

Sixth District Department of Correctional Services POLICY	Issue Date 01/10/20	Effective Date 02/01/20	Policy Number 2513-20
Subject HEALTH SERVICES		Review Month December	Author 0111 (SBL)
Rescinds 1313-02; 1413-02; 1513-95	References Iowa Code 904.906; 905.15; WR/OWI-34; IAC 201-43;44;47		

POLICY:

It is the policy of the Sixth Judicial District to ensure offenders receive necessary health services while under its supervision. The cost of services in the community is the responsibility of the offender unless services are approved and received at the University of Iowa Hospitals and Clinics (UIHC).

PROCEDURE:

1. The facility ensures first aid equipment which meets State Department of Corrections and Red Cross standards is available at all times at the facility for medical emergencies.
2. An inventory control list of first aid equipment and supplies is maintained and checked at least quarterly to ensure such materials are sufficient at all times.
3. The Residential Supervisor ensures all personnel of the facility have had training in emergency first aid procedures and Adult CPR.
4. A person under the supervision of a district department, who assaults another person as defined in section 708.1, by biting, casting bodily fluids, or acting in a manner that results in the exchange of bodily fluids, shall submit to withdrawal a bodily specimen for testing. In the event the person to be tested refuses to submit to the withdrawal of the bodily specimen, the Director of the Judicial District shall make application to the court for an order compelling the person to submit to the withdrawal pursuant to Iowa Code section 905.15.
5. For residents suspected of having a communicable disease, staff assures that prompt medical care is provided. If a communicable disease is confirmed by medical personnel and temporary alternative placement is recommended, the Residential Division Manager or designee arranges for such until medical clearance is obtained from medical personnel which allow return of the resident to the facility.
6. Staff makes a reasonable effort to assist residents who have legitimate special medical needs (special diet, heart disease, etc.) when they become aware of same.
7. Residents are required to notify facility staff in advance of all medical appointments.

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PROCEDURE: (continued)

8. In emergency situations, the resident receives the necessary treatment and notifies the staff as soon as possible thereafter.
9. While residents are encouraged to seek all necessary medical assistance, unnecessary treatment or medication is avoided.
10. When residents are injured at the facility, an Accident Report (2513A) is completed by a witnessing or attending Residential Officer as soon as practical.
11. For Work Release/OWI residents the following apply:
 - A. When medical treatment is received at State expense, residents may be expected to sign a release of information form in order to allow access to pertinent medical records relative to diagnosis, treatment, prognosis, etc.
 - B. When surgery or expensive treatment becomes necessary (non-emergency), the resident is furloughed to the University of Iowa Hospitals and Clinics, Iowa City, or transferred to the parent security institution pursuant to Offender Transport Policy (105) based on information provided by the attending physician. The Residential Division Manager ensures approval is obtained from staff at the Community Placement Office.
 - C. If transferred to University of Iowa Hospitals and Clinics, staff may contact the "Prison Guard" (356-2456) for assistance in monitoring the furlough, general information, etc.
 - D. Following an emergency placement, staff notifies the Community Placement Office as soon as practical.
 - E. Offenders with ongoing medical or mental health issues that hinder participation or progress in the WR/OWI program may be considered for removal or disqualified from the RCF program.
12. Residents referred to an authorized medical treatment center or to University of Iowa Hospitals and Clinics are furloughed for such treatment. The furlough specifies a limit of fourteen (14) days, to terminate following release from the hospital and transfer back to the facility. If treatment is not completed within fourteen (14) days, new furlough papers are issued.
13. Staff ensures sufficient accountability is provided while the resident is on medical furlough.
14. In the event of the death of a resident, notification is made to the Community Placement Office, the District Director or Residential Division Manager, and the listed next-of-kin.

BY ORDER OF:

Bruce Vander Sanden, District Director