

**MEMORANDUM OF UNDERSTANDING ON PRISONER REENTRY
BETWEEN THE VIRGINIA DEPARTMENT OF CORRECTIONS, THE VIRGINIA
DEPARTMENT OF SOCIAL SERVICES AND THE VIRGINIA DEPARTMENT FOR
AGING AND REHABILITATIVE SERVICES**

DESCRIPTION:

The purpose of this Memorandum of Understanding among the Virginia Department of Corrections (DOC), the Virginia Department of Social Services (DSS) and the Virginia Department for Aging and Rehabilitative Services (DARS) is to identify the roles and responsibilities regarding the release of homeless offenders with medical conditions and/or mental disabilities to ensure their continuity of care.

RESPONSIBILITIES:

DOC shall:

1. Ensure that Community Release Unit staff notifies the appropriate Local Department of Social Services (LDSS) director of the release of homeless offenders with medical conditions or mental disabilities six months prior to release.
2. Ensure that DOC staff obtain Uniform Assessment Instruments (UAI) for offenders who require assisted living level of care. DOC will refer offenders who require screening for nursing facility level of care to LDSS.
3. Provide information upon request by the LDSS related to the needs of offenders with medical conditions or mental disabilities when being served by the LDSS.
4. Participate as a member of the Local Reentry Team.

DSS shall:

1. Maintain, revise, and make available through the DSS website, the document "DSS Reentry Planning for Offenders with Medical Conditions or Mental Disabilities with no Home Plan."
2. Provide guidance and support to assist the LDSS in providing the following:
 - a. Processing applications for public assistance programs in accordance with the DSS Medicaid Policy for Incarcerated Individuals and pre-release Auxiliary Grant procedures. LDSS will provide the Medicaid number to the Community Release Unit prior to release and verify eligibility to providers as required for community services.
 - b. Communicating with DOC staff regarding the status of the reentry plan until the offender is released from DOC care.

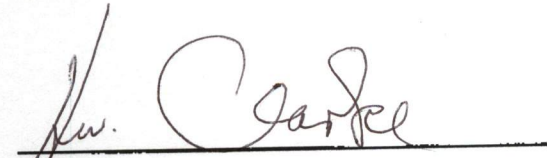
3. Encourage LDSS to organize and lead a local reentry team comprised of members who are able to address the individual needs of the offender and family.

DARS Shall:

1. Collaborate with DSS in maintaining and revising the document "DSS Reentry Planning for Offenders with Medical Conditions or Mental Disabilities with no Home Plan."
2. Provide guidance, technical assistance and support to assist the LDSS in providing the following:
 - a. Pre-release Auxiliary Grant procedures. LDSS will verify eligibility to providers as required for Adult or Auxiliary Grant services.
 - b. Communicating with DOC staff regarding the status of the reentry plan until the offender is released from DOC care.
 - c. Being responsible for the completion of the annual Assisted Living Facility reassessment of the offender with medical or mental disabilities if no other authorized assessor can be located or is able or willing to assume this responsibility.
 - d. Participating in UAI preadmission screening teams for offenders who require nursing facility level of care upon discharge.
3. Encourage LDSS Adult Services/Adult Protective Services units to participate in a local reentry team comprised of members who are able to address the individual needs of the offender and family.

Joint Responsibilities:


1. Resolve issues that arise concerning the effectiveness of this process.
2. Provide training as needed regarding services and procedures relevant to the reentry planning process for offenders with medical conditions and/or mental disabilities.
3. Coordinate the reentry plan when an offender with medical conditions and/or mental disabilities is released to ensure their continuity of care.
4. Revise the DOC Prisoner Reentry Protocol to address barriers or limitations in the offender reentry process that are identified by DSS, DARS and DOC.


Director
Virginia Department of Corrections

1-8-14
Date


Commissioner
Virginia Department of Social Services

1/7/14
Date


Commissioner
Virginia Department for Aging and Rehabilitative Services

12.5.13
Date