KANSAS DEPARTMENT OF CORRECTIONS

Kansas Department of Corrections	NTERNAL	SECTION NUMBER	PAGE NUMBER
	MANAGEMENT	10-1210	1 01 0
	POLICY AND	SUBJECT: PROGRAMS AND SERVICES: Health Care Personnel; Qualification, Roles and Responsibilities	
	Procedure		
Approved By: Ray Roberts		Original Date Issued:	10-15-15
		Replaces Version Issued:	N/A
Secretary of Corrections		CURRENT VERSION E	FFECTIVE: 10-15-15

APPLICABILITY:	_ ADULT Operations Only	_ JUVENILE Operations Only	X DEPARTMENT-WIDE
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POLICY STATEMENT

A comprehensive health care program shall be available to all offenders within the custody of the Kansas Department of Corrections to ensure that adequate health care is provided to offenders.

DEFINITIONS

<u>Comprehensive Health Care Program</u>: Services which provide for the physical and mental well-being of the offender population, to include medical and dental services, behavioral health services, nursing care, personal hygiene, dietary services, health education, and attention to environmental conditions.

<u>Contract Health Authority</u>: The Medical Director of the agency or organization responsible for the provision of health care services for the Kansas Department of Corrections.

<u>Delivery of Medication</u>: The provision of non-prescription and/or prescription medication to offenders in the prepackaged form and/or quantities as authorized/prescribed by the responsible physician and prepared by a pharmacist.

<u>Departmental Clinical Health Authority</u>: The physician Regional Medical Director of the agency or organization responsible for the provision of health care services for the KDOC. This position has full clinical autonomy and responsibility for clinical health care issues within the KDOC.

<u>Director of Health Care Services</u>: Acts as the administrative health authority for the Department. This position manages health care systems, directs the health care services model, and has final approval on all policies and procedures in the health care system.

<u>Facility Administrative Health Authority</u>: The Health Services Administrator responsible for the provision of health care services at a facility. The Health Services Administrator works under direction of the Regional Medical Director and the Regional Vice President or designee administratively.

<u>Facility Clinical Health Authority</u>: The site physician Medical Director responsible to the Regional Medical Director for all clinical matters and to the Health Services Administrator for all administrative matters.

<u>Facility Dental Director</u>: Responsible to the Regional Dental Director clinically and the Health Services Administrator administratively. Final dental judgment rests with the facility Dental Director.

<u>Facility Psychiatric Director</u>: Responsible to the Regional Psychiatric Director clinically and the Health Services Administrator administratively.

<u>Health Care Practitioner</u>: A person who has met the requirements of and is engaged in the practice of medicine, dentistry, or nursing.

Regional Psychiatric Director: Responsible for the clinical supervision of all facility psychiatrists. The Regional Psychiatrist is supervised clinically by the Regional Medical Director and administratively by the Regional Vice President and or his designee.

<u>Regional Dental Director</u>: Responsible for the clinical supervision of all facility dentists and dental health care personnel within the facilities. The Regional Dental Director is responsible to the Regional Medical Director and the Regional Vice President or designee administratively.

PROCEDURES

I. Administration of Health Care Program

- A. All health related services shall be conducted under the direction and supervision of the Regional Medical Director who acts as the Departmental Clinical Health Authority.
 - 1. The KDOC Director of Health Care Services serves as the Departmental Administrative Health Authority and shall develop a written staffing plan, which ensures that each facility has a designated clinical and administrative health authority and qualified medical, nursing, ancillary, dental, and behavioral health care staff, including consulting physicians.
 - a. The staffing plan shall provide staffing sufficient to allow offenders access to an adequate level of health care services consistent with contemporary standards of care and provisions of the contractual agreement.
 - All such personnel designated for offender health care shall be qualified health care personnel who meet the requirements for employment through the licensure, certification, or registration requirements or restrictions as established by appropriate State and Federal regulatory bodies.
- B. All treatment and care by personnel other than a physician, dentist, psychiatrist, psychologist, optometrist, podiatrist or other independent provider shall be performed according to written or direct orders signed by personnel authorized by statute to give such orders.
 - Nursing Clinical Guidelines, consistent with Kansas Nurse Practice Act (K.S.A. 65-1113[d]) and appropriate to the level of skill and preparation of nursing personnel who will implement the clinical guidelines, shall be established by the Regional Medical Director and Regional Psychiatric Director and approved by the KDOC Director of Heath Care Services.
- C. Health care personnel shall be subject to the same security regulations and requirements of the KDOC and the individual correctional facility as departmental personnel.

II. Statistical Report of Services Provided

- A. The health care services contractor shall insure that each facility collects monthly statistical data that accurately reflects all health services provided to offenders at each facility.
 - 1. The report shall include, but not be limited to:
 - a. Number of offenders receiving health services by category of care
 - b. Operative procedure;
 - c. Medication utilization;
 - d. Referrals to outside specialists;

- e. Emergency services;
- f. Dental procedures:
- g. Infectious and/or sexually transmitted disease, positive Human Immunodeficiency Virus (HIV) tests, Hepatitis, Gonorrhea, Chlamydia, Syphillis, tuberculosis infection of disease; and
- h. Deaths.
- B. The Health Services Administrator shall make the statistical report available to the warden/superintendent, and the KDOC Director of Health Care Services. Trends in the delivery of health care shall be discussed at monthly Medical Administrative Committee (MAC) meetings and include service volume, proportion of service types, incidence of certain illnesses, diseases, and injuries targeted for risk management. Statistical reports shall be considered to assess staffing needs, space and equipment needs, and facility comparisons.

III. Prohibited Practices

- A. The health contract staff, health authorities, or any health care personnel employed by the contracted health care service provider shall not participate in legally authorized executions or the training of KDOC staff in such procedures. The KDOC Secretary of Corrections shall establish agreements with a community health care provider to perform such procedures.
- B. The Health Services Administrator, Facility Medical Director or Director of Health Care Services or any health care personnel shall not participate in the collection of forensic information. The Regional Medical Director and Regional Vice President shall make arrangements with community health care providers to perform such procedures. Behavioral health staff hired specifically to perform forensic behavioral health evaluations shall not be in a treatment relationship with the offender.

IV. Director of Health Care Services (ACI-4-4380: 4-JCF-4C-34: NCCHC P-A-02. Y-A-02)

- A. The Secretary shall appoint a Director of Health Care Services (DHCS). The DHCS shall be designated by a contract with Kansas University Medical Center as approved by the Secretary and shall be the designated administrative health authority for the Department.
 - 1. The DHCS is responsible for the overall management of all health care services.
 - 2. The DHCS and Secretary shall appoint a Regional Vice President (RVP) hired by the contracted health services provider to manage the health services contract. The RVP is responsible for reporting to the DHCS and the contract health care provider organization.
 - The DHCS and Secretary shall approve a Regional Medical Director (RMD) as the department's clinical health authority. The RMD shall be hired through the contracted health services organization and shall report directly to the contractor's RVP and Corporate Medical Director.
- B. The Regional Medical Director shall be responsible for the clinical supervision of all Site Medical Directors, staff physicians, and all healthcare personnel within the facilities.
 - 1. Each facility shall have a designated facility health authority. The facility health authority shall be responsible to the RMD clinically and the RVP administratively.
 - 2. When the facility health authority is other than a physician, final clinical judgment shall be determined by a physician/medical director designated by the Regional Medical Director.
 - Each facility shall have a designated Site Medical Director. The Site Medical Director shall be responsible to the Regional Medical Director clinically and the Health Services Administrator administratively.

- C. The Regional Psychiatrist shall be responsible for the clinical supervision of all facility psychiatrists.
 - Each facility shall have a designated Facility Psychiatric Director. The Facility Psychiatric
 Director shall be responsible to the Regional Psychiatric Director clinically and the Health
 Services Administrator administratively.
- D. The Regional Dental Director shall be responsible for the clinical supervision of all facility dentists, and dental health care personnel within the facilities.
 - 1. Each facility shall have a designated Dental Director. The facility Dental Director shall be responsible to the Regional Dental Director clinically and the Health Services Administrator administratively.
 - 2. Final dental judgment rests with the Site Dental Director.

V. Professional Credentials and Malpractice Insurance (ACI 4-4382; 4-JCF-4C-53; NCCHC P-C-01, Y-C-01)

- A. Documents verifying the credentials of qualified health care personnel, including consulting physicians, shall be maintained in each health services unit.
 - Prior to granting approval for any qualified health care personnel to provide health services to offenders the facility health authority shall obtain verification of the licensure and status of every qualified health care personnel from the Kansas Board of Healing Arts and other regulatory bodies, including the Board of Nursing, the Dental Board, the Board of Pharmacy, and the Behavioral Sciences Regulatory Board.
- B. The Regional Medical Director, Site Medical Director and any other physician employed by the Department of Corrections shall:
 - 1. Be covered by required malpractice insurance; and,
 - 2. Have met Drug Enforcement Administration requirements for the prescription of controlled substances.

VI. Provision of Health Care Services (ACI 4-4380, 4-4382; NCCHC P-A-03, Y-A-03)

- A. The contracting Regional Vice President as approved by the Departmental Health Authority shall develop procedures, which ensure the provision of health care services, to include but not be limited to:
 - 1. Procedures which provide a system of continuity of care from the offender's admission to discharge from incarceration, including referral to community care, when indicated;
 - 2. Procedures for prescribing and following clinical orders, written and/or verbal;
 - 3. Procedures for the facility health authority or dentist to receive and evaluate requests/recommendations for orthoses and prosthetic devices and other aids to impairment, and criteria to determine when the health of the offender would be adversely affected absent the device or aid;
 - 4. Procedures for the development of Nursing Clinical Guidelines, to include the format used, the process incorporated to ensure each is annually reviewed, dated, and signed by the Director of Health Care Services, Regional Vice President, and Regional Medical Director; and,
 - 5. Procedures to determine and establish the frequency of periodic health assessments/examinations of offenders, consistent with IMPP 10-117D.

VII. Health Care Services Delivery (AC4-4381, 4-4392; 4-JCF-4C-56; NCCHC P-A-03, P-C-01)

- A. To the extent possible and consistent with security requirements, health care services shall be provided with consideration for privacy and preservation of the offenders' dignity.
- B. Health care services shall be carried out in a manner designed to encourage subsequent use of health services by offenders.
- C. All health care shall be directed by policy and procedure developed by the Regional Medical Director and approved by the Director of Health Care Services. Healthcare shall be performed by licensed healthcare professionals and other qualified licensed professionals authorized to give such orders.
 - 1. All decisions and actions regarding health care services including medical, behavioral health, and dental matters, which involve clinical judgments, are the sole province of the qualified health care personnel.
 - a. Physicians, psychiatrists and dentists shall have sole responsibilities for the prescribing of clinical orders.
 - 2. Advance Practice Registered Nurses (APRN's) and Physician Assistants (PA's) shall practice within the limits of applicable laws and regulations, and in accordance with direct or written order of their physician or dentist supervisors.
 - a. When the physician is off-site, nursing staff shall receive verbal orders for all necessary medical treatment, which are outside of authorized clinical guidelines.
 - 3. Students and interns shall function under direct staff supervision and shall limit their services to those commensurate with their professional training and experience.
 - a. The contract health services provider shall ensure there is a written agreement between the correctional facility and the educational facility that covers the scope of work, length of agreement, and any other legal or liability issues.
 - b. Students or interns shall sign an agreement to abide by all facility policies including those relating to the security and confidentiality of information.
- D. Corrections officers shall not be directly responsible for determining the need for health care services other than First Aid and CPR. Appropriately trained corrections officers may be utilized in the, observation of offender self-administration of medicine per IMPP 03-104D.
- E. Health judgments, including psychiatric and dental matters involving medical judgment, are the sole province of the physician and dentist respectively and are not compromised for security or any other reasons.
 - Procedures shall ensure communication and coordination between health care personnel and the warden/superintendent or designee in cases where security and control of the offender is an issue.

VIII. Health Care Staffing Standards (ACI 4-4412; 4-JCF-4C-35; NCCHC P-C-07, Y-C-07)

- A. Standards for staffing health services units shall be sufficient and of varying types to provide adequate and timely evaluation and treatment consistent with contemporary standards of care.
- B. The Director of Health Care Services in conjunction with the Regional Vice President and Regional Medical Director shall establish staffing patterns to accommodate acuity increases whenever necessary, and ensure adequate staffing levels are maintained.

IX. Continuing Education

A. Health care personnel who require continuing education for the maintenance of their credentials shall be provided continuing education per procedures established by the Regional Vice President and the Director of Health Care Services, in accordance with provisions of IMPP 03-104D. Such training shall be directly relevant to routine work performance.

X. Security Rules and Regulations

A. Health care personnel shall be subject to the same security regulations and requirements that apply to other employees of the facility. Training in these requirements shall be conducted at the time of initial employment and annually thereafter.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or offenders, or an independent duty owed by the Department of Corrections to employees, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

None.

REFERENCES

K.S.A. 65-113(d) IMPP 03-104D, 10-117D ACI 4-4380, 4-4381, 4-4382, 4-4392,4-4412, JCF 4-JCF-4C-34, 4-JCF-4C-35, 4-JCF-4C-53, 4-JCF-4C-56 NCCHC P-A-02, P-A-03, P-C-01, P-C-07, Y-A-02, Y-A-03, Y-C-01, Y-C-07

ATTACHMENTS

None.