



POLICY DIRECTIVE

Policy:	DOC 4.5.05 HEALTH SERVICES POLICIES AND PROCEDURES
Effective Date:	10/01/1997 Page 1 of 2
Revision Date(s):	04/19/2021; 04/24/2026
Department Director Signature:	/s/ Eric Strauss, Director
Medical Director Signature:	/s/ Dr. Paul Rees, MD
Health Services Bureau Chief Signature:	/s/ Cynthia McGillis-Hiner, RN, MSN

I. POLICY

Department facility health care units will ensure a health care manual and current Department health services policies and facility clinical services procedures, either hard copy or digital, are maintained and readily available within their units.

II. APPLICABILITY

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

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

A. Health Care Manual Contents

1. Each facility health care manual will contain, at a minimum, the following:
 - a. Department policies and procedures that address applicable National Commission on Correctional Health Care Standards; and
 - b. other relevant Department policies and/or facility procedures.

B. Health Care Manual Access

1. The manual, either hard copy or digital, will be retained in all health care unit administrative areas.
2. All health care staff will have access to the manual.

C. Health Care Manual Training

1. The designated health authority, in cooperation with the facility administrator, will familiarize all new health care staff with the manual.
2. The designated health authority will retain documentation verifying that each health care provider has read the manual.

D. Responsibilities

1. All health care staff will:
 - a. read the manual and sign a document to verify that fact;
 - b. follow established policies and procedures as instructed;
 - c. identify and inform supervisory staff of policies and procedures that may be inconsistent or inappropriate; and
 - d. review policies and procedures upon new implementations or revisions.
2. Qualified Health Care Professionals will assume full responsibility for their own clinical judgment while providing care within their scope of practice.
3. The designated health authority or designee will:
 - a. ensure that each health care staff is familiar with the clinical section of the manual;
 - b. provide for in-service training programs to address new or revised policy and procedures;
 - c. review health care policies and procedures at least annually with the responsible physician;
 - 1) documentation of this review will include signatures and the date of the review;
 - d. ensure other policies do not conflict with the health care policies; and
 - e. maintain documentation of all in-service training programs.
4. The designated mental health authority will:
 - a. review mental health policies and procedures at least annually;
 - 1) review will be documented with the mental health authority signature, and if necessary, the mental health clinician signature, and the date of the review; and
 - b. ensure other policies do not conflict with the mental health policies.

V. CLOSING

Questions about this policy should be directed to the Department Medical Director or Health Services Bureau Chief.

VI. REFERENCES

- A. *ACA Standards for Juvenile Correctional Facilities, 5th Edition*
- B. *4-4415; ACA Standards for Adult Correctional Institutions, 5th Edition*
- C. *P-A-05; National Commission on Correctional Health Care Standards for Health Services in Prisons, 2018*
- D. *Y-A-05; National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities, 2022*
- E. *MH-A-05; National Commission on Correctional Health Care Standards for Mental Health Services in Correctional Facilities, 2015*