1.4.E.3 Inmate Intake Medical Assessment

I Policy Index:

Date Signed: 06/18/2021
Distribution: Public
Replaces Policy: 4E.3
Supersedes Policy Dated: 07/09/2017
Affected Units: All Institutions
Effective Date: 06/21/2021
Scheduled Revision Date: September 2022
Revision Number: 15
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 Care Services:
A system of preventative and therapeutic services that provide for the physical and mental well-being of a population. Includes medical and dental services, mental health services, nursing, pharmaceutical services, personal hygiene, dietary services, and environmental conditions.

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. Female new admission inmates will be received at the South Dakota Women’s Prison in Pierre. Male new admission inmates will be received at the 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 to ensure the emergent and urgent health needs of the inmate are met. Receiving screening will take place as soon as possible following admission (NCCHC P-E-02). Inmates will be escorted to Health Services by security staff for screening. Inmates with urgent health care needs that cannot be provided within the institution shall be referred to an outside medical provider by Health Service staff. Inmates admitted to the DOC with prescribed medications in their possession will have their medications reviewed by Health Services.

1. During the Admission and Orientation (A&O) process, inmates will be provided information on how to access health care services (See DOH policy P-E-01 Information on Health Services).

2. Inmates identified as English language deficit, hearing, visual or learning disabled, illiterate or who require interpretation services, will be provided reasonable accommodation, to include but not limited to an interpreter or translated/braille handouts/materials from Health Services (See DOH policy P-E-01 Information on Health 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 a 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 and included in the inmate’s health record.

2. There is no cost to the inmate for initial health screenings (See DOH policy P-A-01 Access to Care).

2. Admission Medical History and Assessment:

A. Within seven (7) days of admission, new intake inmates (excludes temporary U.S. Marshal holds) will receive an initial health assessment (See DOH policy P-A-01 Access to Care).

1. The assessment will include but is not limited to, medical history, physical examination and diagnostic testing, as indicated by clinical findings.

3. Dental Assessment:

A. Within seven (7) days of admission, new admission 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 and receive instruction on oral hygiene and preventive oral education. The results of the oral examination will be documented in the inmate’s health records.
4. Mental Health Assessment:
   A. Each new admission inmate will receive a mental health screening and evaluation by Behavioral Health Services staff within fourteen (14) days of admission to the DOC.

   1. In cases of acute psychiatric illness, the inmate may 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 new admission inmate admitted to the DOC receive an initial testing for tuberculosis within seven (7) days of admission (See DOH policy P-B-02 Infectious Disease Prevention and Control). This includes Federal Bureau of Prisons (BOP) inmates.

   1. Documentation of the testing results and any documented history of TB will be included in the inmate’s health records.

   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. This includes BOP inmates. BOP inmates testing positive for communicable disease are to be reported to the BOP contact.

   1. Test results for communicable disease will be received and evaluated to help determine appropriate housing placement of the inmate and to identify a treatment plan for the inmate.

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/or drug intoxication or withdrawal (See DOH policy P-F-04 Medically Supervised Withdrawal and Treatment).

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-02 – Infectious Disease Prevention and Control
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-06 – Oral Care
DOH policy P-F-04 – Medically Supervised Withdrawal and Treatment
VI Revision Log:

**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. 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. 1. **Added** 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. **June 2021**: **Added** definition of “Health Care Services”. **Revised** definition of “New Admission Inmate”. **Deleted** “2. All new admission inmates and inmates admitted who were previously released from custody, must sign the Advisement of Health Care Services form (See Attachment 1)” in Section 1 B. and **Reformatted** subsequent subsections. **Deleted** “P-G-10A Interpretation Services” and **Replaced** with “P-E-01 Information on Health Services” in Section 1 B 2. **Added** “and included in the inmate’s health record” in Section 1 D 1. **Deleted** “72 hours” and “P-A-01 Access to Care” in Section 2 A. **Deleted** “P-C-06B Inmate Medical Co-Pay” and **Replaced** with “P-A-01 Access to Care” in Section 1 D 2. **Deleted** “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” in Section 2 A and **Reformatted** the subsequent subsection. **Deleted** “P-E-04A Initial Health Assessment – TB” and **Replaced** with “P-B-02 Infectious Disease Prevention and Control), and **Added** “This includes Federal Bureau of Prisons (BOP) inmates,” in Section 5 A. **Added** “This includes BOP inmates. BOP inmates who test positive for a communicable disease are to be reported to the BOP contact.” in Section 5 B. **Deleted** “P-G-07 Intoxication and Withdrawal” and **Replaced** with “P-F-04 Medically Supervised Withdrawal and Treatment” in Section 6 A.