

OREGON DEPARTMENT OF CORRECTIONS
Operations Division
Health Services Section Policy and Procedure #P-A-08.1

SUBJECT: HEALTH STATUS CLEARANCE FOR INMATES ASSIGNED TO BEDS RENTED IN NON-DOC FACILITIES

POLICY: The Department does not have enough housing for the number of inmates expected to be received for a term of incarceration during the 2003-2005 biennia. It is important that the Health Services Section participate in the selection of inmates to be housed elsewhere so that inmate's health care needs match the scale of services that are available at each of these facilities. A balance must be struck between the extensiveness of the clearance requirements which will reduce the pool of inmates available for assignment to one of these facilities and making the requirements rigorous enough so that the health of inmates is not jeopardized because their health care needs exceed the level of service at the facility. If either of these extremes occurs, the Department will not be able to safely house the number of inmates expected to be incarcerated in non-DOC facilities. The health care staff directly influences this balance with every decision to clear or not to clear individual inmates for assignment to one of these facilities. It is the Health Service Managers' responsibility to ensure that the person(s) to whom the task of health status clearances for transfer to non-DOC facilities is delegated are knowledgeable and capable of making these decisions appropriately. The Health Services Manager is responsible for monitoring the quality and completeness of the task.

REFERENCE: NCCHC Standard P-A-09, Privacy of Care
NCCHC Standard P-E-10, Patient Escort
NCCHC Standard P-E-12, Continuity of Care During Incarceration

PROCEDURE:

- A. Health status clearances are completed by reviewing the inmate's Health Status, reviewing information about the inmate tracked on the Inmate Health Plan and reviewing the information contained in the inmate's Health Care Record (the health care record includes the dental and mental health records as well as the medical record).
- B. The following are criteria to use in determining whether an inmate can be considered for assignment to Non-DOC Facilities:
 1. Full clearance should be given to inmates when:
 - a. There are no restrictions on the Health Status, when there are no pending appointments with practitioners tracked on the Inmate Health Plan, and when the health care record confirms the validity of the Health Status and Inmate Health Plan.

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- b. The only restrictions for the inmate on the Health Status is assignment to the minimum custody work camp facilities, the inmate has no pending practitioner appointments on the Inmate Health Plan, and the Health Care Record documents the inmate's utilization of health service has been effectively handled by sick call and on-site primary care medical, dental and mental health outpatient services over the last 12 months.
 - c. The Health Status lists one (1) or two (2) minor restrictions such as cotton blankets and there are no pending practitioner appointments listed on the Inmate Health Plan and the Health Care Record documents the inmate's utilization of health service has been effectively handled by sick call and on site primary care medical, dental and mental health outpatient services over the last 12 months.
2. Inmates should be evaluated by a practitioner to determine if clearance can be established when:
- a. The Inmate Health Plan indicates a pending appointment with a practitioner and from the review of the Health Care Record the appointment will resolve the health care problem, i.e., routine follow up. The practitioner should be informed using the Inmate Health Plan that at the pending appointment the provider needs to decide whether the inmate can be cleared for assignment to a non-DOC facility.
 - b. The Health Status lists several restrictions, the review of the Inmate Health Plan shows that there have been no practitioner appointments in the last two months and the review of the Health Care Record indicates that the inmate has a compromised health condition but that it is stable and is not likely to require off-site services in the next 12 to 24 months. Compromised health condition includes all of the chronic diseases and any other health condition monitored on the Special Needs Program. These inmates should be scheduled for an evaluation by a practitioner, as soon as possible, specifically to determine if the inmate can be cleared for assignment to a non-DOC facility.
 - c. The Health Status lists temporary restrictions because of health, dental or mental health follow up care and the review of the Health Care Record indicates that the inmate's needs can be handled appropriately by sick call and onsite primary care medical, dental, and mental health services. These inmates should be scheduled for an evaluation by a practitioner, as soon as possible, specifically to determine if the inmate can be cleared for assignment to a non-DOC facility. If treatment can reasonably be completed at an Oregon

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facility in time for transfer, this should be scheduled and accomplished as promptly as possible.

- d. The Health Status does not reflect any restrictions but there is a pending appointment with a practitioner. The practitioner should be informed using the Inmate Health Plan that at the pending appointment the provider needs to decide whether the inmate can be cleared for assignment to a non-DOC facility.
3. Clearance should not be given to inmates with the following:
 - a. The Health Status lists several restrictions and the Inmate Health Plan reflects frequent practitioner appointments (more than four encounters in the last three months) where the prescribed treatment is altered significantly or a new major problem is identified for treatment.
 - b. The Inmate Health Plan reflects a very recent practitioner appointment(s) and the review of the Health Care Record indicates that follow up care is likely, i.e. assess EKG results etc.
 - c. The review of the Health Care Record indicates that the inmate:
 - 1) has been non-compliant with treatment for a major medical or mental illness anytime in the last six months and has required acute medical or psychiatric intervention as a result,
 - 2) has been hospitalized or taken to the emergency room anytime in the last six months for a condition or conditions which make reoccurrence likely,
 - 3) has a major health condition which has been intentionally aggravated and required off-site care anytime in the last six months,
 - 4) has a major mental illness or has been admitted by the psychiatrist to the Special Management Unit for treatment anytime in the last 12 months.
- C. These criteria may need to be adjusted based upon Oregon's experience with non-DOC facilities.

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- D. The decision to clear an inmate for assignment to an alternate facility is to be noted on the Health Status screen titled Specific Programs Clearance. If an inmate is clear for assignment to one of the specific programs listed on this screen mark a "1" by that program. If the inmate is to be re-evaluated at a later date as per step 5 B above put that date in the reevaluation column. Inmates who are not cleared for assignment should have no mark noted on the screen.
- E. When the Health Service Manager or designee is notified of the names of the inmates scheduled for transfer, a copy of each inmate's current health care record will be made and filed in a plastic chart back with dividers.
1. The current health care record is defined as all health related material from the current admission to the Department.
 2. If the inmate has been incarcerated more than one year and the health care record is large, only the portions of the record that reflect the inmate's condition over the last twelve months as well as any other reference documents need to be copied. A note should be made in the copy of the record that this represents only a portion of the complete health care record.
 3. An entry is to be made in the health care record noting the date the inmate was transferred and to which facility the inmate is being transferred to for staging prior to transfer to the non-DOC facility.
- F. When the inmate is transported to the staging area, the original health care record is transported with the inmate according to Part A of Policy and Procedure #P-H-05, Transfer of Health Records. The copy of the health care record is transferred to a location specified by the designated facility's Health Service Manager or designee. The designated facility's Health Service Manager or designee will have the copies of the health care records transferred to the non-DOC facility in advance of the arrival of the inmates.
- G. Any health care attention provided to inmates in the staging area will be documented by ODOC health care staff in the inmate's original health care record. A copy of these entries will be made after the inmates are in transit to the non-DOC facility. The copies of these entries are to be transmitted electronically to the designated facility's Health Service Manager who will transfer copies to the health care staff at the non-DOC facility as soon as practicable. The copies need to be clearly marked with the name of the non-DOC facility the inmate is being transferred to and addressed to the attention of the designated facility's Health Service Manager.
- H. After the inmates have been transferred to the non-DOC facility, the original health care record is to be transferred from the facility where the inmates were staged to the Health Care Program at the designated facility for storage.

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1. The health care records are to be sent in a container separate from health care records of paroled inmates. A sheet of white paper should be inserted into the container stating that within the container are health care records of inmates lodged at the name of the non-DOC facility and addressed to the attention of the designated facility's Health Service Manager.

- I. The designated facility's Health Service Manager is the responsible party for monitoring the health care aspects of agreements with non-DOC facilities to house Oregon inmates. The designated facility's Health Service Manager is to be contacted when there is any question or concern about the health care status of a particular inmate. The designated facility's Health Service Manager is responsible for making any decisions for the Oregon Department of Corrections about the health care of Oregon inmates housed in non-DOC facilities.

- J. When an inmate is returned to the Oregon Department of Corrections, the inmate will be readmitted according to the requirements of Policy and Procedures #P-E-02 Receiving Screening, #P-E-04 Health Assessment, and #P-E-06, Oral Care.

Effective Date: _____

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