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I. Authority

In accordance with 22 AAC 05.155, the Department will maintain a manual comprised of policies and procedures established by the Commissioner to interpret and implement relevant sections of the Alaska Statutes and 22 AAC.

II. References

Alaska Statutes

AS 33.30.011
AS 47.30.705
AS 47.37.170

Alaska Administrative Codes

22 AAC 05.005
22 AAC 05.120
22 AAC 05.485

Standards for Adult Correctional Institutions, 4th Edition 2003

4-4362, 4-4363, 4-4365, 2008 supplement: 1HC 1A-19

Standards for Adult Local Detention Facilities, 3rd Edition 1991

3-ALDF-4E-19, 4E-20, 4E-21

III. Purpose

This policy establishes uniform procedures within the Department to govern health screens upon intake and transfer, and health examinations.

IV. Application

All staff.

V. Definitions

Clinically Significant Findings: Any deviation from normal findings that significantly impacts the health, safety, and welfare of the patient.

Health Care Provider: A physician, dentist, physician assistant or advance nurse practitioner licensed to practice in the State of Alaska.

Health Care Staff: Health care staff is a general term for licensed professional medical staff including, but not limited to; licensed practical nurses (LPN), registered nurses (RN), physician assistants (PA), and advance nurse practitioners (ANP).

Health Screen: A structured evaluation of each prisoner's health and mental status performed within 24 hours of admission to a correctional institution to ensure that emergent and urgent health needs are met.

Health Examination: An examination performed by a physician, physician assistant, or advance nurse practitioner that includes a health history, an individual health assessment whereby the individual's health status is evaluated, and an objective, hands-on evaluation to determine the presence or absence of physical signs of disease.

Medical Clearance: A clinical assessment of the physical and/or mental status before an individual is admitted into a correctional facility. The medical clearance may require sending the

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individual to the local hospital emergency room. Written medical clearance must be obtained when cleared by a local emergency room.

On-Call Behavioral Health Services: Mental health professionals available for telephonic consultation.

On-Call Provider Services: Health care providers available for telephonic consultation.

Post-Booking Screen: An observation of the detainee's current mental and physical condition, including a suicide screen, performed immediately after booking by health care staff, or security staff when health care staff is not available.

Pre-Booking Screen: An intake evaluation, including a BRAC, to determine apparent immediate need for health care prior to booking a detainee into DOC custody.

Title 47 Detainees: Persons who have been taken into protective custody because they are gravely disabled or suffering from a mental illness and are likely to cause serious harm to themselves or others; or are intoxicated or incapacitated by alcohol or drugs in a public place and are in need of assistance for their protection and safety.

VI. Policy

- A. The Department shall complete a health screen for all prisoners and Title 47 detainees within 24 hours of booking to assess their physical health, promote physical well being, and prevent the spread of disease.
- B. Prisoners shall receive necessary physical examinations during their incarceration.
- C. Health care staff shall ensure continuity of health care between facilities by preparing for the transfer and by reviewing a prisoner's health care needs when receiving the prisoner from another institution.

VII. Procedures

A. Arrival at the Institution

1. Pre-Booking Screen

A registered nurse or security staff, when health care staff are unavailable, shall visually inspect each detainee during the reception process before the Department accepts the prisoner for booking. The pre-booking screen is completed by documenting on the Criminal Booking Screening form 807.14(A) for criminal detainees or on form 807.14(B) for Title 47 detainees.

- a. If the detainee is unconscious or in need of immediate medical attention booking is refused and staff shall direct the booking officer to seek emergency medical treatment. Conditions that require immediate medical attention include potentially life-threatening, serious, or communicable health conditions.
- b. A breath reaction alcohol content (BRAC) test shall be performed on all detainees during the pre-booking screen prior to accepting into custody. Any detainee who has a BRAC greater than 300 shall be declined for booking until medically cleared.
- c. The Department is not responsible for providing medical care or arranging transports for a detainee prior to booking.

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d. Security staff may renew the booking process after a written medical clearance has been obtained. Health care staff shall be notified when the detainee returns to the facility. Documentation of hospitalization prior to booking shall be completed on page 1 of the criminal booking screen, form 807.14(A) for criminal detainees, or the Title 47 screen, form 807.14(B) for Title 47 detainees.

2. Post-Booking Observation

a. The post booking observation is conducted immediately after booking and is completed by a registered nurse, health care provider, or security staff when no medical staff is on duty.

- (1) The prisoner shall be inspected for obvious injuries or illnesses and inquire about any medical problems or recent use of medication.
- (2) The prisoner who appears to be ill, injured, or incapacitated by alcohol, narcotics, or similar agents, but not in immediate need of medical attention shall be medically attended to as soon as practical.
- (3) If the prisoner is in need of medical care for a serious condition that requires medical treatment and no health care staff is available, the prisoner will be sent to the local emergency room and the on-call provider will be contacted. The hospital admission form will be faxed to Anchorage Central Office, Clinical Director.

b. The post-booking observation shall include:

- (1) Where, when, and why the prisoner was seen at a community medical facility prior to booking;
- (2) Identification of physical handicaps;
- (3) Evidence that the prisoner is under the influence of drugs or alcohol;
- (4) Evidence of contagious or infectious conditions that may spread throughout the institution;
- (5) Prisoner's report of medications they may be carrying or may need to take; and
- (6) Suicide screening consisting of ten questions.
 - (a) Health care staff, or security staff if no medical staff is available, shall perform a suicide screening immediately after booking. The suicide screen shall consist of asking the prisoner the ten suicide risk factor questions.
 - (b) A "yes" response to the question "Are you thinking of killing yourself?" requires immediate suicide precautions and referral to Mental Health. Greater than five "yes" responses also require immediate suicide precautions. Suicide precautions shall be pursuant to policy 807.20, Suicide Prevention and Awareness.
 - (c) Three or more "yes" responses to the suicide risk factor questions require referral to Mental Health.
 - (d) When Mental Health staff is not available at the facility, staff shall contact the on-call Mental Health Services.

3. Health Screen

a. The health screen shall include a physical and mental health assessment completed by a registered nurse or health care provider, which is documented by completing form 807.14(A), pages 2 and 3. Each section must be addressed and retained in the medical record. If the prisoner is uncooperative, or unable to answer the questions the Nursing Protocol for uncooperative prisoners shall be followed.

b. The criminal booking screen includes the following:

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- (1) Vital signs;
 - (2) Allergies;
 - (3) Review of body systems to identify current medical conditions;
 - (4) Sexually transmitted disease history, current symptoms and/or conditions;
 - (5) Identification of current medical devices and prosthetics;
 - (6) Alcohol and drug screen;
 - (7) Tuberculosis screen;
 - (8) Current medication history;
 - (9) For females only, obstetrical and gynecological history, as well as birth control method;
 - (10) The Brief Jail Mental Health Screen;
 - (11) Identification of individuals who have sustained a significant brain injury and/ or were born with fetal alcohol syndrome; and
 - (12) Housing assignment of the prisoner.
- c. Significant abnormal findings on the health screen shall receive further evaluation by the health care provider.
 - d. When the prisoner is in possession of their own prescription medications upon booking, see policy 807.05, Use of Pharmaceuticals, for handling of medications.
 - e. New prisoners shall be kept in admissions housing, when feasible, pending the health screen by health care staff. The Department shall assign the prisoner to appropriate housing after the health screen has been completed by health care staff.
4. Title 47 Screen
- a. The Title 47 screen shall be performed for those detainees brought to a correctional facility for protective custody regardless if they are a mental health detainee, or an alcohol or drug detainee.
 - b. The Title 47 screen shall include a physical and mental health assessment completed by a registered nurse, or health care provider, documented by completing form 807.14(B), pages 1 and 2. Each section must be completed.
 - c. When the Title 47 screen identifies a serious medical condition that requires treatment and no health care staff is available, the prisoner shall be sent to the local emergency room and the on-call provider will be contacted. The hospital admission form shall be faxed to Anchorage Central Office, Clinical Director.
 - d. The Title 47 screen includes the following:
 - (1) The pre-booking screen, including a BRAC, as described in A. 1.,
 - (2) Documentation if seen at a medical facility prior to booking,
 - (3) Post-booking observation, as described in A. 2.,
 - (4) Suicide screen, as described in A. 2. b. (6),
 - (5) Vital signs,
 - (6) Medical history, including the use of prosthetics, recent injury and treatment,
 - (7) Alcohol and drug screen,
 - (8) Assessment of mentation,
 - (9) Documented observations while in protective custody,
 - (10) Reported medications, and
 - (11) Referrals to medical providers, and/or mental health professionals.

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- e. Additional observations, when greater than space allows on form 807.14(B), shall be documented on form 807.06(A), Healthcare Progress Notes.
- f. The Title 47 screen, form 807.14(B) is retained in the medical record.

B. Mental Health Referral

- 1. Mental health referrals are made based on the suicide risk factors, form 807.14(A) and (B), page 1; and the Brief Jail Mental Health Screen, form 807.14(A), page 3.
- 2. Mental health referrals are made for all detainees and prisoners that report serious mental health issues.
- 3. The following require Mental Health referral:
 - a. A “yes” response to the question “Are you thinking of killing yourself?” requires immediate suicide precautions and referral to Mental Health. Greater than five “yes” responses also require immediate suicide precautions. Suicide precautions shall be pursuant to policy 807.20, Suicide Prevention and Awareness.
 - b. Three or more “yes” responses to the suicide risk factor questions.
 - c. Persons identified to have significant traumatic brain injury.
 - d. Persons with fetal alcohol syndrome.
- 4. When Mental Health staff is not available at the facility, staff shall contact the on-call Mental Health Services.

C. Health Care Referrals

- 1. The nurse shall refer a prisoner who is in need of medical care, or continuing medications after booking to the institutional or on-call health care provider.
- 2. If the institution cannot provide the necessary health care, then a referral must be made to a provider outside the institution pursuant to policy 807.02, Access to Health Care Services.

D. Health Examinations

- 1. A health examination is performed for each prisoner within 14 days of the initial incarceration by a health care provider.
- 2. Health examinations are not required for all prisoners readmitted to a correctional institution when the last health examination was performed within twelve months and when the prisoner’s new booking health screen shows no change in health status. When appropriate, histories, physical examinations, and tests are updated on readmitted prisoners.
- 3. The Department shall ensure that each prisoner receives health examinations when clinically indicated throughout their incarceration and age appropriate examinations that address health issues related to the individual’s age and health status.
- 4. The health examination shall include:
 - a. Review of the booking screen;
 - b. Health history;
 - c. Vital signs: height, weight, blood pressure, pulse and temperature,
 - d. Clinically indicated laboratory tests;
 - e. Testing for HIV, venereal diseases, and hepatitis, if requested by the prisoner;
 - f. All items on the Physical Examination/Health History form (807.14D), except those items that are declined by the prisoner.

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- g. For female prisoners:
 - (1) Obstetrical and gynecological history to include menstrual cycle, problem with menses, pregnancies, etc.;
 - (2) Birth control history, including current method, if any;
 - (3) Pelvic examination;
 - (4) Breast examination (visual and manual); and
 - (5) Pregnancy test, when indicated.
 - h. Initiation of therapy when appropriate; and
 - i. Development and implementation of a treatment plan, as appropriate. The treatment plan is to include recommendations concerning housing, job assignments, and program participation, as needed.
5. Female prisoners shall be offered routine pelvic (PAP) and breast examinations periodically according to community standards.
6. The health examination is documented on the Health History/Physical Examination form 807.14(D), and is retained in the medical record.
- E. Prisoners assigned to work in the food service section of the institution shall receive a health evaluation before beginning work and, annually thereafter, to ensure they are free from communicable diseases pursuant to policy 805.02, Food Service Safety and Sanitation.
- F. Transfer Screening
- 1. Transfer screening is performed on all intrasystem transfers. Intrasystem transfers include prisoners being transferred from one facility to another within the Department, individuals returning from furlough, or Community Residential Centers; and individuals brought to the facility with an already established health record for their current incarceration from a different correctional system.
 - 2. Prior to the transfer of a prisoner, health care staff shall:
 - a. Complete the Medical Summary for Prisoner Transfer, form 807.14(E);
 - b. The transfer summary shall include:
 - (1) Current medications;
 - (2) Physical limitations, including any medical equipment;
 - (3) Special needs;
 - (4) Mental health status;
 - (5) Isolation or suicide precautions;
 - (6) Allergies;
 - (7) TB clearance;
 - (8) Identification if transfer is for medical reasons;
 - (9) Current medical problems, treatment, pending medical appointments, or other pertinent information related to prisoner's health status.
 - c. Fax completed Medical Summary for Prisoner Transfer to receiving facility;
 - d. Place the prisoner's medical record in an envelope with the transfer summary attached to the outside. All prescription medications are placed into a tamper evident envelope, pursuant to policy 807.05. The medical record and all prescription medications (including personal medications received upon booking) shall accompany the prisoner to their new location pursuant to policy 807.05, Use of Pharmaceuticals; and
 - e. Notify the receiving facility's health care staff of current medical conditions receiving treatment, pending medical appointments, and any medical concerns that are urgent or unusually complicated.

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3. Health Care Evaluation Upon Transfer Arrival

- a. Health care staff shall review the Medical Summary for Prisoner Transfer, form 807.14(E). Documentation that the review occurred is indicated in the appropriate section of the form, under Health Inquiry of Received Prisoner.
- b. Health care staff shall evaluate and document the prisoner's current medical complaints, general appearance and behavior, and any physical deformities or evidence of physical trauma on all prisoners upon arrival to ensure continuity of care, utilizing form 807.14(E), Health Inquiry of Received Prisoner.
- c. If health care staff is not available at the time of the prisoner's arrival, and the prisoner appears to be in need of medical attention, then the facility security staff shall call the on-call provider for directions on how to proceed. In the case of immediate medical needs, security staff shall call the community emergency medical response services.
- d. When a prisoner who uses prescribed medications arrives at a new facility and health care staff will not be on duty at the time of the next medication pass, security staff shall contact the on-call health practitioner for directions on how to proceed.

4. Medical Summary for Prisoner Transfer, form 807.14(E) is retained in the medical record.

G. Segregation for Medical Reasons

1. Health care staff, in collaboration with the Superintendent, or designee, shall determine all prisoners' needs for special housing for medical treatment.
2. The Department may place a prisoner in administrative segregation for medical reasons if the prisoner refuses to cooperate during the booking screening process. This includes refusal of screening and/or testing for communicable diseases, for example, tuberculosis. The prisoner shall remain in segregation until the health screen is complete, and communicable diseases have been ruled out.
3. The prisoner shall be placed in medical segregation when a communicable disease is suspected or known, in order to protect the staff and other prisoners within the facility pursuant to policy 807.02, Access to Health Care Services. Health care staff shall notify the Superintendent or designee, in writing, when the prisoner is medically cleared to return to the general prisoner population
4. Staff may not post the reason for the prisoner's medical segregation in public view. If a prisoner is suspected or known to have a communicable disease, the appropriate isolation precautions and directions shall be posted for anyone entering the room.



November 18, 2010

Joseph Schmidt, Commissioner
Department of Corrections

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Applicable Forms:

- 807.14(A) Criminal Booking Screen
- 807.14(B) Title 47 Screen
- 807.14(D) Health History/Physical Examination
- 807.14(E) Medical Summary for Prisoner Transfer/Health Inquiry of Received Prisoner
- 807.14(F) Tuberculosis Screening Form