

JAIL BULLETIN

Number 90

September, 1992

MEDICAL SERVICES - PART I

One of the most important aspects of jail management is medical and health care services, both routine and emergency. In the landmark case of Estelle v. Gamble (U.S. 97, S.Ct. 285 {1976}), the Supreme Court established the government's obligation to provide medical care to prisoners in jails and prisons, basing it on the eighth amendment to the Constitution. The Court said that "deliberate indifference" to the serious medical and health care needs of prisoners violated the eighth amendment's proscription against "cruel and unusual punishment."

It may not be easy to provide a full range of health care services due to budgetary constraints, difficulty in recruiting qualified personnel, difficulty in defining what is adequate health care, or community objections to "spoiling" inmates. However, you (along with county commissioners) can be personally liable for damages which result from lack of attention to medical needs. Therefore, in order to assist you in fulfilling your responsibilities, this overview of the key elements in a jail health care program is provided.

I. STANDARDS PROVIDE A FOUNDATION

Using national standards on provision of medical and health care in a jail is a good way to plan your health care delivery system. The major national standards in this regard are those of the National Commission of Correctional Health Care (NCCHC), a private, non-profit organization based in Chicago.

The NCCHC publishes a document entitled Standards for Health Services in Jails. These standards are the basis for NCCHC's program of accreditation of jails for their medical and health care services. This is a continuation of the accreditation program initiated by the American Medical Association (AMA) in the 1970's. Although the AMA no longer has a jail health care program accreditation program, they are represented on NCCHC's Board of Directors, along with more than two dozen other national organizations or associations.

Being accredited according to these national standards is one of the best ways to ensure that your medical and health care program is adequate. Among other benefits, accreditation helps reduce the likelihood of being found liable in the event of a lawsuit concerning health care services in your jails. But even if you are not specifically seeking accreditation, it is a good idea to use the standards as the basis for developing your jail medical and health care program.

The Jail Bulletin is a monthly feature of the Crime Commission Update. The Bulletin may be reproduced and used to supplement your jail staff in-service training program. The contents of the Jail Bulletin represent the views of the author(s) and do not necessarily reflect official views or policies of the Nebraska Crime Commission or the Nebraska Jail Standards Board.

II. MAJOR AREAS TO BE ADDRESSED

The following text describes each of the major areas covered in the NCCHC standards, providing a brief discussion of selected elements, or topics, under each major subject area.

If you want to develop a good, comprehensive medical and health care program in your jail, you should develop and adhere to policies and procedures for each of these elements.

A. Administration

Your policies and procedures should address issues relating to administration of your medical and health care program. These include:

- * **Indication of the responsible health authority:** Who is the responsible physician and health administrator or health agency representative responsible for health care services overall? Medical judgments should always be the final responsibility of a licensed physician. In many cases, this will be someone with whom the county contracts for provision of services.
- * **Medical autonomy:** Your policies should indicate that medical, mental health and dental judgments are made by responsible clinicians, rather than by jail administration or security staff.
- * **Administrative meetings and reports:** The key to success of a jail health care program is communication and cooperation among health care staff, jail administration, and correctional officers. You should plan to hold regularly-scheduled meetings between health care staff and jail administrative staff to discuss health care services.
- * **Sharing of information:** Your policies and procedures should indicate that the jail physician or his/her designee has access to information in the confinement records of inmates as such information is relevant to an inmate's health care. Also, there should be a procedure by which correctional staff members are kept informed of certain medical conditions of inmates, by health care staff.
- * **Consultation on special needs inmates:** There should be a provision for consultation between jail administration and medical staff prior to certain actions being taken regarding inmates diagnosed as having significant medical or psychiatric illnesses. Such consultation might address issues such as housing assignments, program participation, disciplinary measures, and admissions to or transfers from institutions. The purpose of this is to ensure maximum cooperation between custody personnel and health care providers.

B. Personnel

There are several issues regarding personnel which you should cover in your policies and procedures on the jail health care program. These include:

- * **Licensure:** Health care personnel who provide services to inmates should be licensed, certified or registered as required by state law.
- * **Job descriptions:** There should be written job descriptions that define the duties and responsibilities of the jails's health care personnel.

- * **Staffing levels:** There should be an adequate number of health care staff members of varying types (medical, dental, psychiatric) available to provide services to inmates. Naturally, staffing levels will depend on the level of health service provided at the jail.
- * **Training for health care providers:** A written plan should specify provision of both orientation and in-service training for health service personnel. There should be documentation of all such training.
- * **Training for correctional officers:** Correctional officers should be trained in such subjects as first aid; recognizing the need for emergency care in life-threatening situations; recognizing acute indications of certain chronic illnesses; and recognizing other chronic conditions, such as mental illnesses and developmental disabilities. You should have written policy specifying that such training will be given, the number of hours for the training, and so on. All such training must be well-documented.
- * **CPR training:** All health care providers and correctional officers should receive initial training and ongoing re-training in cardiopulmonary resuscitation (CPR). Such training must be documented.
- * **Medication administration training:** You should have policy and procedure governing the training of personnel who administer medications to inmates. Training should cover such issues as security matters; accountability for administering medications in a timely manner, as prescribed or ordered; and documenting medication administration.
- * **Food service workers:** Policy and procedure should require that all inmates and others working in food service are free from diarrhea, skin infections, and other illnesses which could be transmitted by food or materials. Workers should be monitored each day for health and cleanliness.
- * **Inmate workers:** Inmates should be prohibited from being used as health care workers. They may, however, perform such duties as cleaning the health services area, under supervision.

C. **Support Services**

There are also a variety of support services that must be available, and that must be guided by policies and procedures. These include:

- * **First aid kits:** First aid kits should be available in designated areas of your jail. The contents, number of kits, and locations should be approved by the responsible health authority. There should be a monthly inspection of all first aid kits, and they should be replenished as necessary.
- * **Equipment and supplies:** There should, of course, be adequate supplies and equipment for proper delivery of health care to inmates. Inventories should be maintained and checked weekly for items subject to abuse, such as needles and syringes.
- * **Hospital care:** You should have arrangements in-place for providing in-patient hospital care for medical and psychiatric illnesses, in licensed facilities. Your policies and procedures should indicate the names of such facilities and procedures for getting inmates transferred to hospitals.

D. Care and Treatment: Regular Services

Your policies and procedures should cover all key elements regarding provision of regular medical and health care services to inmates. These include:

- * **Receiving screening:** Receiving screening (or intake screening) is a key element in any jail health care program. Written policy and procedure should require that a screening is performed on all new inmates, as part of the booking process. Screening involves:
 - a. Observation of inmates for such problems as bodily deformities and ease of movement; condition of the skin; apparent behavior problems, including mental status and suicidal risk; and any apparent signs of trauma or injury, or illness.
 - b. Asking questions of inmates about current illnesses, health problems and conditions. These include such issues as:
 - medical, dental, or mental health problems;
 - possible communicable diseases;
 - medications being taken;
 - special health (including dietary) requirements;
 - use of alcohol and other drugs;
 - for women, current gynecological problems and pregnancy; and
 - other health problems.

This information is documented on a receiving screening form. The form should also include space for the screening officer to document any comments or observations.

Screening can be conducted by health care professionals or correctional staff members who have been trained in doing screenings.

The screening form might also include notation of the disposition of the inmate, such as immediate transfer to an appropriate health care facility, referral to a health care service later, or placement in general population.

If the screening indicates that a newly-admitted inmate seems to be too ill or injured to be safely accepted into custody, he or she should be sent to a hospital or emergency clinic to be seen and evaluated by a medical professional. The inmate should then only be accepted back into custody upon receipt of written medical clearance.

If the screening indicates that an inmate seems to have a serious mental health problem, is a suicide risk, or has a serious alcohol or drug abuse problem, it is a good idea to perform a more extensive follow-up screening of that inmate.

* **Access to treatment:** Policy and procedure should indicate that inmates be given information, both orally and in writing, about access to health care services in the jail. Generally, this can be done as part of the orientation of new inmates, during the time that they are told about the jail rules and other aspects of the jail operation.

*This issue of the Jail Bulletin was prepared by
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*“Small Jail Resource Manual”,
National Institute of Corrections
and Standards for Correctional Health Care,
National Commission on Correctional Health Care.*

QUIZ

Nebraska Jail Standards require that jail staff receive (18) hours of in-service training each year. The Jail Bulletin may be used to supplement in-service training if an officer studies the Bulletin, completes the quiz and this process is documented by the jail administrator for review during jail inspections.

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1. According to the National Commission on Correctional Health Care Standards, correctional staff and health care providers should receive initial and ongoing training in CPR.
_____ TRUE _____ FALSE
2. It is advisable to share inmate confinement records with health care providers and physicians because it contains relevant information.
_____ TRUE _____ FALSE
3. Which of the following is critical information to be gathered during receiving screening?
 - A. Current illnesses and medical conditions
 - B. Work history
 - C. Use of alcohol and drugs
 - D. Criminal history
 - E. A and C
 - F. All of the above
4. List four occasions when a physician's or health care provider's consultation can be valuable with special needs inmates.
 - A. _____
 - B. _____
 - C. _____
 - D. _____
5. According to the National Commission on Correctional Health Care, newly admitted inmates who seem ill or injured should be accepted into custody and offered medical attention at a later time.
_____ TRUE _____ FALSE
6. Support services that must be available for correctional officers and health care providers include:
 - A. Ambulance transportation
 - B. First aid kits
 - C. Hospital in-patient care
 - D. Health care equipment and supplies
 - E. All of the above
 - F. B, C and D

CREDIT: *One-half hour credit for Jail In-service Training Requirement.*

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