

GENERAL DISTRIBUTION

**WEST VIRGINIA
DIVISION OF CORRECTIONS
& REHABILITATION**

NUMBER: 401.13

EFFECTIVE DATE: 29 August 2022

**SUBJECT: SPECIAL ATTENTION &
SPECIAL NEEDS ALERTS**

POLICY DIRECTIVE

PURPOSE:

To ensure appropriate guidelines in the identification and documentation of special attention and special needs inmates and residents.

REFERENCE:

Prison Rape and Elimination Act (PREA) §§115.41; 115.42; 115.341; and 115.342.

RESPONSIBILITY:

No additional written instructions on this subject are required.

CANCELLATION:

Any previous written instruction on the subject including DOC Policy Directive 401.13, dated 01 October 2013; and DOC Policy Directive 401.17, dated 01 June 2006.

APPLICABILITY:

All facilities within the Division of Corrections and Rehabilitation (DCR). This Policy is available for general distribution.

DEFINITIONS:

Case Supervisor: The DCR staff member assigned by the Superintendent or Unit Manager to manage the caseload of a particular inmate/resident or group of inmates/residents (e.g., Corrections Case Manager, Reentry Coordinator, Corrections Program Specialist, or Correctional Counselor).

POLICY:

- I. There are occasions within the correctional setting where it becomes necessary to identify a special attention or special needs inmate or resident so that his/her situation may be addressed and/or the inmate/resident may be monitored in order to provide appropriate placement and/or housing. Within the Division of Corrections and Rehabilitation (DCR), this is addressed by placing an “alert” on the inmate’s/resident’s record in the Offender Information System (OIS).
 - A. In jail facilities where identifying a special attention or special needs inmate needs to be timely, such as during the booking/intake process, staff may add an alert to an inmate’s record in OIS when an inmate meets one (1) or more of the criteria listed in this Policy. The specific criteria justifying the alert will be listed in the “comments.”
 1. To ensure accuracy, the Unit Manager at least once per week will review all alerts placed on inmates’ records within the previous week.
 2. For those special needs categories that require approval from the medical or mental health provider, the Unit Manager will contact the appropriate staff for approval.
 3. The Unit Manager may add “comments” regarding the applicable criteria should more details be needed to justify the alert; or remove the alert if the criteria are not met.
 - B. In all facilities, Case Supervisors upon reviewing an inmate’s/resident’s criminal/institutional history, shall determine whether an inmate/resident meets one (1) or more of the special attention or special needs criteria as listed below. If such a determination is made, the Case Supervisor will submit a recommendation (**Attachment #1**) to the facility Director of Classification for approval or denial. A Unit Manager shall have this responsibility in facilities without a Director of Classification.
 1. If approved, the Director of Classification (or Unit Manager where appropriate) shall ensure the appropriate alert is placed on the inmate’s/resident’s record in OIS along with specific criteria justifying the alert in the “comments.”
 2. For those special needs categories that require approval from the medical or mental health provider, the Director of Classification (or Unit Manager where appropriate) will contact the appropriate staff for approval.
 3. Completed forms whether approved or denied will be uploaded to OIS and the requesting Case Supervisor will receive a copy.
- II. The following list of **Special Attention** categories includes a brief summary of criteria for the alert:

- A. Assaultive: Inmates/residents with a pattern of predatory assaults on other inmates/residents or staff, or where the assault resulted in serious physical injury to the victim.
- B. Contact Restrictions: Court-ordered limitations on contact with certain specified person(s).
- C. Court Ordered Sexual Predator: Inmate whom a court of competent jurisdiction has determined is a sexually violent predator and entered an order stipulating such.
- D. Escape History: Attempted escape or escape from a correctional facility or the **physical** control of lawful authority within the last fifteen (15) years.
- E. Former Correctional Employee: This may also include former contractual employees.
- F. Former Law Enforcement: Any former police officer, probation officer, home confinement officer, etc.
- G. Former Public Official: Any former elected or appointed official to a governmental agency.
- H. High Profile: Inmate/resident who is newsworthy, a member/leader of a security threat group or organized crime that may aid in an escape attempt, an escape artist, violent mental health inmate/resident, or whose history shows him/her to be extremely dangerous.
- I. Human Gift Registry: Inmate who has completed all criteria in DCR Policy Directive 456.03 to donate his/her human remains to the health sciences upon death.
- J. Potential Sexual Predator: As determined per PREA Assessment.
- K. Potential Victim: As determined per PREA Assessment.
- L. Registrant: Inmate convicted of offense or attempted offense requiring registration as a sex offender or offense requiring child abuse or neglect registration in accordance with DCR Policy Directive 457.04.
- M. Separation Issues: Staff verified that the inmate/resident in question cannot be housed either within the same housing unit/area/pod or the facility with another identified inmate/resident. This may be due to one inmate/resident testifying against another, inmate/resident was assaulted by another inmate/resident, etc.
- N. Serious Threat to Facility Security: Inmate/resident has participated in a situation in which inmates/residents are acting in concert to disrupt facility operations. This may include failure to comply with lock down orders, have taken hostages, or appear to be prepared for physical conflict. Hostile intent is apparent, and threats are present.

Extraordinary measures are required to regain control of the facility (sending in a significant number of staff or the tactical response team, firing of shots, use of gas, etc.).

- O. Sexual Predator: As determined per PREA Assessment and confirmation of a prior PREA.
- P. Specialized Military Training and/or Martial Arts: Inmate received training in a specialized branch of military such as Army Rangers, Special Forces, Navy Seals, etc., or inmate/resident has received training in Karate, Judo, Aikido, Tae Kwon Do, Jujitsu, etc.
- Q. Validated Security Threat Group: Inmate/resident validated as a member of a Security Threat Group (STG) in accordance with DCR Deputy Commissioner Protocol 102.
- R. Victim: As determined per PREA Assessment and confirmation of a prior PREA.

III. The following list of **Special Needs** categories includes a brief summary of criteria for the alert:

- A. Allergy: Has a known allergy that may cause severe reaction known as anaphylaxis. Allergen(s) to be listed in “comments.” The medical provider will notify if this is appropriate.
- B. Behavior Disorder: Inmate/resident may exhibit disruptive behavior and frequent disciplinary action. The mental health provider will notify if this is appropriate.
- C. Deaf and/or Mute: The medical provider will make this determination.
- D. Diabetic: Type 1 and Type 2 diabetics or individuals who experience hyperglycemia (high blood sugar) or hypoglycemia (low blood sugar). The medical provider will notify if this is appropriate.
- E. Handicapped: Handicap cell or bed required; this includes inmates/residents assigned a wheelchair. This must be assigned by the medical provider.
- F. Legally Blind: The medical provider will determine if this is appropriate.
- G. Limited English Proficiency: Unable to speak or understand English, or very limited English vocabulary.
- H. Limited Mobility: Requires assistance for walking, such as cane, walker, or prosthetic limb. However, this is not appropriate for an inmate/resident assigned a wheelchair.

- I. Suicidal: This is only valid within two (2) years of a suicide attempt. The mental health provider will notify if this is an appropriate category.

- IV. Special Attention and Special Needs Alerts will be reviewed and updated during classification reviews or at least annually. Alerts that are no longer appropriate will be removed.

ATTACHMENT(S):

#1 Special Attention/Special Needs Recommendation

APPROVED SIGNATURE:  8/16/22
Brad Douglas, Acting Commissioner Date

Special Attention / Special Needs Recommendation

To: Director of Classification (or Unit Manager where appropriate)

From:

Date:

Re: Inmate's/Resident's Name _____ OID# _____

The above listed inmate/resident appears to meet the criteria for Special Attention or Special Needs alert as designated below:

- | | |
|--|--|
| <input type="checkbox"/> Assaultive | <input type="checkbox"/> Sexual Predator |
| <input type="checkbox"/> Contact Restrictions | <input type="checkbox"/> Spec. Military Training and/or Martial Arts |
| <input type="checkbox"/> Court Ordered Sexual Predator | <input type="checkbox"/> Validated Security Threat Group |
| <input type="checkbox"/> Escape History | <input type="checkbox"/> Victim |
| <input type="checkbox"/> Former Correctional Employee | <input type="checkbox"/> Allergy* |
| <input type="checkbox"/> Former Law Enforcement | <input type="checkbox"/> Behavior Disorder* |
| <input type="checkbox"/> Former Public Official | <input type="checkbox"/> Deaf and/or Mute* |
| <input type="checkbox"/> High Profile | <input type="checkbox"/> Diabetic* |
| <input type="checkbox"/> Human Gift Registry | <input type="checkbox"/> Handicapped* |
| <input type="checkbox"/> Potential Sexual Predator | <input type="checkbox"/> Legally Blind* |
| <input type="checkbox"/> Potential Victim | <input type="checkbox"/> Limited English Proficiency |
| <input type="checkbox"/> Registrant | <input type="checkbox"/> Limited Mobility |
| <input type="checkbox"/> Separation Issues | <input type="checkbox"/> Suicidal* |
| <input type="checkbox"/> Serious Threat to Facility Security | |

Specific Criteria Supporting Alert: _____

Approved Denied

Director of Classification (or Unit Manager) Signature & Date

*For alerts requiring medical or mental health approval also, the Director of Classification (or Unit Manager) has conferred with the provider prior to issuing decision.