



GENERAL ORDER

Loudoun County Sheriff's Office

Chapter: Correctional Services

Section: 507.2

Subject: Support Services

Topic: Medical Services

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I. PURPOSE

The purpose of this General Order is to provide directives for quality, cost-effective, routine and emergency medical care for all inmates incarcerated at the Loudoun County Adult Detention Center and Work Release Facility. Each inmate is to be provided with appropriate medical treatment and education to promote wellness. This General Order will also establish rules that require co-payments from inmates for non-emergency medical care. Guidance will be provided herein for employees who may be exposed to airborne/bloodborne pathogens while in the performance of their duties. Management and accountability for all pharmaceuticals stored and dispensed within the Loudoun County Adult Detention Center will be outlined.

II. POLICY

It shall be the policy of the Corrections Division to provide twenty-four (24) hours/seven (7) day a week on site medical services and mental health care to inmates by health care personnel that meet appropriate and current licensing, certification, or qualifications as required. A contracted provider shall facilitate routine medical services to the inmates confined to the care and custody of the Sheriff of Loudoun County. Emergency and in-patient care is accomplished, in part, through communication with Loudoun Hospital Center, Lansdowne Campus, or Cornwall Campus.

A licensed physician, regulated by the Virginia Department of Health Professionals, shall supervise the facility's healthcare services. Neither the Sheriff nor any of his employees shall impose any restriction on any physician with respect to the practice of medicine. There shall be space for the private examination and treatment of inmates when in-house healthcare services are provided. Healthcare shall be provided with consideration for the inmate's dignity and privacy, without compromising the safety and security of the facility.

Any medical care provided by personnel other than a physician shall be pursuant to a written order or protocol. A licensed physician must approve all written orders and protocols prior to their implementation. The facility shall always have, at a minimum, one (1) Automated External Defibrillator (AED) available to staff.

In the event an inmate shows obvious signs of illness, but refuses medical attention, security staff members are required to notify a supervisor and medical staff for further instruction. This activity should be noted in the duty post log. An in-house incident report shall be written.

A nominal fee shall be collected from inmates that receive non-emergency medical care or medications to help defray the costs to the citizens of Loudoun County. No inmate shall be

denied any medically necessary services, regardless of ability to pay the co-pay. All inmates shall be provided written notification of proposed fee changes. Inmates shall be advised of medical service fees at the time of their classification interview.

The recognition of dangers posed by airborne/bloodborne pathogens requires employees to take all necessary precautions to prevent the spread of communicable diseases. Employees shall be trained to protect themselves against contracting these diseases. All employees with a potential for exposure to Hepatitis B shall be provided vaccination shots as described herein. Any employee performing a task in which there is a likelihood of exposure to airborne/bloodborne pathogens shall be provided with preventive equipment. In the event of an exposure, every possible measure shall be taken to afford the employee prompt medical evaluation and treatment. All employees at risk for occupational exposure are responsible for being familiar with universal precautions.

Licensed healthcare staff shall be responsible for maintaining proper management of all pharmaceuticals, including receipt, storage, dispensing, distribution, and destruction of any medications within the secured confines of the Adult Detention Center. Such procedures will be reviewed every twelve (12) months by a medical authority. Such reviews will be documented and kept on file with the Assistant Division Commander of Administration. The facility's physician shall approve the management of pharmaceuticals. All medications are to be stored under proper conditions of sanitation, temperature, moisture, segregation, and security. Antiseptics, disinfectants, or other drugs for external use are stored separately from medications taken orally. Drugs requiring special storage for stability are to be so stored. No inmates shall self-administer any prescription medications, except for topical medications approved by the medical staff and over-the-counter medication purchased through the canteen.

III. PROCEDURE

A. Inmate Medical Care:

1. The Loudoun County Sheriff's Office will maintain a contract with an approved medical provider through the County's Purchasing Division. The contracted provider will:
 - a. Inform the inmates of the proper procedure for gaining access to medical services.
 - b. Provide comprehensive medical care to all inmates under the care and custody of the Loudoun County Sheriff.
 - c. Provide medical education to the inmates to promote wellness.
 - d. Provide twenty-four (24) hour nursing staff.
 - e. Conduct all initial intake medical screenings pursuant to Department of Corrections standards, including the following which must be noted on the intake screening form:

- i. Specific screening for current illness, health problems and conditions, as well as history of communicable diseases.
 - ii. Specific screening for current symptoms regarding dental problems, allergies, present medications, special dietary requirements, and symptoms of venereal disease.
 - iii.
 - iv. Inquiry into past and present drug and alcohol abuse, mental health status, depression, suicidal tendencies, and skin conditions.
 - v.
 - vi. Inquire regarding possible pregnancy or gynecological problems for female inmates.
- f. Maintain inmate medical files pursuant to Department of Corrections standards, including the following:
 - i. The completed screening form, as well as all findings, diagnoses, treatments, dispositions, prescriptions, and administration of medications.
 - ii. Every effort will be made to establish uniform health care records. All clinical findings will be recorded, legible and have a date and signature. Confidentiality of medical records must be maintained in accordance with all applicable federal, state, and local laws.
 - iii. A standard form will be used for recording all offsite community health visits. All diagnoses, treatment and follow up care will be documented, and the form will be returned to the Adult Detention Center; it will be reviewed by the physician and placed in the inmate's medical file.
- g. Conduct assessments and issue medications pursuant to the standards established by the Department of Corrections.
- h. Hold and maintain current licensure. All qualified health care personnel who provide services to inmates must meet state licensing requirements as established by the Department of Health Professions. A copy of the health care provider's current license will be kept with the Healthcare Administrator and the Assistant Division Commander of Administration.
- i. Work with deputies to meet basic personal security requirements and adhere to the Adult Detention Center's security standards.
- j. Conduct CPR, AED, and First Aid Certification training and re-certification, by a certifying agency, for deputies pursuant to Department of Corrections standards and provide documentation for such training.

- k. Perform laboratory or forensic testing pursuant to Court Orders.
 - l. Verify that a licensed physician approves all medical protocols prior to their implementation.
2. Medical requests will be handled as follows:
- a. Inmates may submit a Medical Request Form directly to a nurse during medication rounds.
 - b. In the event of an emergency request, the Medical Request Form can be given directly to the post deputy. The post deputy will contact the Medical Unit and advise them of the request.
 - c. Medical staff will notify a squad supervisor of all inmates needing medical attention or treatment through either a written or verbal request.
 - d. The medical staff will triage the medical requests once received and notify the post deputy of those who need to be seen in the medical suite.
 - e. At no time shall medical staff escort inmates, go to inmate housing locations, invite, or allow any Inmate Worker to enter and be treated in the Medical Unit without the direct supervision of a deputy.
 - f. Deputies will be responsible for the security of the inmate throughout the assessment process and will never leave an inmate alone with medical staff. At their discretion, medical staff may request that the inmate be relocated for medical reasons.
 - g. Inmates housed within the Medical Unit will be on administrative segregation. They will be given personal property and canteen food items at the direction of the medical staff.
3. Medical records for inmates slated for transfer or release will be prepared as follows:
- a. The Records Section is responsible for immediately notifying medical staff of the date and time an inmate requires transportation or transport from the facility.
 - b. Medical staff will be responsible for preparing medication (if applicable) and standardized medical record summaries shall be transferred to the same facility to which the inmate is being transferred. Required information shall include vital signs, current medications, current medical/dental problems, mental health screening, mental health issues, TB skin test date and results, special inmate needs/accommodations, pending medical appointments, medical dispositions,

overall comments, health care provider/personnel signature and date, and any additional pertinent medical information such as lab work, x-rays, etc.

- c. Medical staff will keep completed form(s) and medication in a sealed envelope in the Medical Unit, to be picked up and signed for by the transportation deputies.
- d. The transporting deputies will be responsible for securing this documentation prior to departing.
- e. It will be the sole duty and responsibility of medical staff to make all notifications and cancellations of any locally scheduled medical, dental, or mental health appointments for the departing inmate. If an inmate is released to the community, the medical staff will notify the inmate of the scheduled appointment; the provider will also be notified that the inmate is no longer in custody.

4. Emergency medical situations will be handled using the following guidelines:

- a. Any employee who receives a complaint or has direct knowledge of any emergency medical issue will take appropriate and immediate steps to assist.
- b. Central Control will be notified immediately of any medical issue and will notify the appropriate personnel to respond to the scene.
- c. Deputies must secure the scene prior to treatment being rendered in the area where the medical emergency is occurring.
- d. Deputies faced with an emergency will follow their First Aid and CPR training to begin assessment and emergency treatment.
- e. Once medical staff have arrived, deputies will assist and support medical staff within their scope of training.
- f. Deputies will oversee and control all security-related issues.
- g. Deputies must conduct a search of the area to collect any equipment that may have been left behind prior to resuming normal operations.
- h. Following any emergency medical situation, the respective post deputy will complete all necessary reports. These will be forwarded to a squad supervisor for approval.
- i. In the event an inmate must be transported to a local hospital for further evaluation or treatment, a supervisor will notify Central Control. If emergency medical services are needed, Central Control will initiate a 911 call. Once emergency rescue personnel arrive at the scene, they will assume medical responsibility for the inmate.

5. Testing on Inmates

- a. There will never be any medical or pharmaceutical testing performed upon any inmate in the custody of the Loudoun County Sheriff for experimental or research purposes.
- b. Experimental medications recommended by the physician for the well-being of the inmate and consistent with sound medical practices, and certain types of research approved in accordance with sub-section 53.1-5.1 Code of Virginia, are excluded.

6. Inmates will be tested for communicable diseases as follows:

- a. Routine testing for tuberculosis will be initiated within seventy-two (72) hours of intake for all committals regardless of past incarcerations unless they are transferred into the ADC from another facility or have tested positive to the TB skin test at any time in the past. In such cases, the facility's physician shall determine what actions, if any, are necessary to safeguard against the spread of disease.
- b. Further communicable disease testing will be done when the inmate presents a high-risk history or recent exposure incidents.
- c. Potential Inmate Workers will be medically screened prior to approval. This screening will include a medical history review as well as a physical assessment. The assessment will include an exam for any open sores and signs and symptoms of any contagious diseases.
- d. Inmate Workers, who handle food will be screened daily by food service staff to determine any changes in health status. Any changes must be noted and reported to a squad supervisor and medical staff immediately. Medical staff will assess the inmate to determine if he/she is eligible to remain on Inmate Worker status.

7. Management of Sharps and Medical Instruments

- a. To prevent sharps from being used as weapons or in drug-abuse activities, they will be strictly controlled so they are not accessible to inmates.
- b. Medical and dental instruments will be kept in a secure location within the Medical Unit under close staff supervision.
- c. A log will be maintained in the Medical Unit to control inventory. Any time a discrepancy is noticed, it will be brought to the immediate attention of a squad supervisor and the Healthcare Administrator.

- d. If there is a discrepancy, the squad supervisor will place the facility into a maximum-security condition and notify the Duty Officer. The squad supervisor will conduct a brief investigation, including an interview with medical staff, to determine how best to locate the missing item. If all common areas are searched and it is not found, the squad supervisor will determine what level of search will then be conducted. The supervisor may determine that a search of the facility is necessary. All searches can include, but are not limited to, inmates, on-duty staff, and interior and exterior areas of the facility. If necessary, off-duty staff members will be contacted to locate the lost sharp or instrument.
- e. Before the end of the shift, all findings must be relayed verbally to the Duty Officer and documented in an offense report. The Duty Officer will make the appropriate notifications through the chain-of-command. The report will include, but not be limited to, the following:
 - i. Date and time the loss was discovered.
 - ii. Circumstances surrounding the loss.
 - iii. Specific identification of the sharp or instrument.
 - iv. Steps taken to retrieve the sharp or instrument.
 - v. Conclusion.

B. Medical Co-Payment:

- 1. The following health services will be provided without requiring co-payment:
 - a. Initial medical, dental, communicable disease and TB screening.
 - b. Physical assessments at intake and on an annual basis.
 - c. Mental health services.
 - d. Emergency medical treatment for Inmate Workers injured in the performance of their duties.
 - e. Emergency medical treatment for inmates who are victims of inmate-on-inmate assault.
 - f. Communicable diseases and infestations, including lice and scabies.
 - g. Over-the-counter medications.
 - h. Prenatal care and treatment.

2. Inmates will incur charges for the services listed below. The specific amounts will be made available to the inmates through the inmate tablet system and attached as an addendum to this General Order. If there is a change in the amount of the fee, inmates will receive written notification.
 - a. Nurse's Visit, Radiology and Imaging, and Lab Work
 - b. Physician's Visit
 - c. Dentist Office Visit or Optometry Service
 - i. Inmates will be referred to the dentist or optometrist if they meet the criteria set forth by medical staff.
 - ii. All other non-emergency services will be billed at 100% of the cost of service or, if the inmate has health insurance, the insurance company will be billed.
 - iii. The amount required to satisfy these non-emergency costs must be in the inmate's account before services are rendered.
 - d. Prescription Handling Charge
 - e. Medical Transportation to the inmate's own physician
3. Inmates will be required to pay 100% of the costs of the following:
 - a. Replacement cost of lost, stolen, or broken dentures.
 - b. Replacement cost of lost, stolen, or broken eyeglasses.
 - c. Replacement cost of lost, stolen, or broken prosthetic devices.
 - d. Medical appointments with the inmate's personal physician.
 - e. Medical treatment of a physical injury that an inmate intentionally inflicts on him/herself. Self-inflicted injuries include, but are not limited to, those resulting from suicide attempts, fighting with other inmates, individual violent outbursts, and those that require a hospital visit due to a hunger strike. This is in accordance with [Virginia Code Section §53.1-133.01:1](#).
 - f. Medical treatment of a physical injury that one inmate inflicts on another inmate. The inmate will be afforded due process through a grievance procedure. However, if the conclusion of the investigation is that the inmate is responsible for another

inmate's injuries, they will be responsible for all medical costs relating to the incident. This is in accordance with [Virginia Code Section §53.1-133.01:1](#).

- g. Medical costs for chronic care and pre-existing medical conditions that require ongoing treatment once incarcerated. This is in accordance with [Virginia Code Section §53.1-126](#).

4. Co-Pay Process

- a. During the initial classification interview, the Classification deputy will have each new inmate sign the Notice of Health Care Services Co-Payment Form.
- b. Each time an inmate requests health care that requires a co-payment, he or she will be asked to sign a co-payment form acknowledging the fees to be collected upon completion of the service. Only after services are rendered will medical staff sign the form and submit it for collection. Prescription handling co-payments will be completed at the beginning of each month or upon initiation of a new prescription. Medication co-payment forms will be forwarded to the inmate for review and signature. If an inmate refuses to sign the co-payment form and receives medical care or is taking prescription medication, the acknowledgement is to be signed by a witness and noted "Refused to Sign."
- c. The Inmate Account Clerk will deduct the specified amount from the inmate's account, document the final balance on the Co-Payment Form, and return a copy of the form to the inmate. Outstanding debts will be recorded and satisfied if the inmate receives funds.
- d. The Inmate Account Clerk will keep a separate account ledger that tracks all co-payment receipts and disbursements.
- e. Once a month, the Inmate Account Clerk will make a disbursement of all accrued inmate medical co-payment funds to the Accounts Assistant, who will credit the payment to the Loudoun County General Fund.

C. Exposure Control Plan/Universal Precautions:

1. Exposure Determination

- a. The following job classes have occupational exposure to airborne/bloodborne pathogens:
 - i. All sworn personnel.
 - ii. All medical staff.
 - iii. All Inmate Workers.

- b. Certain tasks or procedures may result in actual contact between an employee and another person's blood or other potentially infectious material. The following tasks and procedures are those in which occupational exposure is likely to occur:
 - i. Presence in inmate housing and search areas.
 - ii. Drawing blood.
 - iii. Use of force.
 - iv. Administration of first aid.
 - v. Handling contaminated laundry or waste.
 - vi. Cleaning contaminated cells or holding areas.
 - vii. Escorting infectious inmates.

2. Methods of Control

- a. Universal precautions will be employed in all instances in which occupational exposure is a possibility.
- b. Employees must wash their hands and exposed areas or flush their eyes immediately after contact with another person's blood or bodily fluids. When gloves or other protective equipment have been used, employees will still wash their hands after removing the protective equipment. When hand-washing facilities are not immediately available, antiseptic hand cleaner will be used until such time as hand washing can be completed.
- c. Food and drink will not be kept in refrigerators, freezers, shelves, or cabinets where blood or other potentially infectious material may be present.
- d. Clothing that becomes contaminated with blood or other potentially infectious material will be removed as soon as possible and placed in a red plastic biohazard bag and taken for disposal.
- e. Any surface soiled by blood or other potentially infectious material must be cleaned and decontaminated as soon as possible with a 1 to 10 solution of bleach in water.
- f. All trash cans which are intended for re-use will be cleaned with a 1 to 10 solution of bleach in water as soon as possible after contamination by blood or other potentially infectious material.

D. Hepatitis B**1. Hepatitis B Vaccine**

- a. All Loudoun County employees will be given the opportunity to receive the Hepatitis B vaccine.
- b. The vaccine will be administered free of charge through the contracted Occupational Health system.

2. Early Identification

- a. The early identification of suspect cases is the key to reducing risk to others. Once an individual is determined to be a suspect case, additional medical testing may be performed to confirm or deny the active disease. While awaiting test results, the inmate will be housed in Medical Isolation.
- b. Intake deputies will document any information received by the inmate while booking him/her into the facility and will forward this information to medical staff.
- c. Any inmate identified as a suspect case will be housed in a (negative airflow) isolation room and a comprehensive, in-depth evaluation will be initiated.

3. Conditions of Isolation

- a. When using a negative air-flow isolation room for airborne pathogen isolation, the doors will remain secure to isolate the cell area from the rest of the facility. Only one of the doors leading to a negative air-flow isolation room may be opened at any time.
- b. A routine surgical type or HEPA filter mask will always be worn by the inmate when in contact with other people both inside and outside the cell.
- c. When staff members enter the cell area, they must wear a HEPA filter mask of the type currently provided and approved by the Corrections Administration and competent medical staff.
- d. Staff must wash their hands when entering and leaving the negative air-flow isolation rooms.
- e. Gloves must be worn when handling any type of body fluids or secretions.
- f. All trash from the negative air-flow isolation rooms will be collected in red biohazard plastic bags and removed at the end of each shift. Such trash will be taken outside the facility and stored in the contaminated shed location for pick-up by an approved contractor.

- g. Any inmate who is classified as a suspect case will remain in isolation until medically cleared by the contractual medical authority.
- h. In cases where the inmate is medically determined to be a diseased individual, medical staff will be responsible for working with the Classification Section to locate appropriate offsite or Adult Detention Center housing for the inmate.
- i. Housing or transfer considerations must remain within accepted Department of Corrections guidelines and must provide for the secure detention of an incarcerated individual, as well as provide appropriate medical treatment.

4. Training

- a. All staff will be trained, competent, and knowledgeable in the use of universal precautions.
- b. All related training will be documented and filed with the In-Service Training Lieutenant in the Administrative and Technical Division.

5. For Post Exposure Procedures and Medical Record Keeping, refer to Loudoun County Sheriff's Office [General Order 310.8 Communicable Diseases](#).

E. Management of Pharmaceuticals and Medication Pass:

1. Management of Pharmaceuticals

- a. All pharmaceuticals stored within the Adult Detention Center will be stored in the secured pharmacy which allows no inmate access. Medical staff will maintain all receipts for medications. When the on-duty nurse receives medication, the affidavit enclosed with the medication will be logged and maintained on file.
- b. Access to the pharmacy will be strictly controlled and monitored. Only authorized personnel will have access to the pharmacy.
- c. All medications will be logged for management purposes on the appropriate inmate's Medication Administration Record. This is to be completed by medical staff only. All expired or discontinued medications will be logged and returned to the supplier from where they were received.
- d. In most circumstances, acceptance of medications from a family member or others will be avoided. When an inmate requires a medication that is not on the formulary, the Adult Detention Center medical doctor will prescribe a comparable substitute. Any specialized medications will be reviewed on a case-by-case basis. If family members or friends need to bring prescription medications for an inmate's use,

they must have prior approval from medical staff. The medications will be received in the following manner:

- i. It will be the sole responsibility of medical staff to confirm, observe and make every professional effort to verify that medications accepted from family or others are truly prescribed for the inmate.
 - ii. Must be delivered in a current prescription bottle.
- 2. Medication passes will be conducted periodically throughout the day. The guidelines for conducting a medication pass are as follows:
 - a. Medical staff will inform Central Control that medication pass is necessary. An available deputy will escort medical staff during the medication pass. Medical staff will prepare a Medication Distribution List using the most current Housing Assignment Sheet.
 - b. The escorting deputy will advise Central Control when medication pass has begun. This will be noted on the duty post activity log in Central Control.
 - c. Medication Pass will only occur at the housing unit's sallyport or pass through where applicable.
 - d. At no time will medical staff enter a housing unit without a deputy present.
 - e. The post deputy will announce the names of the inmates that require medication.
 - f. The inmates are required to bring a drink with them to receive medication.
 - g. Once the inmates identify themselves, the deputy and medical staff will verify each inmate by checking his/her wristband. Once verification is made, medical staff will dispense the appropriate medications.
 - h. The escorting deputy and medical staff are responsible for verifying that the inmate has properly taken all medications and that his/her mouth, hands, and cup are free of hidden medications. If hidden medication is found, the medication becomes contraband.
 - i. Once all medication is delivered, the deputy will notify Central Control that the medication pass is complete. The time will be noted on the duty post activity log in Central Control.
 - j. If at any time during the medication pass an inmate refuses to take his/her medication, the deputy escorting the nurse and the medical staff will document

the refusal. The refusal of medications will also be passed on to the housing unit deputy.

3. Over-the-Counter Medications

- a. Acetaminophen, antacids, and dandruff shampoo will be available through the inmate canteen.
- b. Indigent inmates will have access to these items through the Medical Unit.
- c. Over the counter medications are only allowed into the Adult Detention Center through contracted services such as canteen vendor and the medical staff.

IV. DOC STANDARD #

6VAC15-40-330. Restrictions on physician.

No restrictions shall be imposed on the physician by the facility in the practice of medicine. However, administrative and security regulations applicable to facility personnel shall apply to medical personnel as well.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-340. Health care provider and licensing, certification, and qualification of health care personnel.

Each facility shall have a minimum of one licensed or qualified health care provider who is accessible to inmates a minimum of one time per week. Health care personnel shall meet appropriate and current licensing, certification, or qualification requirements.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-350. Private examination and treatment of inmates.

Where in-house medical and health care services are provided there shall be space for the private examination and treatment of inmates.

Statutory Authority

§§ 53.1-5, 53.1-68, 53.1-131 and 53.1-133.01 of the Code of Virginia.

6VAC15-40-360. Twenty-four-hour emergency medical and mental health care.

Written policy, procedure, and practice shall provide 24-hour emergency medical and mental health care availability.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-370. Receiving and medical screening of inmates.

Written policy, procedure, and practice shall provide that receiving and medical screening be performed on all inmates upon admission to the facility. The medical screening shall:

1. Specify screening for current illnesses, health problems and conditions, and past history of communicable diseases;
2. Specify screening for current symptoms regarding the inmate's mental health, dental problems, allergies, present medications, special dietary requirements, and symptoms of venereal disease;
3. Include inquiry into past and present drug and alcohol abuse, mental health status, depression, suicidal tendencies, and skin condition;
4. For female inmates, include inquiry into possible pregnancy or gynecological problems; and
5. All inmates shall receive a tuberculosis (TB) skin test within seven days of admission to the facility.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-380. Inmate access to medical services.

Written policy, procedure, and practice shall be developed whereby inmates shall be informed, at the time of admission to the facility, of the procedures for gaining access to medical services.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-390. Training and competency of staff.

All security staff shall be trained and competent in rendering basic first aid and CPR by a recognized certifying agency. All training shall be documented.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-393. Universal precautions.

All staff who have contact with inmates shall be trained, competent, and knowledgeable in the use of universal precautions. All training shall be documented and completed every 12 months.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-395. Management of sharps.

Written policy, procedure, and practice shall govern the control, storage, and use of sharps including at a minimum needles, scalpels, lancets, and dental tools.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-400. Management of pharmaceuticals.

Written procedures for the management of pharmaceuticals shall be established and approved by the medical authority or pharmacist, if applicable. Written policy, procedure, and practice shall provide for the proper management of pharmaceuticals, including receipt, storage, dispensing, and

distribution of drugs. These procedures shall be reviewed every 12 months by the medical authority or pharmacist. Such reviews shall be documented.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-405. Automated External Defibrillator (AED).

There shall be a minimum of one AED unit available in the facility. All security staff shall receive training in the operation of the unit.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-410. Inmate medical records.

The medical record for each inmate shall be kept separate from other facility records and shall include the following:

1. The completed screening form; and
2. All findings, diagnoses, treatment, dispositions, prescriptions, and administration of medication.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-420. Transfer of summaries of medical record.

Medical record summaries shall be transferred to the same facility to which the inmate is being transferred. Required information shall include vital signs, current medications, current medical/dental problems, mental health screening, mental health problems, TB skin test date and results, special inmate needs/accommodations, pending medical appointments, medical dispositions, overall comments, health care provider/personnel signature and date, and any additional pertinent medical information such as lab work, x-rays, etc.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-430. Medical or pharmaceutical testing for experimental or research purposes.

Written policy and practice shall prohibit medical or pharmaceutical testing for experimental or research purposes.

Statutory Authority

§§ 53.1-5, 53.1-68, 53.1-131 and 53.1-133.01 of the Code of Virginia.

6VAC15-40-440. Medical care provided by personnel other than physician.

Medical care provided by personnel other than a physician shall be pursuant to a written protocol or order. Protocols or orders shall be reviewed and signed by the supervising physician every 12 months.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-470. Medical copayment.

Jail medical treatment programs wherein inmates pay a portion of the costs for medical services shall be governed by written policy and procedure.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-480. Set fees required.

Inmate payment for medical services shall be up to, but shall not exceed, those fees established by the Board of Corrections in the Model Plan for Jail Prisoner Medical Treatment Programs per § 53.1-133.01 of the Code of Virginia.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-490. Policy and procedure information.

Written policy and procedure shall specify, at a minimum, the following information:

1. Medical services that are subject to fees;
2. Fee amounts;
3. Payment procedures;
4. Medical services that are provided at no cost;
5. Fee application to medical emergencies, chronic care and pre-existing conditions; and
6. Written notification to inmates of proposed fee changes.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-500. Inmates advised of procedures.

Inmates shall be advised of medical service fees and payment procedures at the time of admission/orientation.

Statutory Authority

§§ 53.1-5, 53.1-68, 53.1-131 and 53.1-133.01 of the Code of Virginia.

6VAC15-40-510. Ability to pay.

Written policy, procedure, and practice shall ensure that no inmate will be denied access to medically necessary services based upon ability to pay.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-520. Acknowledgment in writing.

Medical services fee debits to inmate accounts shall be acknowledged by the inmate in writing. The acknowledgement shall be signed by a witness if the inmate refuses to sign.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia.

6VAC15-40-530. Accounting process.

A separate bank account, or accounting process, shall be established and used exclusively for the deposit and disbursement of medical service fees. Fee collections and disbursements shall be governed by generally accepted accounting principles.

Statutory Authority

6VAC15-40-1180. Special purpose area.

The facility shall have a special purpose area to provide for the temporary detention and care of persons under the influence of alcohol or narcotics, who are uncontrollably violent or self-destructive, or those requiring medical supervision.

Statutory Authority

§§ 53.1-5, 53.1-68, and 53.1-131 of the Code of Virginia

§§ 53.1-5, 53.1-68, 53.1-131 and 53.1-133.01 of the Code of Virginia.

**Loudoun County Adult Detention Center****Medical Services Fee Schedule**

Medical Service	Co-Pay / Fee Amount
Medical Transport to Personal Physician * Plus actual health care costs	\$50.00
Physician/Physician Assistants Sick Call	\$10.00
Dentist Sick Call	\$10.00
Optometry Services	\$10.00
Nurse Sick Call	\$5.00
Prescription Handling Charge * Per prescription (charged monthly)	\$3.00

Revised: October 1, 2023