



SHAWNEE COUNTY DEPARTMENT OF CORRECTIONS

POLICIES AND PROCEDURES

Institutional Services
Section E: Health Care

Approved By: _____

Brian Cole
Brian Cole, Director

Policy No.: IS-E-01 Title: Inmate Medical Services

Current Effective Date: 08/02/15 Replaces Policy Issued: 02/26/14 Original Issue Date: 01/04/99

Reference: 4-ALDF-4C-1-4; 8; 11; 14; 20-26; 38; 40-41; 4-ALDF-4D-1-3; 9-15; 17-19; 24-26; 4-ALDF-6B-06; 4-ALDF-7D-25-26; 3-JDF-2C-09-1; 3-JDF-4C-2-3; 6-9; 11; 15-16; 18-19; 21; 23; 25-26; 28-29; 33-34; 37; 42-45; 47-48; NCCHC J-A-02-04; J-A-06; J-A-08-09; J-B-01; J-C-01; J-C-05; J-D-01 (a, b, d)-03 (a); J-D-05; J-E-01-02; J-E-04; J-E-06-08; J-E-12-13; J-F-01; J-F-03; J-G-01-02; J-H-01-02; J-H-04-05; J-I-01-02; J-I-05-07; KAR 28-4-353 (e)(8); KAR 28-4-353b (c)(4)(F), (c)(8); KAR 28-4-355a (b)(10); KAR 28-4-356 (a), (b), (c)

General Use Employees Read Only Forms/Appendices

POLICY:

The Shawnee County Department of Corrections shall ensure inmates have access to medical, dental, and mental health services to meet their needs on a 24-hour basis. Medical, dental, and mental health care and treatment for inmates shall be provided by qualified personnel pursuant to written standing or direct orders by personnel authorized by law to give such orders. Medical care shall be consistent with the treatment protocols established for the health condition of each inmate. No inmate shall be denied necessary medical treatment for any reason, including the inmate's inability to pay a co-pay fee or any other portion of a medical expense.

DEFINITIONS:

Health Assessment: A process whereby the health status of an inmate is evaluated.

Health-Trained Personnel: Individuals that are trained in limited aspects of health care, as determined by the responsible physician, and may include correctional officers and other non-health personnel.

Inmate: For the purpose of this policy, this term is used to define any person housed in the Adult Detention Center (ADC), the Shawnee County Corrections Annex (Annex), or the Juvenile Detention Center (JDC).

Medical Service Provider: The licensed health care provider contracted by the Shawnee County Department of Corrections to provide inmate medical services.

Physical Examination: An objective, hands-on evaluation of an inmate. This evaluation involves the inspection, palpation, auscultation, and percussion of the inmate's body to determine the presence or absence of physical signs of disease.

Qualified Medical Person/Personnel: Includes physicians, physician assistants, nurses, nurse practitioners, dentists, mental health professionals, and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for patients.

PROCEDURES:

I. Authority for Medical Services

- A. The medical service provider designated by the department shall be responsible for the provision and management of inmate health care pursuant to the provisions of the service provider agreement, including:
 1. Medical care;
 2. Dental care; and
 3. Psychiatric care.
- B. The medical service provider shall appoint a Health Services Administrator to serve as the department's health authority.
- C. Matters involving clinical judgment (medical, dental, and psychiatric) shall be the sole province of the responsible physician and dentist attending to the inmate's care.
- D. Each qualified medical person shall comply with the department's policies and procedures, including security regulations.
 1. Each qualified medical person shall receive orientation to basic security issues from department employees ordinarily on the person's first day of service.
- E. The Deputy Director in charge of contract monitoring shall facilitate the execution of contract requirements and coordinate the relationship between the medical service provider and the department.
 1. The Director, the Deputy Directors, and other department designees shall meet with the medical service provider representatives at least quarterly to discuss issues related to the health care delivery system, including dental and mental health care, and the health environment.
 - a. The medical service provider representatives shall provide annual statistical summaries and quarterly reports to the Director to assist in these discussions.
- F. The medical service provider shall ensure health care services are provided by qualified medical personnel and a written job description is available for each medical position.
 1. The Health Services Administrator shall ensure a job description includes the necessary qualification for each position and the assigned duties and responsibilities for each position.
 - a. Each job description shall be approved by the medical service provider.
- G. Each policy, procedure, and program in the health care delivery system shall be reviewed by the medical service provider at least annually and revised as necessary.
 1. Each document shall bear the date of the most recent review or revision.
 - a. The approving authority shall sign a coversheet listing the reviewed or revised policies.
 - 1) The signed coversheet shall be maintained in the front of the medical service provider's standard operating procedure manual.
 2. Each policy and procedure developed by the department that specifically pertains to medical, dental, or mental health services shall also comply with this requirement.
- H. The department's Mental Health Team Leader shall serve as the department's mental health coordinator.
 1. The Mental Health Team Leader shall coordinate referrals to the medical service provider's psychiatrist and nurse practitioner.

2. The Mental Health Team Leader shall develop and implement the psychiatric non-medication portions of the mental health program.
- I. An inmate may refuse specific health evaluations and treatments.
 1. A qualified medical person shall document an inmate's refusal on the appropriate form.
 - a. The inmate shall sign the refusal form.
 - b. If the inmate declines to sign the form, the form must be signed by at least two witnesses.
 2. Refusal for evaluation shall not prevent an inmate from being isolated due to the possible spread of a potential communicable disease.
 3. Forced medication shall be administered in accordance with state and federal laws and department policies and procedures.
 - J. The medical service provider shall ensure each JDC inmate's parent, guardian, or legal custodian completes a medical consent form.
 1. If a parent, guardian, or legal custodian does not complete a medical consent form, authorization to provide medical treatment shall be requested from a Judge.
 - K. Each inmate's medical and mental health record shall be considered confidential and the Health Services Administrator shall control access.
 1. Qualified medical personnel shall have access to each inmate's custody record as necessary for the inmate's care and treatment.
 - L. Each inmate shall provide the department with contact information of a parent, spouse, etc. in case of a serious illness, surgery, injury, or death.
 1. If the inmate is being held for another agency (e.g., Immigration and Customs Enforcement (ICE), Juvenile Justice Authority, etc.), the responsible agency shall also be contacted in the case of a serious illness, surgery, injury, or death.
 2. Any signs of abuse and/or neglect of a JDC inmate shall be reported in accordance with all state regulations.
 - M. An inmate that is approaching the end of life shall be permitted to have advance directives including living wills, health care proxies, and do not resuscitate (DNR) orders.
 1. The inmate shall be required to have an attorney prepare the necessary paperwork and provide copies to the department's medical service provider and the Director.
 - a. The medical service provider shall ensure the paperwork is filed in the inmate's medical file.
 2. If the inmate is an ICE detainee, the department shall notify local ICE officials of the detainee's DNR order.
 - N. An inmate shall be allowed to participate in an organ donor program if he/she has been established as an organ donor prior to detention.
 1. The department shall ensure applicable standards, laws, etc. are followed when addressing an inmate's organ donation.

II. Medical Peer Review

- A. The medical service provider shall ensure a peer review program is implemented for the service provider's physicians, mental health professionals, and dentists and is conducted no less than every two years.

III. Distribution of Medical Services

- A. The department shall provide appropriate physical space and furniture for medical services, including private space for the conduct of clinical encounters.
 - 1. Security employees shall consider the inmate's right to privacy of medical care and shall not remain close enough to hear or witness clinical encounters, except as necessary when the inmate poses a serious risk to the safety of the provider or others.
- B. Qualified medical personnel shall assist in the distribution of health care services to the inmates by:
 - 1. Performing intake screenings;
 - 2. Performing health assessments;
 - 3. Conducting medical clinics;
 - 4. Requiring reasonable medical co-pay fees;
 - 5. Distributing prescribed and over-the-counter medications;
 - 6. Conducting screenings on inmates being transferred to or from other facilities;
 - 7. Referrals to community providers as necessary;
 - 8. Emergency medical, dental, and mental health services on site as well as with local emergency room or other emergency facility;
 - a. The medical service provider shall ensure a written agreement exists with a local hospital for all medical services that cannot be provided at the facility.
 - 9. Efficiently responding to inmates' legitimate medical services requests and grievances; and
 - 10. Health education.
- C. Each department employee and qualified medical personnel shall cooperate with each other to aide in the distribution of medical care.
- D. Qualified medical personnel shall be prepared to implement the health aspects of the department's emergency response plan.
 - 1. All qualified medical personnel shall be trained, and expected to respond, to emergency situations within four (4) minutes.
- E. Qualified medical personnel shall advise security employees of the special needs of inmates that may affect housing, work, and program assignments; disciplinary measures; and admissions to and transfers from other agencies/institutions.
 - 1. Qualified medical personnel shall only provide information to a security employee that is necessary to preserve the health and safety of the inmate, other inmates, volunteers, visitors, or employees.
 - 2. This communication shall be documented.
- F. Security employees shall maintain confidentiality of an inmate's medical needs, including any infectious and/or communicable diseases.
- G. Security employees shall receive appropriate training in recognizing situations in which an inmate needs to be referred for medical or mental health reasons in accordance with the department's Employee Training and Development policy, AM-D-01.
- H. The medical service provider shall provide training to an appropriate number of ADC and JDC employees to effectively assist disabled inmates perform basic life functions.
 - 1. Training shall occur whenever the department houses a disabled inmate.
- I. Students or interns shall be utilized in the delivery of health care services only as approved by the Director and the Health Services Administrator and under the direct supervision of appropriate clinical personnel, commensurate with the student's/intern's level of training.

1. The Director and Health Services Administrator shall ensure there is a written agreement between the department and the training or educational facility that covers the scope of work, length of agreement, and any legal or liability issues.
2. A student or intern shall agree in writing to abide by all department policies, including those relating to the security and confidentiality of information.

IV. Use of Inmates

- A. Inmates shall never be utilized as health care workers.
 1. Inmates shall be prohibited from the following duties:
 - a. Performing direct patient care services;
 - b. Scheduling health care appointments;
 - c. Determining access of other inmates to health care services;
 - d. Handling or having access to surgical instruments, syringes, needles, medications, or health records; and
 - e. Operating diagnostic or therapeutic equipment.
 2. Inmates may be utilized as suicide prevention aides and/or aides to inmates that need assistance with the activities of daily living.
- B. Inmates shall not be utilized for research.
 1. The only type of research that may be authorized for inmates in the department shall be data based or interview based.
 2. No inmate shall be authorized to participate in any medical, pharmaceutical, or cosmetic experiment or research, unless the department is required to allow an inmate's participation by order of the Court or unless the procedure will likely improve the inmate's health status when no other method is available.

V. Intake Screenings

- A. When an inmate arrives at the ADC or JDC, a booking officer shall make an immediate determination of the inmate's condition to determine if immediate medical care is necessary.
 1. When immediate medical attention is necessary, the booking officer shall notify the shift supervisor and a qualified medical person.
 2. A qualified medical person shall assess the inmate's condition and determine if it is necessary to transport the inmate to the local hospital.
 - a. When hospital transport is deemed necessary, a booking officer shall request the arresting agency to transport the inmate for medical treatment then return the inmate for processing.
 - 1) If the inmate is a juvenile, the JDC booking officer shall ensure the supervisor initiates the Law Enforcement Medical Information Form (JDC IS-A-01 Form 1) and sends it with the arresting agency for the physician to complete.
 - b. If the arresting agency refuses to transport, the shift supervisor shall arrange for the secure transfer of the inmate for medical treatment.
 3. A booking officer shall initially question each inmate for current and past medical and mental health conditions.
 - a. All information collected during the booking process shall be provided to a qualified medical person for verification.
 - 1) The booking officer shall immediately report any information received that would suggest the presence of suicidal ideation or other risk of self-harm to the shift supervisor, pursuant to the provisions of the ADC's Suicide Prevention policy, IS-E-18, or the JDC's Suicide Prevention policy, IS-C-35.

4. Any inmate exhibiting behavior indicative of intoxication (alcohol or drugs) shall be referred immediately to a qualified medical person for assessment to determine if he/she is able to participate in the booking process.
 - a. For an ADC inmate, a qualified medical person and officers shall proceed in accordance with the ADC's Management of Intoxicated Offenders policy, IS-E-04.
 - b. For a JDC inmate, a qualified medical person and officer shall notify a shift supervisor and proceed in accordance with the JDC's Juvenile Admission and Release Process policy, IS-A-01.
- B. Each inmate that will be dressed into the department shall receive an initial medical and mental health screening by a qualified medical person.
 1. The initial medical screening shall include appropriate medical questions to ensure the inmate's health, meet required standards, and be in accordance with the medical service provider's policies and procedures.
 2. In addition to appropriate medical questions that are required by standards, a qualified medical person shall inquire about the inmate's following:
 - a. Past serious infectious diseases; and
 - 1) Any ADC inmate that a qualified medical person believes may have a potentially infectious disease shall be isolated in an appropriate cell in the medical or segregation unit or transported to a local hospital for treatment.
 - 2) Any JDC inmate that a qualified medical person believes may have a potentially infectious disease shall be isolated in a designated cell or transported to a local hospital for treatment.
 - b. History of or current suicidal ideations.
 - 1) A qualified medical person shall immediately report any information received that would suggest the presence of suicidal ideation or other risk of self-harm to the shift supervisor, pursuant to the provisions of ADC's Suicide Prevention policy, IS-E-18, or the JDC's Suicide Prevention policy, IS-C-35.
 3. If the inmate refuses to participate in the initial intake screening or the screening has demonstrated that the inmate does or may have a communicable disease, the inmate shall be isolated and a physician or nurse practitioner shall be notified.
- C. Each ICE detainee shall receive a Tuberculin Skin Test (TST) upon admission to the facility except ICE detainees arriving with documentation of a TST within sixty (60) days and an initial medical screening that is negative for symptoms.
 1. The TST shall be given to an ICE detainee upon admission regardless if the person is being housed primarily for ICE or the ICE hold is a secondary charge.
 2. The TST shall be read in accordance with the medical service provider's policies and procedures.

VI. Health Assessment

- A. Each inmate shall receive an initial health assessment in accordance with required standards and the medical service provider's policies and procedures.

VII. Transfer Screening

- A. A qualified medical person shall review the health record of each incoming inmate who is being admitted to the ADC or JDC from another facility to ensure continuity of care in accordance with the medical service provider's policies and procedures.
- B. A qualified medical person shall document and forward important medical information to the receiving agency regarding an inmate that is transferring to another facility in accordance with the medical service provider's policies and procedures.

- C. When an inmate is leaving the custody of the ADC or JDC and returning to the community, a qualified medical person shall make a referral(s) to community care when indicated.
 - 1. If medical determines that an inmate will require continued care when discharged from the facility, qualified medical personnel shall inform a classification officer to make a note in the inmate's active file.
 - a. Prior to the inmate's release from the facility, a classification officer, booking officer, or supervisor shall review the inmate's active file to determine if a qualified medical person needs to be notified of the inmate's release.
 - 1) If so, the classification officer, booking officer, or supervisor shall notify qualified medical personnel of an inmate's release prior to releasing the inmate.

VIII. Access to Medical Care

- A. A qualified medical person shall explain to each inmate during the inmate's initial medical screening about accessing medical and mental health services, including any co-pay fee that may be assessed.
 - 1. A corrections officer shall provide each new inmate with additional information regarding medical and mental health services by providing the inmate with an Inmate or Juvenile Handbook, which includes information on the grievance process.
 - 2. If the inmate does not understand English, the information shall be translated for him/her.
- B. Each inmate shall have the opportunity to request health care services on a daily basis.
 - 1. Procedures for accessing medical care shall be posted in each housing module.
- C. Each inmate shall be responsible for notifying an officer and/or a qualified medical person of any medical problems, current medications, special treatments, or special diet requirements.
- D. An officer shall notify the shift supervisor and qualified medical personnel immediately in the event of a medical emergency.
 - 1. All qualified medical personnel and department employees shall be trained, and expected to respond, to emergency situations within four (4) minutes.
 - 2. Sealed first aid kits shall be maintained in an accessible location in each module for use by employees responding to an emergency.
 - a. The medical service provider shall determine the contents, number, location, and procedures for use.
 - b. If an employee breaks the seal on a first aid kit, he/she shall ensure the first aid kit is given to the Safety and Sanitation Officer for immediate exchange for an unopened first aid kit.
 - 3. Automated External Defibrillators (AED) shall be readily available at designated locations throughout the facility.
 - 4. An employee shall provide immediate first aid and CPR assistance as needed until a qualified medical person arrives and takes over.
 - a. An employee shall request the presence of an AED if one is needed, which shall be used in accordance with the training provided.
 - b. Each security employee shall be issued and carry with him/her a CPR protective mouth shield.
- E. An inmate shall submit a Medical Request for non-emergency medical situations.
 - 1. Medical Requests shall be made available to all inmates in the housing modules.
 - 2. It shall be the responsibility of the inmate to complete and place the Medical Request in the secure Medical Request Box located in the housing module.

3. In the event an inmate needs assistance completing or submitting a Medical Request, an officer shall assist with the preparation of the form.
- F. When a qualified medical person is conducting medication pass, a security employee shall accompany the medical person to provide assistance and monitor inmate behavior.
- G. During the completion of the daily medication passes, a qualified medical person shall collect all Medical Requests for evaluation.
1. A qualified medical person shall triage all Medical Requests within 24 hours of receipt to determine the priority of need and the proper clinic for health care.
 - a. The inmate shall be scheduled for follow up as appropriate.
 - b. If the Medical Request is for a mental health issue, the qualified medical person shall forward it to the Mental Health Team Leader.
 - 1) The Mental Health Team Leader shall triage any mental health requests as deemed appropriate.
 2. The medical service provider shall make advance arrangements/agreements with appropriate community providers for services that are not available on site.
 - a. The inmate shall be transported in a safe and timely manner for appointments inside and outside of the department.
- H. The medical service provider shall provide the following weekly or biweekly clinics for addressing the needs of inmates:
1. Physician Clinic;
 - a. The physician shall attempt to resolve inmate's complaints regarding service they did or did not receive from other medical service providers.
 2. Dental Clinic;
 3. Psychiatric Clinic; and
 4. Chronic Care Clinic.
- I. The medical service provider shall provide the Nursing Sick Call Clinic five days a week, Monday through Friday.
- J. The shift supervisor shall notify a qualified medical person of an ADC inmate's recent or soon to be placement on segregation status so that a qualified medical person can conduct a file review to determine the appropriateness of segregation housing.
1. This review and decision shall be documented in the inmate's medical record.
 2. A qualified medical person shall monitor the status of inmates assigned to segregation status daily and record the status of the inmate on the approved medical form.
 3. A qualified medical person shall review the documentation on an inmate's Inmate Health and Well Being Checklist (IS-E-18 Form 3) and Inmate Meal Chart (IO-B-18 Form 1) for the past twenty-four (24) hours for any segregated inmate housed in a protrusion-free cell.
 - a. If concerns regarding the inmate's health status arise during the review of documentation, the medical person shall coordinate with mental health staff and a supervisor to ensure appropriate action is taken to care for the inmate.
- K. The shift supervisor shall notify a qualified medical person of a JDC inmate's recent or soon to be placement in isolation if the isolation is for more than 24 hours so that a qualified medical person can conduct a file review to determine the appropriateness of the isolation.
1. This review and decision shall be documented in the JDC inmate's medical record.
 2. A qualified medical person shall monitor the status of a JDC inmate assigned to isolation daily.

IX. Health and Sanitation Practices

- A. The medical service provider shall conduct an effective infection control program.
 - 1. Each employee shall assist the medical service provider in the development and implementation of the program.
- B. Each employee shall ensure that all areas of the department in which inmates are housed, work, study, or recreate are maintained in a clean, safe, and healthy manner.
 - 1. The department's Safety and Sanitation Officer shall be responsible for the completion of monthly department environmental inspections.
 - a. Results of the inspections and associated corrective action plans shall be documented.
- C. The department's food service preparation, storage, and serving areas shall be maintained in a sanitary manner, following state food service codes.
 - 1. Each food service worker, including inmates, shall be medically cleared to work in the food service areas.
 - 2. Food service workers, including inmates, shall comply with hygienic practices and shall be inspected by the food service manager or designee daily.
- D. When there is evidence of ectoparasite infection, appropriate treatment measures shall be taken to treat the infected inmate(s) and associated bedding and clothing.
 - 1. Each employee shall follow the directions of the medical service provider for treatment of such infections.
- E. Food service personnel shall comply with any medical diet ordered by a qualified medical person.
 - 1. A registered dietician shall approve each medical diet for nutritional adequacy and shall review the medical diet menu at least every 6 months.
- F. Each inmate shall be offered the opportunity to exercise at least 3 times per week to maintain and improve his/her physical and mental health, if behavior permits.
- G. Each inmate shall have access to appropriate items to maintain personal hygiene.
 - 1. Each indigent inmate shall be provided with soap, toothbrush and toothpaste, if needed.
 - a. Each inmate shall be provided a comb at admission and shall be responsible for purchasing a new comb through commissary, if needed.
 - 2. Each inmate shall be issued toilet paper as needed.

X. Medical Co-Payment

- A. The ADC shall maintain a medical co-payment system for medical care received when requested by an inmate.
- B. Medical co-payment fees shall be posted in all ADC housing modules for inmate review.
 - 1. Inmates shall not be denied access to medical care due to an inability to pay the fees.
 - 2. A Federal inmate shall be charged a medical co-pay only after being notified of the co-pay fees for at least thirty days.
 - a. Any medical treatment provided to a Federal inmate prior to the thirty day notification period shall be at the expense of the department.
 - 3. ICE detainees shall not be charged a medical co-pay.
- C. A qualified medical person shall determine the fee to be assessed and document the assessment.
 - 1. Copies of the document shall be provided to the Accounting Division and the inmate.

XI. Medication Administration

- A. All approved and prescribed medications, medication dosages, and administration schedule shall be documented in the inmate's medical record, including the name of the authorizing qualified medical person prescribing the medication.
 - 1. The medical service provider shall follow the established formulary for the prescribed medication.
 - 2. The medical service provider shall follow an established process for obtaining non-formulary medications.
 - a. Non-formulary medications shall be available for treating inmates when:
 - 1) There is adequate documentation that formulary medications have been ineffective or contraindicated; and/or
 - 2) Only a non-formulary medication is indicated.
- B. Medications prescribed to an inmate may be different than those medications prescribed prior to incarceration.
 - 1. Authorized medications may be a generic version or a different medication of the same class.
 - 2. Any prescribed medication differing from medication taken prior to incarceration shall adequately treat the diagnosed condition.
- C. The medical service provider shall maintain an on-site pharmacy to ensure most prescribed medications are available as approved and have access to a 24-hour off-site pharmacy, as needed.
- D. When the responsible physician determines the need for an inmate to receive forced psychotropic medication because the inmate is a danger to himself/herself or others, security employees shall assist the qualified medical person as the medication is delivered by injection.
 - 1. If it is a JDC inmate, the qualified medical person shall complete a physical examination prior to administering forced psychotropic medication.
- E. Each inmate being released into the community shall be given a seven (7) day supply of prescribed medication to reduce any risk of medication reaction, withdrawal, or medical emergency, as long as the medical service provider is given at least 48 hours advance notice of the inmate's release.

XII. Inmate Medical Grievance Procedure

- A. Each inmate shall address a medical concern through the informal medical request process.
- B. If the informal medical request process does not resolve the medical issue/complaint, the inmate may submit a written grievance to the Division Manager of Operations.
 - 1. The grievance process shall be completed in accordance with the Inmate or Juvenile Handbook.

REPORTS REQUIRED

None

APPENDICES

None

NOTE: The procedures set forth herein are intended to establish directives and guidelines for employees, inmates and those entities that are contractually bound to adhere to them. They are not intended to establish state-created liberty interests for employees, inmates, or an independent duty owed by the Shawnee County Department of Corrections to employees, inmates, or third parties. This policy is not intended to establish or create new constitutional rights or enlarge or expand existing constitutional rights or duties.