



**DEPARTMENT OF CORRECTIONS
PROBATION AND PAROLE DIVISION
OPERATIONAL PROCEDURE**

Procedure No.: PPD 4.5.2000	Subject: EMERGENCY MEDICAL SERVICES
Reference: ACCD 1.1.600 RD; DOC 4.5.20; 53-1-203, MCA	Page 1 of 3
Effective Date: 09/10/15	Revision Dates:
Signature / Title: /s/ Kevin Olson, Probation and Parole Division Administrator	

This procedure is referenced as *ACCD 4.5.201 Urgent and Emergent Preauthorization Process in Section 3.J. Offender Management; Healthcare, in the following contracts: Alternatives, Inc., Butte Prerelease, Gallatin County Reentry Program, Helena Prerelease, Passages, Connections Corrections Program (CCP), Elkhorn, Nexus, START, and WATCH Contract.*

I. PURPOSE:

The Probation and Parole Division's facilities will follow established procedures to ensure emergency medical services are available to offenders.

II. DEFINITIONS:

Contract Manager – The Department's employee who acts as the liaison for services and monitors the contractual agreements between the Department and PPD contract treatment facilities and prerelease centers.

CSD-Clinical Services Division – The division that oversees all medical, mental health, dental and vision services for all offenders in the custody of the Department in secure and contracted facilities.

Emergency Care – Health care for an acute illness or an unexpected health need that cannot be deferred until the next scheduled sick call or clinic.

Health Care Providers – Licensed health care providers (e.g., physicians, nurses, psychiatrists, dentists, and mental health practitioners), including contracted or fee-for-service providers, responsible for offender health care and treatment.

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

PPD-Probation and Parole Division – The Division oversees the Probation & Parole regional offices, interstate transfers, and the facilities providing assessments and sanctions, training, prerelease, and treatment services.

III. PROCEDURES:

A. GENERAL REQUIREMENTS

1. Emergency care may be provided without prior authorization, however, CSD and appropriate Administrator or Contract Manager will be contacted as soon as possible to furnish full information regarding the nature of the illness, the type of treatment to be provided, and the estimated length of treatment. CSD will review each case individually.

Procedure No.: 4.5.2000	Chapter: Facility/Program Services	Page 2 of 3
Subject: EMERGENCY MEDICAL SERVICES		

2. All health care staff will be trained in cardiopulmonary resuscitation (CPR) and emergency medical response procedures.
3. Facility staff trained in CPR, the recognition of medical emergencies, the location of first response emergency equipment, and procedures to obtain emergency assistance will be present on each shift.
4. First aid supplies and equipment will be available at all times in facility. Supplies will be replenished after use and equipment must comply with local and state standards.
5. If staff initiates resuscitation measures, they will continue to resuscitate until the offender's care is transferred to emergency personnel, or a physician makes a finding of death.

B. EMERGENCY RESPONSE

1. Staff will immediately respond to emergencies with appropriate equipment.
2. Trained personnel must assess the offender's health status, stabilize the offender's condition, and contact emergency medical services.
3. Health care providers must respond to medical emergencies in accordance with standard operating procedures.

C. EMERGENCY SERVICES

1. Health care staff will have a written plan for accessing emergency services that includes the following:
 - a. emergency patient transport from the facility;
 - b. use of an emergency medical vehicle;
 - c. use of one or more designated hospital emergency departments or other appropriate facilities;
 - d. emergency on-call physician, mental health, and dental services when the emergency health care facility is not located nearby;
 - e. security procedures for the immediate transfer of patients for emergency medical care; and
 - f. notification of the facility administrator/director.
2. When necessary to transport the offender to an off-site health care facility, the following guidelines will determine the appropriate mode of transportation:
 - a. an ambulance will be used if the emergency is life threatening or deemed necessary by attending staff (the Department will initially accept responsibility for an offender's ambulance transport to avoid delayed medical treatment; however, CSD will review all ambulance transports for appropriateness); or
 - b. the facility will transport or arrange transportation for ambulatory offenders in non-emergent situations.
3. Facility staff will provide, when available, written information to emergency medical technicians that includes:
 - a. history of the emergency condition;
 - b. treatment given;
 - c. present status;
 - d. allergies; and
 - e. other pertinent information.

Procedure No.: 4.5.2000	Chapter: Facility/Program Services	Page 3 of 3
Subject: EMERGENCY MEDICAL SERVICES		

4. Health care staff will regularly check the availability of emergency supplies.
5. Health care staff will record the date and time of the emergency response in the offender's health record, include assessment and treatment information, and sign the document.
6. Medical cases requiring ambulance transport, and cases of self-mutilation resulting in transport to an emergency room or urgent care, have been classified as Priority II incidents. Priority II incidents are reported through the established facility internal chain of command process and to the appropriate Administrator or Contract Manager. Designated authority within the chain of command or the Contract Manager will analyze the incident and may reclassify it accordingly. See *ACCD 1.1.600 RD Priority Incident Reporting*.

IV. CLOSING:

Questions concerning this procedure should be directed to CSD.

V. FORMS:

Medical Preauthorization Request Form
MT DOC Dental Services Request Form