



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

Policy No. DOC 4.5.13	Subject: <b>INTAKE/RECEIVING HEALTH CARE SCREEN</b>
Chapter 4: FACILITY/PROGRAM SERVICES	Page 1 of 4 and Attachment
Section 5: Clinical Services	Effective Date: July 15, 1999
Department Director Signature: /s/ Reginald D. Michael	Revised: 08/11/2017
Medical Director Signature: /s/ Paul Rees, M.D.	
Clinical Services Division Administrator Signature: /s/ Connie Winner	

**I. POLICY**

The Department of Corrections health care unit or designated staff will perform a receiving screen on all offenders upon arrival at the facility to immediately identify and address urgent health care needs.

**II. APPLICABILITY**

All secure care facilities Department-owned and contracted, as specified in contract.

**III. DEFINITIONS**

Health Care – The sum of all actions, preventive and therapeutic, taken for the physical and mental well-being of a population. Health care includes medical, dental, mental health, nutrition, and other ancillary services, as well as maintaining clean and safe environment conditions.

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.

Managed Care RN – Coordinates the health care delivery system by cost containment efforts and utilization review for all offenders residing in Department facilities.

Medical Clearance – Clinical assessment of physical and mental status before an individual is admitted into a facility. The clearance may come from an on-site qualified health care professional or through an off-site qualified health care professional and is documented in writing.

Mental Health Clearance – A clinical assessment of mental status before an individual is classified and assigned a housing unit that is documented in writing.

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.

Qualified Mental Health Professionals – Psychiatrists, psychologists, psychiatric social workers, psychiatric nurses and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for the mental health needs of offenders

Responsible Health Authority – The individual that arranges for all levels of health care and assures quality, accessible and timely health services for offenders. The individual is appointed by the Department director and reports directly to the director on matters of health care.

#### IV. DEPARTMENT DIRECTIVES

##### A. Receiving Screen

1. All facilities will provide offenders with an initial health care screen as soon as possible upon their arrival to:
  - a. ensure medical and mental health clearance as the offender enters the facility;
  - b. identify and meet urgent health care needs;
  - c. identify and meet any known or easily identifiable health care needs that require medical or mental health intervention before the offender is scheduled for an initial health assessment in accordance with *DOC Policy 4.5.14 Offender Health Assessments*;
  - d. identify and isolate offenders who appear to have contagious conditions; and
  - e. identify and provide observation of offenders who have emergent mental health conditions.
2. Facility health care providers will draw an IGRA Blood Test (ex. QuantiFeron\_TBGold test) from all offenders as recommended by the Center for Disease Control and current national standards. If the IGRA Blood Testing is not available, the facility health care providers will administer a two-step Tuberculin skin test to all offenders.
3. All facilities will complete an intake/receiving health care screen form approved by the responsible health authority and use the screen results to determine immediate placement needs and appropriate referrals. The form will include receiving personnel observations of the offender.
4. Correctional staff members may be trained to conduct an abbreviated intake interview to alert health care professionals to any urgent health care needs.
  - a. When health and mental health-trained correctional staff perform the receiving screen, they will be trained by qualified health care professionals in early recognition of medical or mental health conditions requiring clinical attention.
  - b. Training will be based on curriculum approved by the responsible health authority or designee and contain instructions on completing the receiving screen form and when to contact qualified health care professionals to determine appropriate dispositions of offenders.
5. All female offenders will be offered a pregnancy test and will be referred to a qualified health care professional for testing within 48 hours of admission.
6. All female offenders who report opiate use will immediately be offered a pregnancy test.
7. All offenders will be offered tests for communicable diseases, such as syphilis, unless there is documentation from the health department that the prevalence rate does not warrant it.
8. All offenders will be offered testing for sexually transmitted diseases within 48 hours of admission.
9. Prescribed medications will be reviewed and appropriately maintained within the scope of the approved formulary according to the offender's medication schedule before admission or alternate treatment will be initiated and documented.

**Subject: INTAKE/RECEIVING HEALTH CARE SCREEN**

10. The receiving screen form will include the disposition of the offender and the date, time signature and title of the person completing the form.
11. The mental health portion of the screening form must be reviewed by a qualified mental health professional on the next shift they are present.
12. Health care staff will regularly monitor receiving screens to determine the safety and effectiveness of this process.

**B. Referrals**

1. The facility will initiate referrals to address immediate health and mental health concerns in the following circumstances:
  - a. If offenders are unconscious, semiconscious, bleeding, or in need of urgent medical or mental health attention beyond the scope of what the facility can provide, referrals will be made to a community hospital for immediate treatment. Admission or return to the facility is predicated upon written medical clearance from the hospital and approval from the Clinical Services Division managed care RN.
  - b. If offenders have a chronic disease, chronic mental illness, symptoms of communicable disease or illness, or are on chronic care medications (e.g., insulin); referrals will be made to a physician or mid-level practitioner.
  - c. When offenders arrive with medications, unless the offender has received a physical prior to admission, referrals will be made to a physician or mid-level practitioner for a medication review. Offenders taking psychiatric medications will be referred to a psychiatrist for a psychiatric medication review.
  - d. If an offender reports suicidal ideation during the health care screen, a referral will be made for an urgent mental health evaluation by a qualified mental health professional and suicide precautions should be considered.
  - e. If the offender demonstrates difficulties on the mental status examination that are significant enough to cause immediate concern for the offender's well-being or ability to function, initiate an urgent referral to a qualified mental health professional.

**C. Intake/Receiving Screen Form**

1. Facilities will use the standardized [Intake/Receiving Screen Form](#) approved by the responsible health authority and ensure that they are filed in the offender's health record.
2. All facilities will establish routing procedures for the Intake/Receiving Screen form.
3. Youth immunization status will be completed on a separate form.

**V. CLOSING**

Questions concerning this policy should be directed to the Clinical Services Division administrator.

**VI. REFERENCES**

- A. 53-21-102(9)(a), MCA
- B. *ACA Standards for Juvenile Correctional Facilities, 2003*
- C. *P-E-02; National Commission on Correctional Health Care Standards for Health Services in Prisons, 2014*

Subject: **INTAKE/RECEIVING HEALTH CARE SCREEN**

- D. MH-E-02; National Commission on Correctional Health Care Standards for Mental Health Services in Correctional Facilities, 2015*
- E. Y-E-02; National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities, 2015*
- F. DOC Policy 4.5.14 Offender Health Assessments*

## **VII. ATTACHMENT**

[Intake/Receiving Screen Form](#)