



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
**PRISON/RAP/LINCOLN PARK WORK RELEASE
OFFENDER MANUAL**

REVISION DATE
8/25/14

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POLICY

TITLE
HEALTH SERVICES MANAGEMENT

REVIEW/REVISION HISTORY:

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SUMMARY OF REVISION/REVIEW:

- II.E. - Adjusted language throughout for clarification
- III.D.4. - Added agencies to confer with when establishing quality standards

APPROVED:

Signature on file

G. STEVEN HAMMOND, PhD, MD, MHA
Chief Medical Officer

6/26/14

Date Signed

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KEVIN BOVENKAMP,
Assistant Secretary for Health Services

7/1/14


Date Signed

Signature on file

BERNARD WARNER, Secretary
Department of Corrections

7/7/14

Date Signed

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REFERENCES:


DOC 100.100 is hereby incorporated into this policy; [RCW 43.70.130\(8\)](#); [RCW 72.10](#); [ACA 4-4348](#); [ACA 4-4359](#); [ACA 4-4361](#); [ACA 4-4380](#); [ACA 4-4381](#); [ACA 4-4382](#); [ACA 4-4391](#); [ACA 4-4392](#); [ACA 4-4408](#); [ACA 4-4410](#); [ACA 4-4411](#); [ACA 4-4412](#); [ACA 4-4422](#); [ACA 4-4423](#); [ACA 4-4424](#); [ACA 4-4426](#); [ACA 4-4427](#); [ACA 4C-17](#); [ACA 4C-18](#); DOC 410.430 Health Services During an Emergency; DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting; [DOC 530.100 Volunteer Program](#); [DOC 610.025 Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault](#); [DOC-DOH Health, Environmental, & Safety Standards](#); [Health Services Division Standard Operations and Procedure Manual](#); [Offender Health Plan](#); [Pharmaceutical Management and Formulary Manual](#); PREA Standards 115.21(c), 115.221(c), 115.282(d), 115.283(g), 115.82(d), and 115.83(g)

POLICY:

- I. Offenders will be provided health services per RCW 72.10 and in accordance with:
 - A. All applicable Department policies, and
 - B. The Health Services Division Standard Operations and Procedure Manual, including the Offender Health Plan and DOC-DOH Health, Environmental, & Safety Standards established under RCW 43.70.130(8).
 1. Medical and mental health services allowed under the Offender Health Plan related to sexual misconduct as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting will be provided at no cost to the offender.
- II. Each facility will have a Health Authority designated in writing with responsibility for facility medical, dental, mental health, and other health services programs and for the integration of these services. [4-4380]
- III. Clinical decisions are the sole province of the responsible health care practitioner and are not countermanded by non-clinicians. Potential conflicts between clinical decisions and administrative/security needs will be resolved jointly by the Superintendent/designee, Health Authority, and Facility Medical Director (FMD) and/or appropriate clinician. [4-4381]


DIRECTIVE:

- I. Health Services
 - A. The Health Services Division Standard Operations and Procedure Manual, approved by the Assistant Secretary for Health Services and Chief Medical Officer, includes the current operational procedures and standards that are


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expected practice for health services employees and contract staff. The Manual includes, but is not limited to:


1. Offender Health Plan,
 2. Department Clinical Protocols and Guidelines,
 3. DOC-DOH Health, Environmental, & Safety Standards,
 4. Pharmaceutical Management and Formulary Manual,
 5. Medication Incident Reporting Procedure, and
 6. Coordinated Quality Improvement Program (CQIP) Plan.
- B. The Offender Health Plan, approved by the Assistant Secretary for Health Services and Chief Medical Officer, defines the criteria and process for determining what health services the Department will provide to offenders.
1. Care Review Committees comprised of facility practitioners in each discipline will review for appropriateness proposed health services beyond those routinely authorized as medically necessary, and grant or deny authorization.
- C. [4-4361] Offenders will be provided an ongoing program of health education and wellness information.
1. Health education information provided during offender encounters will be documented in the offender health record.
 2. Current, relevant, and accurate health education materials will be made available to offenders as appropriate.
- II. Health Services Employee/Contract Staff Requirements
- A. [4-4382] [4C-17] Health services will be provided by qualified health services employees/contract staff whose duties and responsibilities are identified in written job descriptions approved by the Health Authority and located at the facility. [4C-18]
1. If offenders are treated by health services employees/contract staff other than a licensed provider, the service is provided pursuant to written standing or direct orders from providers authorized by law to give them.
- B. Each facility will have full-time (i.e., 40 hours a week), qualified health services providers.
- C. Health services employees/contract staff will comply with applicable state and federal licensure, certification, or registration requirements.

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- D. Licensed providers will report through their chain of command to the Health Authority. The FMD will oversee clinical care in collaboration with the Chief Medical Officer and Clinical Directors.
1. All providers who provide clinical care to offenders will participate in formal clinical oversight according to the facility and Health Services clinical oversight structure.
 - a. The provider assigned to provide clinical oversight for another provider is termed the clinical monitor.
- E. The Chief Medical Officer/designee will oversee a CQIP to ensure the quality and safety of clinical care provided by the Department.
1. Health services employees/contract staff are expected to participate in quality improvement activities under the CQIP.
 2. Licensed providers will be credentialed before hire, then subsequently per CQIP guidelines.
 3. Performance will be monitored on an ongoing basis per the CQIP guidelines to ensure safe and competent practice within applicable laws, regulations, Department policies, position descriptions, scope of training, and licensure.
 4. CQIP guidelines will include a procedure for cause specific peer review of performance.
 5. All full-time Department medical, psychiatric, and dental providers will participate regularly in a discipline appropriate Care Review Committee meeting, which will serve as ongoing external peer review. [4-4411]
- F. Employees and contract staff will refer all inquiries related to an offender's care from attorneys, family members and friends of offenders, legislators/legislative staff, news media, advocates, and others outside the Department to the Health Authority.
1. The Health Authority will respond or delegate response to the inquiry, and may consult with the provider, the provider's clinical monitor, and/or other health services employees/contract staff, up to and including the Assistant Secretary for Health Services.
 2. The Health Authority will report all inquiries from legislators/legislative staff to the Health Services Administrator.

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- a. All proposed responses to legislative inquiries will be routed through the Health Services Administrator to the Assistant Secretary for Health Services for review.
- G. Employees and contract staff will immediately report any tort claim or lawsuit against a Department provider or practitioner, or complaint against the license of a Department provider or practitioner, to the Health Authority, who will notify the Health Services Administrator.
1. When a tort claim, lawsuit, or complaint involves clinical care, it will be reviewed by the Chief Medical Officer/appropriate Clinical Director, FMD, and facility clinical discipline leader.
- H. Adequate space will be provided for administrative, direct care, professional, and clerical personnel. This space will include conference areas, a storage room for records, and toilet facilities. [4-4426]
- III. Management Level Responsibilities
- A. The Assistant Secretary for Health Services will have final responsibility and authority over Health Services operations, and will:
1. Develop a statewide Health Services mission statement.
 2. [4-4422] Develop and implement a strategic plan for the delivery of health services to eligible offenders per RCW 72.10.020.
 - a. The plan will be in accordance with the Department strategic plan, and will be reviewed annually and updated as needed.
 3. Establish measurable goals and objectives for Department Health Services.
 4. Be the administrative authority for Health Services policies and procedures.
 5. [4-4410] [4-4423] Approve a statewide multidisciplinary CQIP for the internal review and quality management of health services operations.
- B. The Chief Medical Officer will have final responsibility and authority over clinical care provided by Health Services, and will:
1. Establish standards for clinical supervision and competency-based training programs for clinicians.

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2. Provide oversight of clinical care provided through Department contracts or purchased services.
 3. Be the authority for the administration of the Offender Health Plan.
 4. Be the clinical authority over Health Services policies and procedures.
 5. Collaborate with the Assistant Secretary for Health Services to ensure that administrative functions and operations support appropriate clinical care.
 6. Delegate responsibility for oversight of the quality of clinical care to Clinical Directors and/or designated lead facility health care practitioners, as appropriate.
 7. Delegate in writing the physician responsible for final clinical judgments at the facility level when the Health Authority is not a physician. [4-4380]
- C. Health Services Administrators will implement the Health Services strategic plan directly and through supervision of the Health Authorities, and will:
1. Collaborate with the Clinical Directors and facility Health Authorities to ensure clinical and operational needs are appropriately managed at a local and statewide level.
 2. Coordinate clinical and operational support between facilities.
 - a. Arrangements normally occur between a smaller facility and a larger facility, but may apply statewide in the event of a pandemic or other crisis.
 3. Analyze health services staffing needs annually in collaboration with the Assistant Secretary for Health Services and the Budget Office to determine what types and numbers of positions are essential to perform the Department's Health Services mission and provide the defined scope of services. [4-4380] [4-4412]
 4. Administer operations in regions defined by the Assistant Secretary for Health Services.
- D. Clinical Directors will establish standards for the quality of clinical care within their respective disciplines, and will:
1. Review and update Health Services policies and procedures,
 2. Serve as expert resources for clinicians,
 3. Develop curriculum to meet continuing education requirements, and

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4. Confer with Health Services Administrators and facility Health Authorities on issues that may require reporting to the Examining Board of Psychology or to the Medical, Dental, Nursing Care, or Pharmacy Quality Assurance Commissions.
- E. Health Authorities will make decisions about the deployment of health resources and the day-to-day operations of the facility health services program, and will:
1. Develop a mission statement that defines the scope of the facility's health services which is consistent with the overall Health Services mission statement. [4-4380]
 2. Implement the Health Services Division Standard Operations and Procedure Manual. [4-4359] [4-4380]
 3. Implement the statewide goals and objectives at the facility.
 4. [4-4410] [4-4423] Implement a facility CQIP consistent with the Statewide CQIP. [4-4380]
 - a. The Health Authority will document findings, in compliance with the CQIP, and make necessary program changes based on the findings.
 5. [4-4380] Implement a system to meet the health services needs of offenders that is consistent with the strategic plan for the delivery of health services. The system will:
 - a. Be designed to provide appropriate, timely, and safe care of offenders by qualified personnel in sufficient numbers within available resources.
 - b. Include provisions for the coordination and continuity of care among multidisciplinary health care providers and across settings where care is provided, including coordination with custody personnel.
 6. Conduct regular reviews of policies, procedures, and programs related to offender health services, make revisions as needed to local procedures and programs, and recommend statewide revisions to the Assistant Secretary for Health Services/designee as needed. [4-4380] [4-4424]
 7. Report any condition that imposes a danger to personnel, security, or offender health and safety to the Superintendent, Health Services Administrator and, as appropriate, state or local Health Department.

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8. Meet with the Superintendent and/or Assistant Secretary for Health Services/designee at least quarterly, attend the facility Executive Management Team meetings, review Health Services Management Reports, and submit plans to address issues related to the operation of health services within the facility. [4-4408]
9. Ensure that an after-hours service plan is in place and coordinate the plan's operation with custody personnel.
10. Develop a written plan for 24 hour emergency medical, dental, and mental health services per DOC 410.430 Health Services During an Emergency.
11. Ensure the provision and maintenance of space, equipment, supplies, and materials for health services is consistent with Department policy and standards, and within available resources. [4-4427]
12. Arrange for a community facility with a forensic medical examiner to see offenders reporting sexual assault per DOC 610.025 Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault. [4-4348]
13. Provide timely and accurate data on facility services, personnel, and operations for inclusion in facility specific and Department wide statistical summaries and reports produced by Headquarters.
 - a. The Health Authority will ensure that employees and contract staff complete timely data entry and/or form submission to provide the following information for inclusion in a monthly report compiled as designated by the Assistant Secretary for Health Services:
 - 1) Use of health services by category,
 - 2) Referrals to specialists,
 - 3) Prescriptions written,
 - 4) Infirmary admissions, where applicable,
 - 5) X-ray tests completed,
 - 6) Hospital admissions,
 - 7) Serious injuries or illnesses,
 - 8) Deaths,
 - 9) Off-site transports, and
 - 10) Laboratory information from the vendor, when requested by the Assistant Secretary for Health Services/designee.
14. Work with the Training and Development Unit and the Superintendent to ensure:

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- a. Training on health services related issues and responding to health related situations is provided to correctional and health services employees/contract staff.
- b. All health services contract staff and volunteers, including part-time personnel, receive training on and adhere to the facility's security policies and procedures.

15. Annually verify state licensure, certification, or registration of health services employees/contract staff performing functions, tasks, or duties that require it. [4C-18]


F. FMDs will ensure that the clinical care delivered in their facilities is appropriate, and will:

1. Have final clinical judgment at the facility level, unless superseded by the Chief Medical Officer.
2. Ensure that clinical care provided by facility practitioners meets standards established by the Chief Medical Officer and is in accordance with the Offender Health Plan.
3. Collaborate with the Health Authority in administrative functions and operations that support appropriate clinical care.
4. Collaborate with facility clinical discipline leaders to ensure quality and appropriateness of care.

IV. Volunteers, Students, Interns, and Other Learners

A. [4-4391] The Health Authority will work with the facility's Volunteer Coordinator on selecting and training volunteers per DOC 530.100 Volunteer Program.

1. The Health Authority will approve a definition of tasks, responsibilities, supervision, and authority for each volunteer.
2. Volunteers may only perform duties consistent with their credentials and training.
3. Volunteers must attend any required orientation and sign DOC 03-435 Registered Volunteer Agreement, agreeing to abide by all policies and procedures, including those relating to the security and confidentiality of information.

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- B. [4-4392] Any students, interns, or residents delivering health services in the facility will work under direct employee supervision and only perform duties consistent with their training.
1. There will be a written agreement approved by the Health Services Contracts Manager between the Department and the institution with which the student/intern/resident is affiliated. The agreement will include:
 - a. Scope of work,
 - b. Length of agreement, and
 - c. A statement indicating the institution:
 - 1) Releases the Department from any liability arising from the student/intern/resident's assignment to a Department facility,
 - 2) Indemnifies and holds the Department harmless regarding such liability, and
 - 3) Agrees to provide the Department legal representation pertaining to such liability.
 2. There will be a written agreement signed by students and interns to abide by all facility policies and procedures, including those relating to the security and confidentiality of information.
 3. The Health Services Contracts Manager will oversee and monitor all trainee affiliations in Health Services, with assistance from the Health Authority/designee.
 4. The Health Authority/designee will arrange clearance and orientation.
- C. Other learners, including trainees and observers, will not deliver health services but will be under direct supervision and abide by all facility policies and procedures.

DEFINITIONS:

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

ATTACHMENTS:

None

DOC FORMS:

[DOC 03-435 Registered Volunteer Agreement](#)