1.4.E.1 Health Care Services for Offenders

I Policy Index:

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II Policy:

The Department of Corrections (DOC) will provide all offenders with access to health care services. The DOC may contract health care services from licensed and/or certified health care providers and/or professionals. No offender will be denied medically necessary health care due to a lack of available funds in their institutional account.

III Definitions:

Offender:
For the purposes of this policy, an offender is an inmate (in the custody of the DOC institutional system) or a juvenile housed at the STAR Academy.

Emergency Medical Care:
Emergency medical, mental health and dental care is defined as care for an acute illness or an unexpected health need that cannot be deferred until the next scheduled sick call or clinic.

IV Procedures:

1. Health Care Service Principles:

A. Facilities, equipment, drugs, supplies and materials for health services will be maintained at levels adequate to provide minimally necessary care, including on-site emergency first aid to offenders (See DOH policies P-D-03 Clinic Space, Equipment, and Supplies and Y-D-03 Clinic Space, Equipment, and Supplies).

B. Offenders will have daily access to health care provided by qualified health care professionals (ACA #4-4346). Open nurse sick call times will be posted in all units of each facility (See DOH policy P-E-07 Non-Emergency Health Care Requests and Services and DOH policy P-A-01 Access to Care). Clinical services are available to offenders at least five (5) days a week and are performed by a health care practitioner or other qualified health care professional (ACA #4-4346).

C. Offenders requesting health care services outside the posted sick call times will notify DOC staff or their supervisor of their request for health care services. DOC staff or the supervisor
will inform Health Services staff of the offender’s request for health care services. DOC staff may not approve or disapprove offender requests for health care services.

1. Inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which is determined by medical and mental health staff.

D. A medical co-pay may be charged to offenders who attend open nurse sick call. No offender will be denied health care services due to insufficient funds in their institutional account. There is no co-pay for mental health services (See DOC policy 1.4.E.10 *Inmate Medical Co-Pay, Fees and Billing for Health Care Services* and ACA #4-4345).

E. Emergency medical care, mental health and dental health services will be available twenty-four (24)-hours a day, seven (7) days a week (See DOH policy P-E-08 *Emergency Services*). In the absence of health service staff, offenders who may require emergency health care services will be transported by DOC staff to the appropriate provider in the community.

1. In the event Health Service staff is unavailable at the time of a medical emergency, DOC staff shall contact the emergency on-call provider (medical, mental health or dental) or emergency responders. If the emergency on-call provider is unavailable or emergency evacuation of the offender is necessary, staff will dial 911 for emergency assistance (ACA #4-4351).

F. The DOH will maintain agreements with approved local hospitals, providers and emergency services to provide hospital care and specialty care (means specialist – provided care) to offenders (See DOH policy P-D-05 *Health Care Services for Offenders* and Y-D-05 *Hospital and Specialty Care* and ACA #4-4351).

G. Health Service staff and the Warden or Superintendent may consult with health service staff prior to taking the following action regarding offenders who are confirmed by Health Service and/or Behavioral Health Service staff to be chronically ill, physically disabled, geriatric, seriously mentally ill, or developmentally disabled (ACA #1-HC-3A-06):

1. Housing assignments.
2. Program assignments.
3. Disciplinary measures.
4. Transfers to other facilities.

H. Medical or adaptive devices (eyeglasses, hearing aids, dentures, wheelchairs, or other prosthetic devices) will be provided to offender when determined to be medically necessary by the responsible health care practitioner (ACA #1-HC-1A-32).

2. **Transportation of Offenders to Receive Health Care Services:**

A. Treatment of an offender’s condition is not limited by the resources and services available at the facility. Offenders will be safely transported in a timely manner to all authorized medical, mental health and dental clinic appointments outside of the facility (ACA #4-4348).

B. Health Services staff and security staff may collaborate together when determining the appropriate conditions of transportation and necessary security precautions. Including the urgency of the transport, (ambulance versus standard transport by security staff) when
preparing to transport an offender from the facility to an outside medical, mental health or
dental appointment (See DOH P-E 10 Patient Escort and DOH Y-E-10 Patient Escort and
ACA #4-4348-4349).

C. Transport of an offender, including emergency transports for medical, mental health or
dental reasons, will be executed in a safe and timely manner under appropriate security provisions
and consistent with restraint and supervision requirements contained in DOC Policy 1.3.A.7
Transport & Escort of Inmates, or STAR OM 5.4.E.3 Emergency Medical-Dental Treatment
and with consideration for the medical or psychological needs of the offender (ACA #4-4349).

D. The safe and timely transportation of offenders for medical, mental health or dental
appointments is the joint responsibility of security (DOC) staff and DOH Health Services staff
(ACA #4-4349).

E. Designated security staff or program staff (at STAR Academy) will ensure sufficient staff is
available/scheduled for each shift to ensure transportation of offenders to outside medical
appointments in a timely manner as needed or required. Except in emergency situations, staff
assigned to transport/escort an offender to a health care examination/procedure/appointment
will be the same-sex as the offender (ACA #1-HC-3A-10).

F. Health Service staff will communicate all medical related accommodations/needs required by
the offender during transport, including instructions for administration of necessary
medications or health interventions while en route or specific precautions (for example, masks
and gloves) to security or program staff transporting the offender (ACA 4-4414).

G. Custody/escort staff will ensure the offender’s accompanying health records remain
confidential during the transport.

   1. Offender records shall remain in a secure location within the transport vehicle and will not
   be accessed by other offenders at anytime during the transport (See DOH policies P-H-04
   Management of Health Records, P-H-02 Confidentiality of Health Records and
   Y-H-02 Confidentiality of Health Records and Information).

      a. All accompanying health records will be delivered directly to the receiving
         physician/provider.

      b. Health records transported by non-health service staff should be sealed.

3. Incident Action Plans:

A. Institutions will include contingency plans to provide necessary health care to offenders during
an emergency incident. Examples of a health care emergency include but are not limited to
mass disaster involving multiple casualties, and man-down (See DOC policy 1.3.B.1
Emergency Response Plan).

B. Health Service staff will participate in incident simulations, which may include tabletop
exercises conducted by the DOC as applicable (ACA #4-4388) and critique health services
response and roles of health service staff in such drills or actual events.
4. Offenders Assigned to Work in Designated Areas of Health Services:

A. The DOC prohibits offenders from being used as health care workers (ACA #4-4393/1-HC-2A-18). No offender will be allowed to:

1. Distribute or collect sick-call requests or schedule appointments for health care services.
2. Provide direct patient care services.
3. Determine access of other offenders to health care services.
4. Handle, possess or have access to surgical instruments, syringes, sharps, pharmaceuticals/medications, or other medical items/supplies as determined by Health Services staff and/or DOC staff.
5. Operate diagnostic or therapeutic equipment.
6. Handle, possess or access another offender’s medical records (See DOH policies P-H-02 Confidentiality of Health Records and Y-H-02 Confidentiality of Health Records and Information).

B. Offenders may be assigned to clean designated areas of health services, provided they have been appropriately trained and approved for such work; e.g. handling of biohazardous materials and use of protective gear (See DOH policies P-C-06 Inmate Workers and Y-C-06 Juvenile Workers and DOC policy 1.4.E.8 Blood-Borne Pathogens and Infectious Disease Management).

1. Offenders assigned to these areas will work under the continuous and direct (visual) supervision of a DOC staff member or Health Services staff member.
2. Offenders may not clean areas where medications are unsecure or accessible and offenders may only enter such areas under the direct supervision of a Health Services staff member.

C. Offenders may be assigned to assist impaired offenders not designated a “patient” on a one-on-one basis with activities of daily living, such as meal delivery, meal clean-up, rest room breaks or dressing (ACA #1-HC-2A-18)

1. These types of activities are considered comfort care services and not direct patient care services. Comfort care services assist impaired offenders with daily living activities.
2. Offenders assisting with providing comfort care services to offenders are not considered health care workers.

V Related Directives:
DOC Policy 1.3.A.7 --Transport & Escort of Inmates
DOC policy 1.3.B.1 – Emergency Response
DOC policy 1.4.E.8 -- Blood-Borne Pathogens and Infectious Disease Management
DOC policy 1.4.E.10 -- Inmate Medical Co-Pay, Fees and Billing for Health Care Services
DOH policy P-A-01 – Access To Care
DOH policy P-A-07 – Emergency Response Plan
DOH policy P-C-06 – Inmate Workers
DOH policy P-D-03 – Clinic Space, Equipment and Supplies
DOH policy P-D-05 – Hospital and Specialty Care
DOH policy P-E-07 -- Non-Emergency Health Care Requests and Services
DOH policy P-E-08 -- Emergency Services
DOH policy P-E-10 – Patient Escort
DOH policy P-H-02 – Confidentiality of Health Records
DOH policy P-H-04 -- Management of Health Records
DOH policy Y-A-07 -- Emergency Response Plan
DOH policy Y-C-06 – Juvenile Workers
DOH policy Y-D-03 – Clinic Space, Equipment and Supplies
DOH policy Y-D-05 – Hospital and Specialty Care
DOH policy Y-E-10 – Patient Escort
DOH policy Y-H-02 – Confidentiality of Health Records and Information
STAR OM 5.4.E.3 -- Emergency Medical-Dental Treatment

VI Revision Log:
September 2004: Revised policy statement. Added references to DOH policies. Added discretionary decision authority for DOC staff on emergency transfers. Added a statement that Health Service staff will participate in disaster drills, if they are available. Expanded on what work inmate and juvenile offenders can and cannot do in the health service area.

October 2005: Updated DOH policy references throughout the policy. Changed policy name. Changed "inmate and juvenile (offenders)" to "offenders". Added information in letter "C" under Offenders Working in Health Services.

October 2006: Corrected one DOH policy reference.

October 2007: Minor style/format changes.

September 2008: Revised formatting of policy in accordance with DOC policy 1.1.A.2. Added juveniles to the title of the policy.

September 2009: Added hyperlinks.

September 2010: Revised formatting of Section 1.

October 2011: Deleted "and Juveniles" from title of policy. Added "all" and "access to" and "No offender will be denied medically necessary health care due to a lack of available funds in their institutional account." in Policy section Added definition of "Emergency Medical Care". Added "drugs" "including on-site emergency first aid" to Section 1 A Added "mental health and dental health services" and "for inmate or staff reported medical emergencies" to Section 1 B Added 1. "In the event Health Service staff is unavailable at the time of a medical emergency, DOC staff shall contact the on-call provider, or dial 911 for emergency assistance". to Section 1 B. Added "and emergency services" and "hospital and specialized ambulatory care for medical and mental illnesses" to Section 1 C. Deleted "Transfers" and Replaced with "Transportation of Offenders" in Section 2 title. Added "in an emergency" to Section 2 A. Added B. to Section 2. Replaced "use their discretion on" with "determine" in Section 2 C. Added "but are not limited to" in Section 3 A. Deleted “situations” Changed “casualty” to “casualties” in Section 3 A. Replaced “used” with “assigned”. Changed titles of DOH policies and included hyperlinks to current policies Replaced “Handle” with “Possess” in Section 4 A. 4 Deleted “medical” and Replaced with “surgical” Deleted “equipment” and Replaced with “syringes” Deleted “medical supplies” from Section 4. A. 4. Added 5. “No offender may operate diagnostic or therapeutic equipment” to Section 4 A. Replaced “Have, handle” with “possess” in Section 4 A. 6. Added “and are typically comfort care or for the purpose of assisting impaired offenders with daily living activities.” to Section 4. C. 1. October 2012: Deleted “Emergency” from title of Section 2 Added D-G. and G. a. 1) & 2). September 2013: Deleted D. “All security regulations which apply to DOC employees will also apply to health service staff, whether full time, part time or contractual” in Section 1 Added b. C. and D. to Section 1. Added “to Receive Health Care Services” to title of Section 2 Added new A. to Section 2. Deleted “determine” and Replaced with “assist security staff in determining” and Deleted “outside medical facilities in an emergency” and Replaced with “from the facility to receive medical, mental health or dental services” in Section 2 B Added “mental health or dental”
to Section 2 C. **Added** “all or some of the requirements are” in Section 2 C **Deleted** D. “Offenders will be transported safely and in a timely manner during an emergency transport and non-emergency transport, mental health and dental clinic transports to an outside appointment” in Section 2 **Added** “in a timely manner” to Section 2 E. **Deleted** “required by the offender during the transport” and **Replaced** with “needed during the transport, including instructions for administration of any necessary medications” in Section 2 F. **Added** “power outages” to Section 3 A. **Deleted** “considered contraband, unless the items were issued by Health Services to a specific offender” and **Replaced** with “as determined by Health Services staff and/or DOC staff” in Section 4 A. **Added** “Assigned to Work in Designated Areas of” to title of Section 4. 

**September 2014:** **Added** “Clinical services are available to offenders at least five (5) days a week and are performed by a health care practitioner or other qualified health care professional (ACA 4-4346)” to Section 1 B. **Added** “DOC staff may not approve or disapprove offender requests for health care services” to Section 1 C. **Added** 1. to Section 1 C. **Added** “If the emergency on-call provider is unavailable or emergency evacuation of the offender is necessary, staff will” in Section 1 E. a. **Deleted** “DOC and/or health care provider and Replaced with “DOH” and **Added** “when primary health services are unavailable at the facility” in Section 1 F. **Added** “Treatment of an offender’s condition is not limited by the resources and services available at the facility” in Section 2 A. **Deleted** “assist” and **Replaced** with “collaborate” in Section 2 B. **Added** “safe and timely manner under appropriate security provisions” and **Deleted** “unless all or some of the requirements are waived by the Warden or designee” in Section 2 C. **Deleted** “In the event Health Services staff are not readily available, DOC staff will determine whether to utilize institutional/staff transportation or ambulance when transporting offenders to outside medical facilities/providers” and **Replaced** with “The safe and timely transportation of offenders for medical, mental health or dental appointments is the joint responsibility of security (DOC) staff and DOH Health Services staff (ACA 4-4349) in Section 2 D. **Deleted** “OIC” and **Replaced** with “Designated security staff or program staff” in Section 2 E. **Added** G. and H. to Section 2. 

**September 2015:** **Added** “In the absence of health service staff, offenders who may require emergency health care services will be transported by DOC staff to the appropriate provider in the community” to Section 1 E. **Added** “emergency responders” to Section 1 E 1. **Deleted** “health services” and **Replaced** with “hospital care and specialty care (means specialist provided care)” to Section 1 F. **Added** “with health service staff” and **Added** “confirmed by Health Services and/or Behavioral Health Service staff” in Section 1 G. **Deleted** “man-made or natural disasters involving casualties or power outages, and Replaced with “disaster involving multiple casualties and man-down” in Section 3 A. **Added** “which may include tabletop exercises” and **Added** “and critique health services response and roles of health service staff in such drills or actual events” in Section 3 B.