

1.4.E.3 Inmate Intake Medical Assessment

I Policy Index:



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Office of Primary Responsibility: DOC Administration

II Policy:

New admission inmates in the custody of the Department of Corrections (DOC) will have an intake assessment completed on their medical, dental and mental health status.

III Definitions:

Health Screening:

A system of structured inquiry and observation to (1) identify new admission inmates who may pose a health threat to themselves or others and (2) identify inmates who require immediate medical attention.

Inmate Health Plan:

A manual outlining the plan for providing medical services to inmates. The plan will be developed by Correctional Health Services and updated as needed.

New Admission Inmate:

An inmate placed into the custody DOC institutional system. This includes parole violators, extended detainment, and return from Community Transition Program (CTP) or suspended sentence supervision by South Dakota Parole Services. New admission includes non-state inmates serving federal time with the DOC for a reason other than a U.S Marshal hold and inmates received into custody from an Interstate Compact. New Admission does not include inmates serving another active DOC sentence who are returned to DOC custody.

IV Procedures:

1. Medical Receiving Screening for Inmates:

- A. New admission inmates will be received at the South Dakota Women's Prison in Pierre and Jameson Prison Annex in Sioux Falls.
- B. Health Services staff will be notified of all inmates admitted to the facility. Screening will be performed on all inmates upon arrival at the intake facilities to ensure that emergent and urgent health needs are met. Receiving screening will take place for all intake inmates as soon as possible following admission (NCCHC P-E-02). Inmates will be escorted to the respective Health Services by security staff to be screened by Health Service staff. Inmates in need of urgent

medical care may be referred to an outside medical provider by Health Service staff or DOC staff in the absence of Health Service staff. Inmates admitted to the DOC with prescribed medications in their possession will have their medications reviewed and appropriately maintained.

1. During the Admission and Orientation (A&O) process, inmates will be provided information on how to access routine medical, mental and dental health services (See DOH policy P-E-01 [Information on Health Services](#)).
 2. All new admission inmates and those who have been released from custody and are being returned to custody must sign the Advisement of Health Care Services form (See [Attachment 1](#)).
 3. Inmates who are English language deficit, have an audio impairment, or require interpretation services, will be provided an interpreter or receive educational handouts/materials from Health Services in their primary language (See DOH policy P-G-10A [Interpretation Services](#)).
- C. Inmates will have an opportunity to review the *Adult Offender Health Plan and Resident's Care Manual* provided by Health Services. Copies of the manual will be available in the facility library and through Health Service staff or unit staff upon request.
- D. New intake inmates are subject to receiving screening by health professional. In some cases, the facility may have health trained correctional personnel perform the receiving screening if a health professional is not available by staff who have received proper training.
1. Inmates will be screened in accordance with DOH policy P-E-02 [Receiving Screening](#). All findings from the receiving screening will be documented by Health Services on the Intake Encounter template.
 2. There is no cost to the inmate for the initial screenings (See DOH policy P-C-06B [Inmate Medical Co-Pay](#)).

2. Admission Medical History and Assessment:

- A. Within 72 hours of admission, new intake inmates (excludes temporary U.S. Marshal holds) will receive an initial health assessment (See DOH policy P-E-04 [Initial Health Assessment](#)).
1. Inmates re-admitted to the DOC within twelve (12) months of having had a complete health assessment by DOH are not required to have another assessment, unless it is known there are significant changes in the inmate's health.
 2. The assessment will include a medical history, physical examination and diagnostic testing, as indicated by clinical findings.

3. Dental Assessment:

- A. Within seven (7) days of admission, new intake inmates (excluding inmates re-admitted within six (6) months of release or discharge from the DOC) will receive an oral screening by medical personnel to detect oral problems (See DOH policy P-E-06 [Oral Care](#)).
- B. Within thirty (30) days of admission, each inmate will receive an oral examination by a dentist and instruction on oral hygiene and preventive oral education. The results of the oral examination will be documented in the inmate's medical record.

4. Mental Health Assessment:

- A. Each new admission inmate will receive a post admission mental health screening and evaluation by a qualified mental health professional, or mental health staff, within fourteen (14) days of admission to the DOC.
 - 1. In cases of acute psychiatric illness, the inmate will be housed under observation and the psychiatrist will be contacted to evaluate the inmate. Inmates with a positive screening for mental health issues will be referred to Behavioral Health staff for evaluation.

5. Screening for Communicable Disease:

- A. The South Dakota Department of Health Correctional Health Care requires each inmate admitted to the DOC receive an initial testing for tuberculosis within seven (7) days of admission (See DOH policy P-E-04A [Initial Health Assessment -TB](#) and DOH policy P-B-01 [Infection Control Program](#))
 - 1. Documentation of a positive TB test or a documented history of TB.
- B. Health Service staff will inquire into any past history of serious infectious or communicable illness or possible exposure to infectious or communicable disease the inmate may have experienced prior to admission and any treatment they are currently receiving for a communicable illness, or symptoms of a communicable illness they are currently experiencing.
 - 1. Test results for communicable disease will be received and evaluated before an inmate is assigned housing in general population.

6. Intoxication and Withdrawal Screening:

- A. All inmates will be screened for use, abuse or dependency of alcohol or drugs by a qualified health care professional for referral to possible drug and/or alcohol program assignment. Protocols shall be in place and followed for the assessment, monitoring and management of inmates showing symptoms of alcohol and/drug intoxication or withdrawal (See DOH policy P-G-07 [Intoxication and Withdrawal](#)).

7. Medical Classification:

- A. All inmates admitted to the DOC will be issued a medical classification. The classification is a result of the inmate's overall physical condition, updated physical examination and initial or updated mental health evaluation.

V Related Directives:

- SDCL § [23A-27A](#).
- DOH policy P-A-01 – [Access to Care](#)
- DOH policy P-B-01 -- [Infection Control Program](#)
- DOH policy P-C-06B – [Inmate Medical Co-Pay](#)
- DOH policy P-E-01 – [Information on Health Services](#)
- DOH policy P-E-02 – [Receiving Screening](#)
- DOH policy P-E-04 -- [Initial Health Assessment](#)
- DOH policy P-E.04A – [Initial Health Assessment TB](#)
- DOH policy P-E-06 – [Oral Care](#)
- DOH policy P-G-07 -- [Intoxication and Withdrawal](#)
- DOH policy P-G-10A -- [Interpretation Services](#)

VI Revision Log:

June 2003: Changed to new format. Added reference to capital punishment inmates.

September 2004: Added references to DOH policies and DHS policies. Revised the policy statement. Changed A & O Program to A & O process. Changed the basic overview medical screening from twenty-four hours upon admission to immediately upon admission.

March 2005: Added a section on the Community Transition Program and made reference to policy 1.5.G.2. Added a definition for offender. Noted an assessment exception for offenders placed at RCC through the CTP.

September 2005: Updated DOH policy references. Revised the policy name.

October 2006: Revised the policy statement. Minor style/format changes made throughout the procedures. Added references to policies 1.3.E.4 and P-C-06B. Revised Health Services clearance on CTP offenders going to RCCU.

October 2007: Updated the policy name on DHS policy DMH-02.

September 2008: Revised formatting of policy and attachment in accordance with DOC policy 1.1.A.2. Revised wording to state Health Services will be notified upon all new arrival to the institution and deleted A&O in ss (B of Assessment of New Commitments) Replaced RCCU with RCMU throughout policy. Added statement about Disciplinary Segregation Housing in ss (B of Assessment of New Commitments). Deleted statement regarding Springfield and added statement from the community in ss (A of Assessment for CTP Placement). Added parole violators to ss (A of Medical Assessment). Deleted former ss (B of Mental Health Assessment) regarding assessing for sex offenses. Added reference to DOC policy in section V.

September 2009: Revised title of DOC policy 1.4.E.10 and DMH-02 policy to be consistent with policy titles on the M drive. Added definition of New Commitment/Admission. Added exception of temporary Marshal Holds within ss (A of Medical Assessment). Replaced every offender with New Commitments within ss (A of Dental Assessment). Added DOH policy P-E-03 to section V.

September 2010: Revised formatting of Section I.

December 2013: Deleted "Non-Public" and Replaced with "Public". Added "intake area" and Deleted "A member of HS will report to that location or the" to Section 1 B. Added "Within 24 hours of admission" and Deleted "advised at the time of admission of the procedures for obtaining" and Replaced with "provided information on how to access routine medical, mental and dental health" in Section 1 B. 1. Deleted "every offender will have a basic overview medical screening" and Replaced with "Within 24 hours of admission, offenders will receive a screening by a qualified health care professional" in Section 1 D. Deleted "and evaluated on their medical, dental and mental health status while in the A&O unit" in Section 1 D. 1. Deleted 3. and 3. a. and 3. b. regarding delays in initial screening. Deleted Section 2- Assessment for CTP Placement. Deleted Section titled "Assessment Upon Readmission" Added "Admission Medical History to title of Section 2. Deleted "During the A&O process" and Replaced with "Within 7 days of admission" and Added "will receive an initial health assessment" and Added "who have not had a health assessment within the last 12 months" and Deleted "will have a complete medical history/assessment, physical examination, and evaluation done within 7 days, Added "The assessment will include a medical history, physical examination and diagnostic testing as indicated by clinical findings. Each offender will receive routine "hands on" physical examination by a physician or other practitioner as permitted by law" in Section 2 A. Deleted B. and B. 1-9 in Section 2. Deleted "New commitments will be initially screened for any dental problems within 7 days of commitment" and Replaced with "Within 7 days of admission, every offender will receive an oral screening by medical personnel" in Section 3 A. Deleted "Areas included in the screening are" and Replaced with "Within 30 days of admission, each offender will receive instruction on oral hygiene and preventive oral education". in Section 3. B. Deleted 1-4 in Section 3 B. Deleted "A complete dental assessment will be done within the first month of a new commitment" and Replaced with "Within 30 days of admission, each offender will receive an oral examination by a dentist licensed in the state of SD" in Section 3. C. Deleted "be screened for psychiatric illness at the time of commitment, including documentation of state of consciousness, mental health status and

suicidal risk factors” and **Replaced** with “receive a routine psychological screening within 14 days of admission to the DOC by a qualified mental health professional or mental health staff” in Section 4 A. **October 2014:** **Added** definition of “Health Screening” **Replaced** “offender” with “inmate” in the policy. **Deleted** “New admission offenders to the DOC, except those offenders sentenced to capital punishment, will be housed in the A&O unit” in Section 1 A. **Deleted** “evaluated” and **Replaced** with “screened by a qualified health care professional. Inmates in need of urgent care may be referred to an outside medical provider. Prescribed medications will be reviewed and maintained as deemed appropriate” in Section 1 B. **Added** 3. to Section 1 B. **Added** “Findings from the receiving screening will be documented” in Section 1 D. 1. **Added** “Inmates re-admitted to the DOC within twelve (12) months of having had a complete health assessment by DOH are not required to have another assessment if there are not changes in the inmate’s health.” to Section 2 A. **Deleted** a. “Each offender will receive a physical examination by a physician or other practitioner” in Section 2 A. 1. **Added** “(excluding inmates re-admitted within six (6) months of release or discharge from the DOC) and **Added** “to detect oral problems or disease” in Section 3 A. **Added** “an oral examination by a dentist” and **Added** “The results of the oral examination will be documented in the inmate’s medical record” in Section 3 B. **Added** “All inmates will be screened for psychiatric illness at the time of admission” and **Added** “post admission mental health screening and evaluation by a qualified mental health professional or mental health staff” **Added** 1. to Section 4 A. **Added** B. and B. 1. to Section 5. **Added** Sections 6 & 7.

September 2015: **Revised** definition of “New Admission” **Deleted** “Health Screening for New Admission” and **Replaced** with “Medical Receiving Screening for” in title of Section 1. **Deleted** “new admission” and **Added** “admitted to the facility. Receiving screening shall be performed on all inmates on arrival at the intake facilities to ensure that emergent and urgent health needs are met. Receiving screening will take place for all intake inmates as soon as possible following admission (NCCHC P-E-02)” and **Deleted** “The inmate will be transported by security staff in accordance with DOC policy” and **Added** “and appropriately maintained according to the prescribed medication schedule the inmate was maintaining prior to admission” in Section 1 A. **Added** “by security staff” and **Deleted** “a qualified health care professional” and **Replaced** with “Health Service staff” and **Added** “The inmate will be transported by security staff in accordance with DOC policy. Inmates admitted to the DOC with prescribed medications” and **Added** “or DOC staff in the absence of Health Service staff” and **Deleted** “and maintained as deemed appropriate” and **Replaced** with “have their medications reviewed by Health Service staff” in Section 1 B. **Deleted** “Within 24 hours of admission” and **Replaced** with “During the Admission and Orientation process” in Section 1 B. 1. **Added** “All new admission inmates and those who have been released from custody and be being returned to custody” and **Deleted** “stating that they have been advised and understand these procedures” in Section 1 B. 2. **Deleted** “admission” and **Replaced** with “intake” and **Added** “are subject to receiving screening by health professional. In some cases, the facility may have health trained correctional personnel perform the receiving screening if a health professional is not available by staff who have received proper training” and **Deleted** “will receive a standard preliminary medical/receiving screening by a qualified health care professional within 24 hours of admission” in Section 1 D. **Added** “by Health Services on the Intake Encounter template” in Section 1 D. 1. **Deleted** “if there are no changes in the inmate’s health” and **Replaced** with “unless it is known there are significant changes in the inmate’s health” in Section 2 A. **Added** 1. to Section 5 A. **Added** “they are currently receiving for a communicable illness” and **Added** “illness they are currently experiencing” to Section 5 B.

June 2017: **Deleted** Attachment 1 Advisement of Health Care Services.

Denny Kaemingk (original signature on file)

Denny Kaemingk, Secretary of Corrections

07/09/2017

Date