



**STATE OF MONTANA
DEPARTMENT OF CORRECTIONS
POLICY DIRECTIVE**

Policy No. DOC 4.5.5	Subject: CLINICAL SERVICES POLICIES AND PROCEDURES	
Chapter 4: FACILITY/PROGRAM SERVICES		Page 1 of 2
Section 5: Clinical Services		Effective Date: Oct. 1, 1997
Department Director Signature: /s/ Brian Gootkin		Revised: 4/19/2021
Medical Director Signature: /s/ Dr. Paul Rees		
Clinical Services Division Administrator Signature: /s/ Connie Winner		

I. POLICY

The Department of Corrections facility health care units will ensure a health care manual and current Department clinical services policies and facility clinical services procedures, either hard copy or digital, are maintained and readily available within their units.

II. APPLICABILITY

All secure facilities Department of Corrections owned and contracted, as specified in contract.

III. DEFINITIONS

Clinical Services Division Administrator – The administrator responsible for overseeing the Clinical Services Division and is the designated Responsible Health Authority for the Department.

Designated Health Authority – Regardless of local title, the individual at the facility or program level who is responsible for health services, as designated by the Responsible Health Authority.

Health Care Staff – Includes qualified health care professionals and non-licensed health care staff (e.g., medical records staff, health care aides) responsible for offender health care administration and treatment.

Qualified Health Care Professionals – Physicians, physician assistants, nurses, nurse practitioners, dentists, mental health professionals and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for offenders, including contracted or fee-for-service professionals.

IV. DEPARTMENT DIRECTIVES

A. Health Care Manual Contents

1. Each facility health care manual will contain, at a minimum, the following:
 - a. department policies and procedures that address each of the National Commission on Correctional Health Care Standards; and
 - b. other relevant Department policies and/or facility procedures.

B. Health Care Manual Access

1. The manual, either hard copy or digital, will be retained in all health care unit administrative areas.

2. All health care staff will have access to the manual.

C. Health Care Manual Training

1. The designated health authority, in cooperation with the facility administrator, will familiarize all new health care staff with the manual.
2. The designated health authority will retain documentation verifying that each health care provider has read the manual.

D. Responsibilities

1. All health care staff will:
 - a. read the manual and sign a document to verify that fact;
 - b. follow established policy and procedures as instructed;
 - c. identify and inform supervisory staff of policy and procedures that may be inconsistent or inappropriate; and
 - d. review policies and procedures upon new implementations or revisions.
2. Qualified health care professionals will assume full responsibility for their own clinical judgment while providing care within their scope of practice.
3. The designated health authority, or designee, will:
 - a. ensure that each health care staff is familiar with the clinical section of the manual;
 - b. provide for in-service training programs to address new or revised policy and procedures;
 - c. review health care policies and procedures at least annually with the responsible physician;
 - d. documentation of this review will include signatures and the date of the review;
 - e. ensure other policies do not conflict with the health care policies; and
 - f. maintain documentation of all in-service training programs.
4. The designated mental health authority will;
 - a. review mental health policies and procedures at least annually;
 - b. review will be documented with the mental health authority signature, and if necessary, the mental health clinician, and the date of the review; and
 - c. ensure other policies do not conflict with the mental health policies.

V. CLOSING

Questions concerning this policy should be directed to the Department medical director or Clinical Services Division administrator.

VI. REFERENCES

- A. *ACA Standards for Juvenile Correctional Facilities, 4th Edition*
- B. *4-4415; ACA Standards for Adult Correctional Institutions, 4th Edition*
- C. *P-A-05; National Commission on Correctional Health Care Standards for Health Services in Prisons, 2018*
- D. *Y-A-05; National Commission on Correctional Health Care Standards for Health Services in*

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Juvenile Detention and Confinement Facilities, 2015

E. MH-A-05; National Commission on Correctional Health Care Standards for Mental Health Services in Correctional Facilities, 2015

VII. ATTACHMENTS

None