



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

Policy No. DOC 4.5.19	Subject: NURSING ASSESSMENT PROTOCOLS
Chapter 4: FACILITY/PROGRAM SERVICES	Page 1 of 2
Section 5: Clinical Services	Effective Date: Jan. 1, 1998
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 facility health care unit nursing protocols will guide offender health assessments, initiate treatment of identified conditions, and ensure appropriate referral to a physician, dentist, or mid-level practitioner for further evaluation and treatment.

II. APPLICABILITY

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

III. DEFINITIONS

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.

Nursing Assessment Protocols – Written instructions or guidelines outlining the steps to be taken in evaluating an offender’s health status and providing interventions.

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.

Responsible Physician – A designated person who holds a physician's license pursuant to 37-3-102 and 37-3-303, MCA who has the final authority at a given facility regarding clinical issues.

Standing Orders – Written orders that specify the same treatment and prescription drug course for each patient suspected of a given condition.

IV. DEPARTMENT DIRECTIVES

A. General Requirements

1. Facility health care units will establish nursing protocols that outline the steps for the assessment, treatment, and monitoring of specific offender health conditions.
2. The designated health authority or designee in collaboration with the responsible physician will be responsible for the annual review and development of the nursing protocols.
3. Only a licensed clinician may initiate prescription medication treatment by a written or

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verbal order. Prescription medications used for life threatening situations will require subsequent clinician verbal or written order.

4. The designated health authority in collaboration with the responsible physician may allow the use of standing orders but only for preventative medications (e.g., immunizations), and for ailments that are typically treated with over-the-counter medications.
5. The facility designated health authority will ensure that nurses are trained in protocol use and will document the following:
 - a. evidence that all new nursing staff is trained;
 - b. demonstration of knowledge and skills;
 - c. evidence of annual review of skills; and
 - d. evidence of retraining when new protocols are introduced or existing protocols are revised.

V. CLOSING

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

VI. REFERENCES

- A. *Title 37 Chapter 8, MCA*
- B. *P-E-11; National Commission on Correctional Health Care Standards for Health Services in Prisons, 2014*
- C. *Y-E-11; National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities, 2015*

VII. ATTACHMENTS

None