I. DIVISION DIRECTIVE:

The Adult Community Corrections Division’s employees, programs and facilities will follow established procedures to provide an infection control program that assists in maintaining a safe and healthy environment for offenders and staff.

II. DEFINITIONS:

ACCĐ—Adult Community Corrections Division Program/Facility – The Division includes the Adult Interstate Bureau; the Probation and Parole Bureau; and the Facilities Program Bureau which includes the Missoula Assessment and Sanction Center (MASC), Treasure State Correctional Training Center (TSCTC), and the contracted facilities of Prerelease Centers (PRC), Sanction Treatment Assessment Revocation & Transition (START), Warm Springs Addiction Treatment and Change Program (WATCh), Connections Corrections Program (CCP), Passages Alcohol and Drug Treatment (Passages ADT), Passages Assessment Sanction & Revocation Center (Passages ASRC), NEXUS Correctional Treatment Center (NEXUS), and Elkhorn Treatment Center (Elkhorn).

CSD—Clinical Services Division – The Department’s division that administers health care services for adult and youth offenders.

Department – The Montana Department of Corrections.

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 Unit – Provides the full complement of facility health care services that range from infirmary care to sick call, and include appropriate referrals.

Inmate Worker – An inmate, who, upon approval of the Adult Community Corrections Division, a screening committee and/or the Board of Pardons and Parole, has received a work assignment at an ACCD facility, resides at the facility and is compensated for the work. As a general rule, inmate workers are from secure facilities, but exceptions may occur and would require ACCD approval.

Medical Director – The physician designated by the CSD Administrator to oversee the health care of all adult and youth offenders under Department jurisdiction.

Prerelease Facility Contract Manager – The Department’s employee who acts as the liaison for services and monitors the contractual agreements between the Department and prerelease centers: Alpha House PRC, Gallatin County Re-entry Program, Butte PRC, Great Falls Transition Center, Helena PRC, and Missoula PRC.
Treatment Facility Contract Manager – The Department’s employee who acts as the liaison for services and monitors the contractual agreement between the Department and ACCD contract treatment facilities: START, CCP, Passages, Elkhorn, Nexus, and WATCH.

Universal Precautions – All human blood or blood products and other potentially infectious body fluids are treated as if known to be infectious for Human Immunodeficiency Virus, Hepatitis B Virus, Hepatitis C Virus, and other blood-borne pathogens.

### III. PROCEDURES:

#### A. ACCD Staff

ACCD staff will follow the procedures established in DOC Policy 1.3.35, Bloodborne Pathogens Exposure Control Plan.

#### B. Probation & Parole Bureau

Probation & Parole Bureau staff will follow the procedures established in P&P 230-1 Infectious Diseases and Exposure Control Plan.

#### C. Treasure State Correctional Training Center (TSCTC)

TSCTC staff will follow the procedures established in CTC Operational Procedure 4.5.11, Infection Control Program.

#### D. Other ACCD Facilities

1. **General Requirements**
   a. ACCD facilities must make provisions for a medical evaluation of any employee or offender suspected of a communicable disease and/or exposure to potentially infectious bacteria.
   b. ACCD facility health care units will provide prompt care and treatment to offenders presenting or afflicted with acute or chronic infectious or communicable diseases in accordance with the American Public Health Association guidelines and must provide information about disease transmission and methods to prevent future infection of self or others.
   c. When medical staff orders an offender to be isolated for an infectious disease, health care providers will follow the CDC publication “Guidelines for the Prevention and Control of Nosocomial Infections.”
   d. Illnesses medically advised reported or suspected illness from a highly contagious disease is a Priority I incident and must be reported pursuant to ACCD 1.1.600 RD Priority Incident Reporting:
      i. All facilities: Immediate notification to MSP Command Post at 406-846-6059;
         1) MASC: Immediate notification also to MASC Administrator who notifies ACCD Administrator;
         2) Other facilities: Notification within one (1) hour also to Prerelease Facility or Treatment Facility Contract Manager (Contract Manager);
      ii. Initial written reports will be faxed to MSP Command Post, Investigations Bureau and the ACCD Administrator/Contract Manager within one (1) hour of notification.
e. Inmate Workers (includes residents participating in Passages’ Culinary Arts Program):
i. Upon admission, inmate workers will be screened during their initial intake health screening for acute infectious diseases according to \textit{ACCD 4.5.1400 Alt-Secure Offender Intake Health Screenings} or \textit{ACCD 4.5.1401 Prerelease Resident Intake Health Screenings} and in accordance with National Commission on Correctional Health Care Standards. Each health care unit will monitor infectious and communicable diseases in an effort to minimize their occurrence in accordance with state and federal guidelines.

ii. Following initial health screenings:
1) Tuberculosis (TB) testing for inmate workers will be done annually by the facility’s health care unit. The Department is responsible for the cost of testing for inmate workers.
2) Flu vaccines will be offered to inmate workers identified as at risk for complications from the flu. The Department is responsible for the cost of the vaccine for inmate workers.

f. Offenders in ACCD Alt-Secure Facilities:
i. Upon admission, alt-secure offenders will be screened during their initial intake health screening for acute infectious diseases according to \textit{ACCD 4.5.1400 Alt-Secure Offender Intake Health Screenings} and in accordance with National Commission on Correctional Health Care Standards. Each health care unit will monitor infectious and communicable diseases in an effort to minimize their occurrence in accordance with state and federal guidelines.

ii. Following initial health screenings:
1) Tuberculosis (TB) testing for alt-secure offenders will be done annually by the facility’s health care provider. The Department is responsible for the cost of testing for alt-secure offenders.
2) Offer Hepatitis C and HIV/AIDS counseling, education and testing to alt-secure offenders upon their request.
3) Alt-secure offenders who request the Hepatitis C and/or HIV/AIDS testing must receive pre-authorization from the Health Services Bureau. The Department is responsible for the costs of this testing.

g. PRC Residents:
i. Upon admission, PRC residents will be screened during their initial intake health screening for acute infectious diseases according to \textit{ACCD 4.5.1401 Prerelease Resident Intake Health Screenings} and in accordance with National Commission on Correctional Health Care Standards. Each health care unit will monitor infectious and communicable diseases in an effort to minimize their occurrence in accordance with state and federal guidelines.

ii. Following initial health screenings: Residents may receive TB, Hepatitis C and HIV/AIDS testing, and flu vaccines, through a community provider and residents are responsible for the cost.

h. Health care units and providers will:
i. use universal precautions when providing offender health care;
ii. use personal protective equipment that must be readily available for routine and emergency care;
iii. have procedures in place to account for equipment; and
iv. provide annual in-service training on its use.
i. Employees of ACCD contracted facilities must follow TB and Hepatitis B immunization guidelines established by the CDC.

2. Prevention
   a. An integral component of the infection control program is prevention of the occurrence and spread of infectious and communicable diseases.
   b. Health care providers will:
      i. offer ongoing education on communicable disease prevention to facility staff and offenders as part of the health education program;
      ii. maintain essential ongoing communication with the respective county health department and the Montana Department of Public Health and Human Services;
      iii. instruct correctional employees on measures to prevent disease transmission, including additional precautions that may be necessary during transport, hospital supervision, or while in an infirmary; and
      iv. assure that continuity of care is established with appropriate community resources prior to releasing offenders who are diagnosed with communicable or infectious disease.

3. Bodily Fluid Exposure/Medical Sharps and Biohazardous Waste/Decontamination
   a. Facilities will handle and treat bodily fluid exposure incidents according to facility exposure control plans and ensure employees use universal precautions when providing offender care in accordance with DOC 1.3.35 Bloodborne Pathogens Exposure Control Plan.
   b. ACCD facility health care units will dispose of medical sharps and biohazardous waste using methods and materials that are in compliance with Environmental Protection Agency standards.
   c. Each facility will arrange for proper waste disposal based on resources available in their respective communities.
   d. Each ACCD facility will ensure that contaminated non-disposable medical equipment is decontaminated using appropriate methods as specified by the manufacturer and OSHA guidelines.

IV. CLOSING:

Questions concerning this procedure will be directed to the Regional Administrator, Facility Administrator or CSD.

V. FORMS:

DOC 1.1.6 Attachment Incident Reporting Form