



STATE OF WASHINGTON  
DEPARTMENT OF CORRECTIONS

APPLICABILITY  
**PRISON/WORK RELEASE/FIELD**

REVISION DATE  
4/14/21

PAGE NUMBER  
1 of 7

NUMBER  
**DOC 350.270**

# POLICY

TITLE  
**EXTRAORDINARY MEDICAL PLACEMENT**

## REVIEW/REVISION HISTORY:

Effective: 12/10/01  
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Revised: 12/13/10  
Revised: 4/14/21

## SUMMARY OF REVISION/REVIEW:


Major changes to include updated terminology throughout. Read carefully!

## APPROVED:

Signature on file

\_\_\_\_\_  
**STEPHEN SINCLAIR**, Secretary  
Department of Corrections

3/11/21  
\_\_\_\_\_  
Date Signed

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**REFERENCES:**


DOC 100.100 is hereby incorporated into this policy; [RCW 9.94A.728](#); DOC 280.500 Records Management of Official Offender Files; DOC 350.100 Earned Release Time; DOC 350.255 Registration Notification

**POLICY:**

- I. The Secretary may allow for the Extraordinary Medical Placement (EMP) of individuals under the Department’s jurisdiction in an alternative care setting to minimize health care costs and treatment to the State per RCW 9.94A.728.
- II. The Secretary has the authority to revoke an EMP at any time.
- III. The Department has established criteria and procedures to refer, screen, place, and monitor individuals who are eligible for EMP.

**DIRECTIVE:**


- I. Referral Initiation
  - A. The Assistant Secretary for Health Services will designate an EMP Coordinator to manage EMP referrals/cases in coordination with the Headquarters Classification Unit.
  - B. The incarcerated individual, health services leadership, or a community member may submit an EMP referral to the EMP Coordinator using DOC 14-148 Extraordinary Medical Placement Referral.
  - C. EMP may be considered when all of the following conditions exist:
    1. The individual has a medical condition that is serious enough to require costly care or treatment,
    2. Granting the EMP will result in a cost savings to the State,
    3. The individual poses a low risk to the community, and
    4. The individual is currently or expected to be physically/mentally incapacitated by the time EMP is referred to the Secretary, as determined by the Chief Medical Officer/designee.
  - D. EMP will not be considered:
    1. For individuals serving life without the possibility of parole,

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2. For individuals requesting out-of-state placement,
3. If the individual poses a high risk to the community, or
4. When there is an absence of resources in the community to provide necessary care for the individual, including funding, approved placement options, or a community/family sponsor.

## II. Screening


- A. The EMP Coordinator will ensure the following medical criteria are met or will be met by the time EMP is referred to the Secretary:
  1. The individual has been determined to be seriously ill and has an illness, disease, or other medical condition that is debilitating and/or incapacitating.
  2. The individual is physically/mentally incapacitated due to the medical condition, rendering the individual unable or unlikely to:
    - a. Engage in activities of daily living without assistance,
    - b. Perform gainful employment, and
    - c. Participate in criminal behavior.
  3. The individual requires costly care or treatment.
  4. There is adequate community support in Washington State to meet clinical and daily living needs, including a funding source.
- B. The EMP Coordinator will:
  1. Provide DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information to the incarcerated individual to complete.
  2. Collaborate with the appropriate tribal liaison, if applicable.
  3. Assign a facility health services employee/contract staff to complete an assessment of the individual's current medical condition, physical limitations, mental health needs, and prognosis using DOC 13-593 Physical Incapacitation Screening for Extraordinary Medical Placement.
    - a. Primary care practitioners may refer an individual who has mental health concerns to receive a mental health evaluation by a psychologist/psychiatrist based on the current diagnosis.

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- C. The Chief Medical Officer/designee will review pertinent medical records and EMP related materials to determine if the individual meets the medical criteria.
1. If the case does not meet the medical criteria, the EMP Coordinator will notify the referring person and incarcerated individual in writing.
  2. If the case meets medical criteria, the EMP Coordinator will forward the EMP referral to the Headquarters Community Screening Committee (HCSC) for review.

### III. Consideration

- A. The HCSC will review information provided by the EMP Coordinator and Clinical Nurse Specialist(s) regarding the individual's current medical condition/prognosis, proposed placement options, and input from the following:
1. Victim Services Program,
  2. Chief Medical Officer/designee,
  3. End of Sentence Review Committee,
  4. Law Enforcement Notification Program,
  5. Indeterminate Sentence Review Board (Board), if applicable, and
  6. Others as determined by the HCSC Chair.
- B. If the HCSC recommends conditional approval, the individual may not be approved for EMP until all conditions have been met.
1. The Health Services Manager will provide medical updates to the EMP Coordinator if the individual's condition changes.
  2. When the conditions have been met and the individual has an approved release plan, the EMP Coordinator will resubmit the case to the HCSC for final review if the individual still meets the EMP criteria.
- C. If the HCSC recommends approval, the HCSC Chair will forward the referral to the following for approval:
1. Assistant Secretary for Reentry
  2. Assistant Secretary for Community Corrections
  3. Deputy Directors for Prisons
  4. Deputy Secretary for Health Services
- D. Recommendations will be forwarded to the Secretary for final approval/denial.
- E. The case manager will notify the individual of the HCSC and/or Secretary's decision. The notification will be in writing if the EMP is denied.

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1. Subsequent requests will only be reviewed if medical criteria significantly changes, as documented in an updated DOC 13-593 Physical Incapacitation Screening for Extraordinary Medical Placement.

F. Signed copies of the Secretary’s approval letter and any placement stipulations will be forwarded to the:

1. End of Sentence Review Committee
2. Correctional Records Supervisor where the individual is housed
3. Assistant Secretary for Prisons/designee
4. Assistant Secretary for Reentry/designee
5. Assistant Secretary for Health Services/designee
6. Assistant Secretary for Community Corrections/designee
7. Case manager/Community Corrections Supervisor (CCS)/Field Administrator
8. Headquarters Classification Unit/Corrections Specialist 4
9. EMP Coordinator

#### IV. Placement

A. Placement stipulations will include:

1. Development of a community placement plan with recommendations for minimum number, frequency, and types of contacts.
2. Electronic monitoring at the Department’s expense, unless electronic monitoring equipment interferes with the function of medical equipment or results in loss of funding for medical care.
3. Other conditions deemed appropriate by the case manager.


B. Law enforcement will be notified per DOC 350.255 Registration Notification.

1. The case manager will ensure registration has been completed once the individual has been placed at the EMP residence.

C. The central file and health record will be transferred per DOC 280.500 Records Management of Official Offender Files.

D. The EMP Coordinator and case manager, in collaboration with the Nurse Desk and Classification and Case Management Administrator/designee, will monitor the individual’s medical condition and behavior in the community.


#### V. Compliance with Conditions and Revocation

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- A. If the individual is alleged to have violated EMP conditions, a hearing will be conducted and sanctions may be imposed.
  - 1. If revocation is recommended, the case manager will notify the EMP Coordinator and the Classification and Case Management Administrator/designee.
- B. If the individual's health condition improves, the EMP Coordinator will request a clinical review be conducted by the Nurse Desk. Revocation may be recommended based on the results.
- C. The Classification and Case Management Administrator/designee will submit a revocation letter to the Secretary for approval/denial. If revoked:
  - 1. Signed copies of the revocation letter and any placement stipulations will be forwarded to the following:
    - a. End of Sentence Review Committee
    - b. Victim Services Program
    - c. Correctional Records Supervisor at the receiving facility
    - d. Assistant Secretary for Prisons/designee
    - e. Assistant Secretary for Reentry/designee
    - f. Assistant Secretary for Health Services/designee
    - g. Assistant Secretary for Community Corrections/designee
    - h. Case manager/CCS/Field Administrator
    - i. EMP Coordinator
    - j. Headquarters Classification Unit/Corrections Specialist 4
  - 2. The case manager, EMP Coordinator, and Headquarters Classification Unit employees will arrange transportation to the receiving facility.

VI. Release/Death

- A. The central file will be audited before release per DOC 280.500 Records Management of Official Offender Files.
- B. Upon the individual's Earned Release Date:
  - 1. The case manager will verify the release plan and notify the EMP Coordinator and Classification and Case Management Administrator that the individual will be released from confinement.
  - 2. Earned Time will be updated per DOC 350.100 Earned Release Time.
- C. If the individual dies while on EMP status, the:

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1. Case manager will advise the following within 48 hours, excluding weekends and holidays:
  - a. Facility Correctional Records Supervisor
  - b. Regional Correctional Records Supervisor
  - c. Victim Services Program
  - d. Headquarters Classification Unit
  - e. EMP Coordinator
  
2. Regional Correctional Records Supervisor will ensure all legal notifications, electronic file updates, and other processing requirements are completed.

**DEFINITIONS:**

Words/terms appearing in this policy may be defined in the glossary section of the policy manual.

**ATTACHMENTS:**

None

**DOC FORMS:**

- DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information
- DOC 13-593 Physical Incapacitation Screening for Extraordinary Medical Placement
- DOC 14-148 Extraordinary Medical Placement Referral