



POLICY DIRECTIVE

Policy:	DOC 4.5.40 TRANSFER SCREENING
Effective Date:	04/19/2021 Page 1 of 2
Revision Date(s):	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

The Department ensures offenders who are transferred within the same correctional system continue to receive appropriate health and mental health services.

II. APPLICABILITY

All Department secure care facilities.

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

A. General Requirements

1. Qualified health care professionals (QHCPs) review each transferred offender's health record or summary to ensure continuity of care.
 - a. If the offender's health summary indicates that the offender is under treatment for a medical, dental, mental health, or substance abuse problem and has been diagnosed with a chronic medical problem or is taking chronic care medications, additional health information may be requested from the sending facility.
 - b. Mental health staff review each transferred offender's mental health record or summary within 12 hours of arrival to ensure continuity of care; the review must be documented in the offender's record.
2. When transferred from an intake facility, offenders who do not have initial medical, dental, or mental health assessments are to be evaluated at the receiving facility in a timely manner.
3. When a seriously mentally ill offender is transferred, mental health staff at the sending facility will inform mental health staff at the receiving facility of any condition that requires special and immediate attention (for example, special medication and treatment needs).
4. Documentation in the health record will demonstrate continuity of health care.

B. Juvenile Transfer Screening

1. QHCPs review each incoming juvenile's health record or summary within 12 hours of arrival and:
 - a. continuity of care is initiated;
 - b. initial assessments (health, mental health, dental) are identified;
 - c. required assessments are completed in a timely manner; and
 - d. health information from the sending facility is captured in the juvenile's current health record.
2. The receiving screening for transfers takes place upon the juvenile's arrival at the facility.
3. When the health record or a health information transfer summary comes with the juvenile and is immediately available to the screening staff, a face-to-face transfer screening encounter focuses on observation of appearance and behavior and problems the juvenile recounts that occurred during the transfer process.
4. When the health record or a health information transfer summary is not available to the screening staff, a face-to-face health screening encounter at minimum includes:
 - a. identification of acute and chronic health conditions;
 - b. evaluation of suicidal risks;
 - c. review of any allergies;
 - d. observation of appearance and behavior; and
 - e. problems the juvenile recounts that occurred during the transfer process.
5. Documentation of the transfer screening is dated and timed immediately upon completion and includes the signature and title of the person completing the process.

V. CLOSING

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

VI. REFERENCES

- A. *P-E-03; National Commission on Correctional Health Services, 2018*
- B. *MH-E-03; National Commission on Mental Health Services in Correctional Facilities, 2015*
- C. *Y-E-03; National Commission on Correctional Health Services in Juvenile Detention and Confinement Facilities, 2015*
- D. *DOC 4.5.22 Offender Health Care Continuity*