

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

SUBJECT: AFTER HOURS HEALTH SERVICES CONTACT

POLICY: Inmates must continue to have access to emergent and urgent health services when a health care provider is not available after normal operating hours. A designated health care liaison shall be identified and trained regarding coordination of triaging emergent and urgent health complaints.

REFERENCE: NCCHC Standard P-C-08

PROCEDURE:

- A. The Officer in Charge (OIC) in each facility that does not have a qualified health care professional onsite 24 hours daily will also function as the health care liaison.
- B. Training for the health care liaison will be under the joint supervision of the responsible physician, Health Services Manager (HSM) in coordination with the Counseling and Treatment Services (CTS) staff, and facility administrator or their designee. Training will include but not limited to: issues regarding identification, documentation, communication, and confidentiality of the inmate's health care needs.
- C. The health care liaison's duties include: identification and immediate attention for those inmates in need of emergent and urgent health care services that cannot wait for care during established health services hours of operation; assisting within their capacity to carry out the order delivery in emergent situations for the health care providers; documentation and review with the medical and mental health care staff of those in need of follow-up attention during the next regular operating shift.

Effective Date: _____
Creation date: February 2007
Supersedes P&P dated: January 2006

Attachment to P-C-08.1, After Hours Health Service Contact

The after hours Health Care Liaison's duties will be the responsibility of the Officer in Charge (OIC). The duties include identification and immediate attention for those in need of emergent and urgent health care services that cannot wait for care during established health services hours of operation. Documentation and review with the medical and mental health care staff of those in need of follow-up attention will occur during the next regular operating shift.

Training will consist of recognition of emergent conditions, both medical and mental health, documentation, communication and confidentiality of inmate's health care information. The medical physician, Health Services Manager (HSM) in coordination with Correctional Treatment Services (CTS) staff or designee will complete this training.

1. Upon notification, the OIC will determine if the inmate's need or condition is emergent, urgent, or non-emergent in nature. Identified facilities with 24 hour staff coverage may be contacted to assist the OIC with this determination (see table below); the OIC may also contact the facility's on-call Health Services staff for disposition. The OIC may arrange for the inmate to be transported to the local community hospital for assessment and follow-up care. In the case of non-emergent needs, the condition will be documented and the documentation provided to medical or mental health care staff at the next scheduled shift for follow-up.
2. The OIC may determine that the inmate's condition warrants "lay in" or "no work" status until reviewed by health services staff. This information will be documented and provided to the health services staff the following scheduled shift. The inmate will be instructed by the OIC that it is his/her responsibility to seek follow-up health care.
3. If health services staff determines that an inmate may benefit from a diet, housing, work or facility change, the OIC may institute and the health services staff review documentation to determine follow-up needs. Due to a possible injury, it may be necessary to assign an inmate to a lower bunk. The OIC may assign housing and bunk changes and notify the health services staff.
4. If an inmate demonstrates a mental health condition that is beyond the resources of the facility, the OIC may contact the facility's on-call mental health provider. The listing for the facility's provider is located in the public folders through the ODOC outlook email program.

Training for recognition of emergent and urgent conditions, both medical and mental health, documentation, communication and confidentiality of inmate health care information will be provided for the OIC for the ODOC facilities without 24 hour health services coverage. The medical physician, Health Services Manager in coordination with CTS staff or designee will assure this training is complete. Annually, the OIC and the staff responsible for training will discuss any concerns or changes necessary to the process or training needs.

The training will include, but is not limited to:

1. Medic First Basic (CPR),
2. Medic Basic First Aid (Recognition of Emergent and Urgent conditions)
3. Recognition of Mental Health Emergencies
4. Recognition of patients with increased suicide risk.
5. Documentation and follow-up of health care needs.
6. Confidentiality of health care information.