

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety
Prison

SECTION: Continuity of Patient Care

POLICY # CC-1

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SUBJECT: Continuity of Care

EFFECTIVE DATE: April 2014

SUPERCEDES DATE: April 2012

References

Related ACA, NCCHC Standards

4th Edition Standards for Adult Correctional
Institutions 2008 Edition P-D 02, P-E-12, P-E-13

PURPOSE

To assist in the acquisition of care during imprisonment and after release.

POLICY

The health care delivery system will ensure that a patient is provided continuity of care, primarily through the maintenance of an appropriate health record, which accompanies the patient wherever he or she goes. Continuity of care also requires that a patient not miss medication doses because of movement through the system. Management of each individual's health care will be the responsibility of the primary care physician assigned to each prison facility. The primary care physician will make use of administrative guidelines and nursing resources provided by the Adult Corrections Division.

PROCEDURE

I. INITIAL ENTRY INTO THE SYSTEM

When an offender enters the system, the initial health screening will be accomplished in accordance with policy A-1 Receiving Screening. The health care provider at the diagnostic center may order previous medical records and any indicated testing to ensure adequate care of the offender. When requesting medical records prior to incarceration from an outside facility the offender will sign a completed Authorization for Release of Medical information. The offender's outpatient or electronic health record will contain all relevant current and past medical history.

II. TRANSFERS WITHIN THE SYSTEM

A. Between Facilities.

The facility superintendent or administrator will establish written procedures to ensure that offender transferred between facilities have no health condition which precludes transfer. All appropriate medications will accompany the transferring offender. The mode of transportation of a sick or injured offender will be determined by the senior health care provider onsite.

If the offender has a health condition which requires medication en route, medications and instructions for treatment will be provided to the officer in charge of the vehicle if the offender is not allowed to self-medicate. All treatment instructions shall be prepared by the facility nurse currently caring for the patient.

If an offender is transferred from one vehicle to another vehicle while in route to his new assignment, the officer in charge of the releasing vehicle will ensure that the health record (if no electronic healthcare record is available), medications, and appropriate instructions are provided to the officer in charge of the gaining vehicle. This same information will be immediately brought to the attention of the officer in charge of the new facility of assignment. It will be the responsibility of this officer in charge to ensure that appropriate medical personnel are advised of these same medical constraints.

B. Between Facilities and Inpatient Facility's

Whenever a patient is transferred to an inpatient facility, the attending physician/designee will arrange for acceptance of the patient by the physician of the receiving inpatient facility. Consultation/Referral DC-767, or in the case of a mental health referral, a Notice of Referral to a Mental Health Facility DC-133R, will be completed and filed or scanned into the outpatient health record prior to the offender being transferred.

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When a patient is discharged from the prison inpatient facility, the Discharge Medications and Instruction Form Inpatient Setting (DC 834-E) will either accompany the offender or be completed and scanned into HERO. A discharge summary will either accompany the patient or be entered into the electronic healthcare record within one week of discharge.

C. Transfers for Medical Appointments

When medical appointments outside the assigned housing facility are necessary, the medical staff will inform the offender of the need for the appointment. The offender will sign a Patient Agreement Regarding Medical Appointment DC-765 in order to attend the appointment. The medical appointment will be scheduled after the offender has signed the agreement. The offender may refuse to keep the appointment within 72 hours after signing the DC-765 and the medical staff will cancel the appointment. Refusal by the offender to keep the appointment after 72 hours may result in disciplinary action. Offender will not be informed of the specific date, time and place of the appointment.

III. DISCHARGE FROM THE SYSTEM

Whenever an offender with a chronic health condition is discharged from the system, the offender will be instructed to report to a medical provider within his/her home community.

Facility Nurse Manager or designee will identify medically needy or medically unstable offender at least 90 days prior to the date of anticipated release. Nursing staff at the facility will monitor the release list for the facility weekly using OPUS on the Web (see HCPM Section CC-8). Nursing will refer releases for HIV positive clients Outreach staff.

The nurse at the facility will complete the Referral for Medical Aftercare Planning (DC-524A) outlining the medical needs of identified offender patients. Nursing staff initiating referrals are responsible for making all medical provider appointments prior to release. The nurse will confirm with the Social Worker the city and state in which the offender will reside upon release. The appointments will be documented for the Social Worker on page 2 of the DC-524A for inclusion in the MH 42, 43, 44 Aftercare Plan in OPUS. The original completed referral form will be routed to the MH social worker responsible for that facility within (3) three days of completion. A copy of the referral form will be filed in the medical record or scanned into the electronic healthcare record.

Offender receiving prescription medications will be given the unused portion of their filled prescriptions when they are released. To assure continuity of care, facility providers may write prescriptions for thirty day supplies of medications. Prescriptions will not be given for narcotics or PRN medications.

Prior to release, nursing will complete a Medical Discharge Instruction form (DC-524 B). A copy of this form will be provided to the offender at the time of release. The original completed discharge instruction form will be filed in the medical jacket or scanned into the electronic healthcare record.

IV. RELEASE OF OFFENDER TO LAW ENFORCEMENT AGENCIES

It is the policy of the DPS to promote continuity of medical care when offenders are transferred from the prison system into the custody of other law enforcement agencies. When offenders are scheduled for transfer into the custody of other law enforcement agencies, DPS staff should send a brief medical summary of the offender's condition and the balance of any prescription medications. Movement Record/ Transfer Out/In form (DC-387A) may be used to insure all information outlined in Procedures below is captured.

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A. PROCEDURES

1. When offenders are scheduled to be released to other law enforcement agencies, non-medical staff should notify the appropriate medical staff of the pending transfer as soon as possible.
2. The medical staff will review the offender's health record and determine if the offender has any medical conditions that will require follow-up treatment by the other agency. If there is any on-going disease process, the medical staff will complete a medical summary to be sent with the offender. This includes offender on medications, offender diagnosed with a chronic disease or those requiring medical treatment or follow-up while in the custody of the agency.
3. If the offender is on prescription medication, the medical staff will prepare the balance of the offender's current prescription to be sent with the offender. All medications will be sent in the original container. Staff should ensure a minimum seven day supply of all current medications are sent with the offender; or less, if that will complete the prescribed course of treatment. This includes all medications prescribed for the offender (controlled drugs, self medications, etc.).

B. MEDICATION/MEDICAL SUMMARY NOT SENT WITH THE OFFENDER

Occasionally offenders are picked up by law enforcement agencies without prior notice. In such cases, it is possible that a medical summary and medications may not be sent with the offender. As a result, the staff of the agency may call the medical staff at the facility from which the offender was released to obtain or verify medical information. In these situations, the Adult Prison medical staff should provide the appropriate information.

C. RELEASE OF MEDICAL INFORMATION

It is permissible to release medical information via telephone to other law enforcement agency staff using of the following procedure:

1. When contacted by law enforcement agency staff who are seeking medical information on a recently released offender, Adult Prison medical staff should:
 - a. Obtain the name of the agency.
 - b. Obtain the name of the person calling.
 - c. Obtain the telephone number of the agency.
 - d. Obtain the intended use of the information.
 - e. Inform the person calling that you will review the health record to obtain the requested information and will then return their call.
2. Confirm with custody staff that the offender was released to this agency.
3. Review the health record and obtain the requested information.
4. Verify that the telephone number is the number for the agency, and then return the call to the agency. Verify that the person who made the request is an employee of that agency. Once confirmed, the requested information may be shared with the appropriate staff of the receiving agency.

D. OFFENDER RELEASED WITHOUT PRESCRIBED MEDICATION

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Adult Prison medical staff should inform the law enforcement agency staff of the medications prescribed for the offender. The agency staff may obtain a seven day supply of medications from a local pharmacy and submit the invoice to the Division for reimbursement. Invoices should be sent to: N.C. Division of Prisons

Transportation Section
831 West Morgan Street
MSC 4260
Raleigh, North Carolina 27626-4260

If the offender is expected to be in the jail longer than seven days, with the approval of Health Services, the medical staff may authorize the purchase of a seven day supply from a local pharmacy and then mail (UPS) the offender's medication to the law enforcement agency.

This policy only applies to DPS offenders who are temporarily in the custody of the jail and who will be returning to the Division.

E. OFFENDER WHO RETURN FROM COUNTY JAILS OR LAW ENFORCEMENT AGENCIES WITHOUT MEDICATIONS

When offenders who are on prescription medications return from jail or other agencies without their prescribed medications, facility medical staff may use the starter dose packages or order enough medication from the local pharmacy to last until prescriptions can be refilled at Central Pharmacy.

Paula Y. Smith, M.D.

6/10/14

Paula Y. Smith, MD, Chief of Health Services Date

SOR: Social Work Director

Addendum:

[Form Mental Health Facility DC-133R](#)

[Form DC-387-A Movement Record/ Transfer Out/In form](#)

[Form DC-524- A Referral for Medical Aftercare Planning](#)

[Form DC-524- B Medical Discharge Instruction form](#)

[Form DC-765 Patient Agreement Regarding Medical Appointment](#)

[Form DC 834-E Discharge Medications and Instruction Form Inpatient Setting](#)