I. DIVISION DIRECTIVE:

Adult Community Corrections Division facilities will follow established procedures to provide a sick call system through which offenders may be evaluated and treated in a timely manner for non-emergent illness or injury.

II. DEFINITIONS:

ACCD–Adult Community Corrections Division Program/Facility – The Division includes the Adult Interstate Bureau, Missoula Assessment and Sanction Center (MASC), Treasure State Correctional Training Center (TSCTC), and the Probation and Parole Bureau which provides the following programs and facilities: Day Reporting Program (DRP), Intensive Supervision Programs (ISP), and Enhanced Supervision Program (ESP). Contract facilities include 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).

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.

Sick Call – The evaluation and treatment of an ambulatory patient by a qualified health care provider in a clinical setting, either on or off-site.

Triage – A process of sorting and classifying offender health requests to prioritize health care needs and determine place of service delivery.

III. PROCEDURES:

A. General Requirements

1. All facilities will ensure that a registered nurse, or a licensed practical nurse with RN oversight, will evaluate and triage each offender health care request and sick call will be provided by appropriate medical staff.

2. Clinical symptoms will be evaluated by nurse to determine the next level of health care.

3. Offenders must submit health care requests in accordance with facility procedures.
4. Offender health care records will be available at the time of the sick call contact.

5. When a nursing assessment is required, the offender will be seen individually in a designated area to ensure privacy and confidentiality.

6. If indicated after nursing assessment, offenders requiring care beyond nursing will be referred to mid-level or higher care within seven (7) calendar days of the nursing assessment when referred by nursing or a mid-level practitioner, or when an offender reports to sick call more than twice with the same complaint and has not seen a physician.
   a. Treatment facility offenders will be seen within seven (7) calendar days of the referral for primary care physician services.
   b. Prerelease center staff will advise and encourage offenders to seek additional medical care.
   c. Inmate workers – see ACCD 5.1.101 Inmate Workers.

7. When an offender request does not require a nursing assessment, health care providers must respond to the request in writing.

8. Health care providers will evaluate and document each offender health complaint in the offender’s medical file. Staff will provide the offender with a verbal explanation of the assessment findings, any further recommended treatment or evaluation, and any patient education relevant to the health complaint.

IV. CLOSING:

Questions concerning this procedure should be directed to the Health Services Bureau Chief.