



POLICY DIRECTIVE

Policy:	DOC 4.5.19 NURSING ASSESSMENT PROTOCOLS
Effective Date:	01/01/1998 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 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 facilities Department-owned and contracted, as specified in contract.

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

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 that comply with the state practice act.
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 that are consistent with national clinical practice guidelines.
3. Only a licensed clinician may initiate prescription medication treatment by a written or 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 preventive medications (for example, immunizations), and for ailments that are typically treated with over-the-counter medications.
5. Approved assessment protocols pertaining to emergency life-threatening conditions (for example, chest pain, shortness of breath) may contain prescription medications and must include immediate communication with a provider.

6. 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 about this policy should be directed to the Health Services Bureau Chief.

VI. REFERENCES

- A. *Title 37, Chapter 8, MCA*
- B. *P-E-08, National Commission on Correctional Health Care Standards for Health Services in Prisons, 2018*
- C. *Y-E-108; National Commission on Correctional Health Care Standards for Health Services in Juvenile Detention and Confinement Facilities, 2022*