  I. Written procedures shall provide for (i) the documentation of medication incidents, (ii) the review of medication incidents and reactions and making any necessary improvements, (iii) the storage of controlled substances, and (iv) the distribution of medication off campus. The procedures must be approved by a department's health administrator. Documentation of this approval shall be retained. |  |  |  |  |  |
| **6VAC35-71-1070 (J). Medication. CRITICAL**  J. Medication refusals shall be documented including action taken by staff. The facility shall follow procedures for managing such refusals, which shall address:  1. Manner by which medication refusals are documented; and  2. Physician follow-up, as appropriate. |  |  |  |  |  |
| **6VAC35-71-1070 (K). Medication.**  K. Disposal and storage of unused, expired, and discontinued medications shall be in accordance with applicable laws and regulations. |  |  |  |  |  |
| **6VAC35-71-1070 (L). Medication.**  L. The telephone number of a regional poison control center and other emergency numbers shall be posted on or next to each non-pay telephone that has access to an outside line in each building in which residents sleep or participate in programs. |  |  |  |  |  |
| **6VAC35-71-1070 (M). Medication. CRITICAL**  M. Syringes and other medical implements used for injecting or cutting skin shall be locked and inventoried in accordance with facility procedures. |  |  |  |  |  |
| **Release physical.** | | | | | |
| **6VAC35-71-1080. Release physical.**  Each resident shall be medically examined by a physician or qualified health care practitioner operating under the supervision of a physician within 30 days prior to release, unless exempted by the responsible physician based on a sufficiently recent full medical examination. |  |  |  |  |  |
| **Part VIII Behavior Interventions** | | | | | |
| **Disciplinary process.** | | | | | |
| **6VAC35-71-1110 (A). Disciplinary process.**  A. Each JCC shall follow written procedures for handling (i) minor resident misbehavior through an informal process and (ii) instances when a resident is charged with a violation of the rules of conduct through the formal process outlined below. Such procedures shall provide for (i) graduated sanctions and (ii) staff and resident orientation and training on the procedures. |  |  |  |  |  |
| **6VAC35-71-1110 (B). Disciplinary process.**  B. When staff has reason to believe a resident has committed a rule violation that cannot be resolved through the facility's informal process; staff shall prepare a disciplinary report detailing the alleged rule violation. The resident shall be given a written copy of the report within 24 hours of the alleged rule violation. |  |  |  |  |  |
| **6VAC35-71-1110 (C). Disciplinary process.**  C. After the resident receives notice of an alleged rule violation, the resident shall be provided the opportunity to admit or deny the charge.  1. The resident may admit to the charge in writing to a superintendent or designee who was not involved in the incident, accept the sanction prescribed for the offense, and waive his right to any further review.  2. If the resident denies the charge or there is reason to believe that the resident's admission is coerced or that the resident does not understand the charge or the implication of the admission, the formal process for resolving the matter detailed in subsection D of this section shall be followed. |  |  |  |  |  |
| **6VAC35-71-1110 (D). Disciplinary process.**  D. The formal process for resolving rule violations shall provide the following:  1. A disciplinary hearing to determine if substantial evidence exists to find the resident guilty of the rule violation shall be scheduled to occur no later than seven days, excluding weekends and holidays, after the rule violation. The hearing may be postponed with the resident's consent.  2. The resident alleged to have committed the rule violations shall be given at least 24 hours notice of the time and place of the hearing, but the hearing may be held within 24 hours with the resident's written consent. |  |  |  |  |  |
| 3. The disciplinary hearing on the alleged rule violation shall:  a. Be conducted by an impartial and objective staff who shall determine (i) what evidence is admissible, (ii) the guilt or innocence of the resident, and (iii) if the resident is found guilty of the rule violation, what sanctions shall be imposed;  b. Allow the resident to be present throughout the hearing, unless the resident waives the right to attend, his behavior justifies exclusion, or another resident's testimony must be given in confidence. The reason for the resident's absence or exclusion shall be documented;  c. Permit the resident to make a statement and present evidence and to request relevant witnesses on his behalf. The reasons for denying such requests shall be documented;  d. Permit the resident to request a staff member to represent him and question the witnesses. A staff member shall be appointed to help the resident when it is apparent that the resident is not capable of effectively collecting and presenting evidence on his own behalf; and  e. Be documented, with a record of the proceedings kept for six months.  4. A written record shall be made of the hearing disposition and supporting evidence. The hearing record shall be kept on file at the JCC.  5. The resident shall be informed in writing of the disposition and, if found guilty of the rule violation, the reasons supporting the disposition and the right to appeal.  6. If the resident is found guilty of the rule violation, a copy of the disciplinary report shall be placed in the case record.  7. The superintendent or designee shall review all disciplinary hearings and dispositions to ensure conformity with procedures and regulations.  8. The resident shall have the right to appeal the disciplinary hearing decision to the superintendent or designee within 24 hours of receiving the decision. The appeal shall be decided within 24 hours of its receipt, and the resident shall be notified in writing of the results within three days. These time frames do not include weekends and holidays. |  |  |  |  |  |
| **6VAC35-71-1110 (E). Disciplinary process.**  E. When it is necessary to place the resident in confinement to protect the facility's security or the safety of the resident or others, the charged resident may be confined pending the formal hearing for up to 24 hours. Confinement for longer than 24 hours must be reviewed at least once every 24 hours by the superintendent or designee who was not involved in the incident. For any confinement exceeding 72 hours, notice shall be made in accordance with 6VAC35-71-1140 D (room confinement). |  |  |  |  |  |
| **Timeout.** | | | | | |
| **6VAC35-71-1120 (A). Timeout.**  A. Facilities that use a systematic behavior management technique program component designed to reduce or eliminate inappropriate or problematic behavior by having a staff require a resident to move to a specific location that is away from a source of reinforcement for a specific period of time or until the problem behavior has subsided (timeout) shall implement procedures governing the following:  1. The conditions, based on the resident's chronological and developmental level, under which a resident may be placed in timeout;  2. The maximum period of timeout based on the resident's chronological and developmental level; and  3. The area in which a resident is placed. |  |  |  |  |  |
| **6VAC35-71-1120 (B). Timeout.**  B. A resident in timeout shall be able to communicate with staff. |  |  |  |  |  |
| **6VAC35-71-1120 (C). Timeout.**  C. Staff shall check on the resident in the timeout area at least every 15 minutes and more often depending on the nature of the resident's disability, condition, and behavior. |  |  |  |  |  |
| **6VAC35-71-1120 (D). Timeout.**  D. Use of timeout and staff checks on the residents shall be documented. |  |  |  |  |  |
| **Physical restraint.** | | | | | |
| **6VAC35-71-1130 (A). Physical restraint. CRITICAL**  A. Physical restraint shall be used as a last resort only after less restrictive behavior intervention techniques have failed or to control residents whose behavior poses a risk to the safety of the resident, others, or the public.  1. Staff shall use the least force necessary to eliminate the risk or to maintain security and order and shall never use physical restraint as punishment or with intent to inflict injury.  2. Trained staff members may physically restrain a resident only after less restrictive behavior interventions have failed or when failure to restrain would result in harm to the resident or others.  3. Physical restraint may be implemented, monitored, and discontinued only by staff who have been trained in the proper and safe use of restraint.  4. For the purpose of this section, physical restraint shall mean the application of behavior intervention techniques involving a physical intervention to prevent an individual from moving all or part of that individual's body. |  |  |  |  |  |
| **6VAC35-71-1130 (B). Physical restraint. CRITICAL**  B. Each JCC shall implement written procedures governing use of physical restraint that shall include:  1. A requirement for training in crisis prevention and behavior intervention techniques that staff may use to control residents whose behaviors pose a risk;  2. The staff position who will write the report and time frame;  3. The staff position who will review the report for continued staff development for performance improvement and the time frame for this review;  4. Methods to be followed should physical restraint, less intrusive behavior interventions, or measures permitted by other applicable state regulations prove unsuccessful in calming and moderating the resident's behavior; and  5. Identification of control techniques that is appropriate for identified levels of risk. |  |  |  |  |  |
| **6VAC35-71-1130 (C). Physical restraint.**  C. Each application of physical restraint shall be fully documented in the resident's record including:  1. Date and time of the incident;  2. Staff involved;  3. Justification for the restraint;  4. Less restrictive behavior interventions that were unsuccessfully attempted prior to using physical restraint;  5. Duration;  6. Description of method or methods of physical restraint techniques used;  7. Signature of the person completing the report and date; and  8. Reviewer's signature and date. |  |  |  |  |  |
| **Room confinement.** | | | | | |
| **6VAC35-71-1140 (A). Room confinement.**  A. Written procedures shall govern how and when residents may be confined to a locked room. |  |  |  |  |  |
| **6VAC35-71-1140 (B). Room confinement.**  B. Whenever a resident is confined to a locked room, including but not limited to being placed in isolation, staff shall check the resident visually at least every 30 minutes and more frequently if indicated by the circumstances. |  |  |  |  |  |
| **6VAC35-71-1140 (C). Room confinement.**  C. Residents who are confined to a locked room, including but not limited to being placed in isolation, shall be afforded the opportunity for at least one hour of physical exercise, outside of the locked room, every calendar day unless the resident's behavior or other circumstances justify an exception. The reasons for any such exception shall be approved in accordance with written procedures and documented. |  |  |  |  |  |
| **6VAC35-71-1140 (D). Room confinement.**  D. If a resident is confined to a locked room for more than 24 hours, the superintendent or designee shall be notified. |  |  |  |  |  |
| **6VAC35-71-1140 (E). Room confinement.**  E. If the confinement extends to more than 72 hours, the (i) confinement and (ii) the steps being taken or planned to resolve the situation shall be immediately reported to the department staff, in a position above the level of superintendent, as designated in written procedures. If this report is made verbally, it shall be followed immediately with a written, faxed, or secure email report in accordance with written procedures. |  |  |  |  |  |
| **6VAC35-71-1140 (F). Room confinement.**  F. The superintendent or designee shall make personal contact with each resident who is confined to a locked room each day of confinement. |  |  |  |  |  |
| **6VAC35-71-1140 (G). Room confinement.**  G. When confined to a room, the resident shall have a means of communication with staff, either verbally or electronically. |  |  |  |  |  |
| **6VAC35-71-1140 (H). Room confinement.**  H. If the resident, after being confined to a locked room, exhibits self-injurious behavior (i) staff shall immediately consult with, and document that they have consulted with, a mental health professional; and (ii) the resident shall be monitored in accordance with established protocols, including constant supervision, if appropriate. |  |  |  |  |  |
| **Isolation.** | | | | | |
| **6VAC35-71-1150 (A). Isolation**  A. When a resident is confined to a locked room for a specified period of time as a disciplinary sanction for a rule violation (isolation), the provisions of 6VAC35-71-1140 (room confinement) apply. |  |  |  |  |  |
| **6VAC35-71-1150 (B). Isolation**  B. Room confinement during isolation shall not exceed five consecutive days. |  |  |  |  |  |
| **6VAC35-71-1150 (C). Isolation**  C. During isolation, the resident is not permitted to participate in activities with other residents and all activities are restricted, with the exception of (i) eating, (ii) sleeping, (iii) personal hygiene, (iv) reading, (v) writing, and (vi) physical exercise as provided in 6VAC35-71-1140 (room confinement). |  |  |  |  |  |
| **6VAC35-71-1150 (D). Isolation**  D. Residents who are placed in isolation shall be housed no more than one to a room. |  |  |  |  |  |
| **Administrative segregation.** | | | | | |
| **6VAC35-71-1160 (A). Administrative segregation.**  A. Residents who are placed in administrative segregation units shall be housed no more than two to a room. Single occupancy rooms shall be available when indicated for residents with severe medical disabilities, residents suffering from serious mental illness, sexual predators, residents who are likely to be exploited or victimized by others, and residents who have other special needs for single housing. |  |  |  |  |  |
| **6VAC35-71-1160 (B). Administrative segregation.**  B. Residents who are placed in administrative segregation units shall be afforded basic living conditions approximating those available to the facility's general population and as provided for in written procedures. Exceptions may be made in accordance with written procedures when justified by clear and substantiated evidence. If residents who are placed in administrative segregation are confined to a room or placed in isolation, the provisions of 6VAC35-71-1140 (room confinement) and 6VAC35-71-1150 (isolation) apply, as applicable. |  |  |  |  |  |
| **6VAC35-71-1160 (C). Administrative segregation.**  C. For the purpose of this section, administrative segregation means the placement of a resident, after due process, in a special housing unit or designated individual cell that is reserved for special management of residents for purposes of protective custody or the special management of residents whose behavior presents a serious threat to the safety and security of the facility, staff, general population, or themselves. For the purpose of this section, protective custody shall mean the separation of a resident from the general population for protection from or of other residents for reasons of health or safety. |  |  |  |  |  |
| **Chemical agents.** | | | | | |
| **6VAC35-71-1170. Chemical agents. CRITICAL**  Chemical agents, such as pepper spray, shall not be used by staff for behavior management or facility security purposes. |  |  |  |  |  |
| **Mechanical restraints.** | | | | | |
| **6VAC35-71-1180 (A). Mechanical restraints.**  A. Written procedure shall govern the use of mechanical restraints and shall specify:  1. The conditions under which handcuffs, waist chains, leg irons, disposable plastic cuffs, leather restraints, and mobile restraint chair may be used;  2. That the superintendent or designee shall be notified immediately upon using restraints in an emergency situation;  3. That restraints shall never be applied as punishment;  4. That residents shall not be restrained to a fixed object or restrained in an unnatural position;  5. That each use of mechanical restraints, except when used to transport a resident, shall be recorded in the resident's case file or in a central log book; and  6. That the facility maintains a written record of routine and emergency distribution of restraint equipment. |  |  |  |  |  |
| **6VAC35-71-1180 (B). Mechanical restraints.**  B. If a JCC uses mechanical restraints, written procedure shall provide that (i) all staff who are authorized to use restraints shall receive department-approved training in their use, including procedures for checking the resident's circulation and checking for injuries; and (ii) only properly trained staff shall use restraints. |  |  |  |  |  |
| **6VAC35-71-1180 (C). Mechanical restraints.**  C. For the purpose of this section, mechanical restraint shall mean the use of an approved mechanical device that involuntarily restricts the freedom of movement or voluntary functioning of a limb or portion of an individual's body as a means to control his physical activities when the individual being restricted does not have the ability to remove the device. |  |  |  |  |  |
| **Monitoring residents placed in mechanical restraints.** | | | | | |
| **6VAC35-71-1190 (A). Monitoring residents placed in mechanical restraints.**  A. Written procedure shall provide that when a resident is placed in mechanical restraints staff shall:  1. Provide for the resident's reasonable comfort and ensure the resident's access to water, meals, and toilet; and  2. Make a direct personal check on the resident at least every 15 minutes and more often if the resident's behavior warrants. |  |  |  |  |  |
| **6VAC35-71-1190 (B). Monitoring residents placed in mechanical restraints.**  B. When a resident is placed in mechanical restraints for more than two hours cumulatively in a 24-hour period, with the exception of use in routine transportation of residents, staff shall immediately consult with a mental health professional. This consultation shall be documented. |  |  |  |  |  |
| **6VAC35-71-1190 (C). Monitoring residents placed in mechanical restraints.**  C. If the resident, after being placed in mechanical restraints, exhibits self-injurious behavior, (i) staff shall immediately consult with, and document that they have consulted with, a mental health professional and (ii) the resident shall be monitored in accordance with established protocols, including constant supervision, if appropriate. Any such protocols shall be in compliance with the procedures required by 6VAC35-71-1200 (restraints for medical and mental health purposes). |  |  |  |  |  |
| **Restraints for medical and mental health purposes.** | | | | | |
| **6VAC35-71-1200. Restraints for medical and mental health purposes. CRITICAL**  Written procedure shall govern the use of restraints for medical and mental health purposes. Written procedure should identify the authorization needed; when, where, and how restraints may be used; for how long; and what type of restraint may be used. |  |  |  |  |  |
| **Part IX Private JCCs** | | | | | |
| **Private contracts for JCCs.** | | | | | |
| **6VAC35-71-1210 (A). Private contracts for JCCs.**  A. Each privately operated JCC shall abide by the requirement of (i) the Juvenile Corrections Private Management Act (§ 66-25.3 et seq. of the Code of Virginia), (ii) its governing contract, (iii) this chapter, and (iv) applicable department procedures, including but not limited to procedures relating to case management, the use of physical restraint and mechanical restraints, confidentiality, visitation, community relationships, and media access. |  |  |  |  |  |
| **6VAC35-71-1210 (B). Private contracts for JCCs.**  B. Each privately operated JCC shall develop procedures, approved by the department, to facilitate the transfer of the operations of the facility to the department in the event of the termination of the contract. |  |  |  |  |  |
| **6VAC35-71-1220. Privately operated JCCs.** | | | | | |
| **6VAC35-71-1220. Privately operated JCCs.**  In addition to the other requirements of this chapter, privately operated JCCs shall house only residents who have been committed to the department and who have been properly transferred to the facility by the department, unless otherwise specified by contract with the department. |  |  |  |  |  |
| **Part X Boot Camps** | | | | | |
| **Definition of boot camp.** | | | | | |
| **6VAC35-71-1230. Definition of boot camp.**  For the purpose of this chapter, a boot camp shall mean a short-term secure or nonsecure juvenile residential program that includes aspects of basic military training, such as drill and ceremony. Such programs utilize a form of military-style discipline whereby employees are authorized to respond to minor institutional offenses, at the moment they notice the institutional offenses being committed, by imposing immediate sanctions that may require the performance of some physical activity, such as pushups or some other sanction, as provided for in the program's written procedures. |  |  |  |  |  |
| **Staff physical and psychological qualifications.** | | | | | |
| **6VAC35-71-1240. Staff physical and psychological qualifications.**  The boot camp shall include in the qualifications for staff positions a statement of:  1. The physical fitness level requirements for each staff position; and  2. Any psychological assessment or evaluation required prior to employment. |  |  |  |  |  |
| **Residents' physical qualifications.** | | | | | |
| **6VAC35-71-1250. Residents' physical qualifications.**  The boot camp shall have written procedures that govern:  1. Admission, including a required written statement from a physician that the resident meets the American Pediatric Society's guidelines to participate in contact sports and from a licensed mental health professional that the resident is an appropriate candidate for a boot camp program; and  2. Discharge should a resident be physically unable to keep up with the program. |  |  |  |  |  |
| **Residents' nonparticipation.** | | | | | |
| **6VAC35-71-1260. Residents' nonparticipation.**  The boot camp shall have written procedures approved by the department for dealing with residents who are not complying with boot camp program requirements. |  |  |  |  |  |
| **Program description.** | | | | | |
| **6VAC35-71-1270. Program description.**  The boot camp shall have a written program description that states:  1. How residents' physical training, work assignment, education and vocational training, and treatment program participation will be interrelated;  2. The length of the boot camp program and the kind and duration of treatment and supervision that will be provided upon the resident's release from the residential program;  3. Whether residents will be cycled through the program individually or in platoons; and  4. The program's incentives and sanctions, including whether military or correctional discipline will be used. If military style discipline is used, written procedures shall specify what summary punishments are permitted. |  |  |  |  |  |

**SELF-AUDIT COMPLIANCE DOCUMENT**

**6VAC35-71 JUVENILE CORRECTIONAL CENTER REGULATIONS**

**SELF-AUDIT DATE(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FACILITY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADMINISTRATOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**SELF-AUDIT TEAM LEADER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SELF-AUDIT TEAM MEMBERS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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