

<p>GEORGIA DEPARTMENT OF CORRECTIONS</p> <p>Standard Operating Procedures</p>		
<p>Policy Name: Health Evaluation of Offenders in Segregation/Disciplinary Isolation</p>		
<p>Policy Number: 507.04.33</p>	<p>Effective Date: 4/4/2018</p>	<p>Page Number: 1 of 4</p>
<p>Authority: Commissioner</p>	<p>Originating Division: Health Services Division</p>	<p>Access Listing: Level II: Required Offender Access</p>

I. Introduction and Summary:

Health care staff will monitor the health of offenders who are placed in segregated housing. This procedure is applicable to all facilities that house state offenders to include private and county prisons.

II. Authority :

- A. Ga. Admin. Comp. R. & Regs. 125-3-2-.10(c);
- B. Georgia Department of Corrections (GDC) Standard Operating Procedures (SOPs): 209.03, Disciplinary Isolation, 209.01, Attachment 8, Use of Force and Restraint for Offender Control, 507.04.05, Charges to Offender Accounts for Health Care Provided, 507.04.27, Nursing Sick Call, 507.04.35, Examination Following Use of Force and Monitoring of Offenders in Restraints, and 507.04.43, Medication Distribution System;
- C. National Commission on Correctional Health Care (NCCHC): 2014 Adult Standards: P-E-09- Segregated Inmates;
- D. NCCHC 2015 Juvenile Standard: Y-E-09-Segregated Juveniles; and
- E. ACA Standard: 4-4400 (Mandatory).

III. Definitions: None.

IV. Statement of Policy and Applicable Procedures:

- A. Health assessment of offenders placed in segregation.
 - 1. Upon placement of an offender in segregation for any reason (pending disciplinary hearing, protective custody, etc.), the correctional officer will notify a licensed health care provider immediately.
 - 2. The licensed health care provider will retrieve the offender health record and review it for information regarding:
 - a. Medications that are administered via directly observed therapy (DOT);
 - b. Pending medical appointments or consultations;

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- c. Medical conditions that may require nursing assessments or treatments (e.g., dressing changes, blood glucose checks, etc.); and
 - d. Mental health conditions.
- 3. The nurse will make arrangements for all necessary health care to be delivered including:
 - a. Delivering medications that are administered DOT at the next scheduled medication administration;
 - b. Notifying security of the date and time of medical appointments in order for security to escort the offender to the medical clinic;
 - c. Scheduling nursing assessments or treatments as necessary; and
 - d. Notifying mental health staff.
- 4. When an offender is transferred to segregation, the health care personnel will be informed immediately and will provide an assessment and review. Each offender in segregation will receive a daily visit from a health care provider and have access to the health care system. These daily visits will be announced and recorded in the Isolation/Segregation logbook.
- 5. In the event of use of force, a complete health evaluation will be conducted in accordance with SOP 507.04.35, Examination Following Use of Force. The physical exam will not include a rectal exam or pelvic exam unless medically indicated.
- 6. If following review of the health record, the nurse believes that the offender's health will be adversely affected by continued placement in segregation, the nurse will notify the physician. If the physician concurs, security personnel will be notified and alternate arrangements made (e.g., placement in the infirmary).
- 7. Mental health personnel will evaluate offenders who have been receiving mental health treatment within 24 hours after being placed in isolation with

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documentation of the encounter in the mental health section of the health record.

B. Medical Rounds in Segregation:

1. A licensed health care provider will make initial medical rounds of offenders placed in segregation within 24 hours of placement. At facilities without weekend medical coverage, rounds will be made the next working day.
2. A licensed health care provider will make daily rounds in segregation.
3. Upon arrival at the segregation unit, the health care provider will sign in the security logbook and his/her presence will be announced and recorded.
4. The health care provider will document rounds on the Segregation Record Review and Flow Sheet (P-30-0009-01). Health care personnel will also sign the security Segregation/Isolation Checklist.
5. After the offender is removed from Isolation/Segregation, the Segregation Record Review and Flow Sheet will be filed in the miscellaneous section of the health record.
6. A nurse practitioner, physician's assistant, or physician will make disciplinary isolation rounds at a minimum of once per week. These rounds will also be documented on the Segregation Record Review and Flow Sheet and the security Segregation/Isolation Checklist.

C. Access to Health Services in Segregation:

1. All offenders placed in Segregation will have the equivalent access to medical, dental and psychiatric services as offenders in general population.
2. All self-initiated sick call requests will be subject to a fee for service in accordance with SOP 507.04.05.
3. Requests for sick call will be made in writing utilizing the Health Services Request Form. Actual assessments will be documented in the medical record at sick call.

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4. Offenders with a medical complaint requiring assessment will be evaluated in an adequately equipped clinic in the immediate area or in the main clinic at the healthcare provider's discretion and with consideration of necessary security precautions. The health record will be present for all patient encounters.
5. If, in the opinion of the physician or designee, the offender's condition is deteriorating, the offender will be removed from Isolation/Segregation.

D. Medication Administration:

1. Offenders who are on the self-administration (SAM) program will continue the program unless, in the opinion of the health care provider and/or security, there is a contraindication to the offender having possession of such medication(s). Reasons for removing SAM medications from offenders in segregation include self-harm or destructive behavior.
2. Offenders not on SAM will receive medications delivered to the isolation area by appropriately trained personnel.

E. Discharge from Segregation:

1. When the offender is released from segregation, the correctional officer will notify the medical staff and the nurse will collect and file the pertinent documentation in the health record.
2. Medications to be self-administered will be returned to the appropriate offender, and those on routine pill call will return to normal procedures.

V. **Attachments:** None.

VI. **Record Retention of Forms Relevant to this Policy:** None.