

POLICY 4.01 - UNION COUNTY DETENTION CENTER MEDICAL PLAN

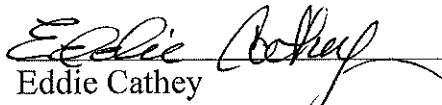
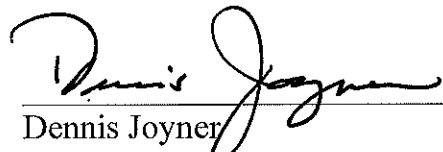
Union County Detention Center

Medical Plan

2022

Revised: October 8th, 2021

Approved By:


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Sheriff of Union County
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Union County Health Director

Richard Helms
Chairman of Union County Board of Commissioners

Adopted on _____ by the Union County Board of Commissioners and certifies adoption,

Lynn West
Clerk to the Union County Board of Commissioners

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UNION COUNTY DETENTION CENTER

MEDICAL PLAN

2022

NUMBER: 4.01

RESCINDS: 1

SUBJECT: MEDICAL PLAN FOR THE UNION COUNTY DETENTION CENTER
(Revision, October 8th, 2021; Approved, November 1st, 2021)

*Union County Detention Center Medical Plan 2021-2022*REVISED: October 8th, 2021ADOPTED: December 1st, 2021

APPLICABLE STANDARDS: (Prepared in conformity with N.C. General Statute 153A-225(a) and N.C. Administrative Code IDA NCAC 14J .1001)

4.01: Written Medical Plan Required

POLICY STATEMENT:

The Sheriff of Union County (Sheriff) will develop a written medical plan that is designed to protect the health and welfare of Detention Center inmates (N.C. General Statute 153A-225(a) and N.C. Administrative Code IDA NCAC 14J .1001). The plan, at a minimum, will address serious medical, mental health, intellectual disabled, dental, and substance abuse needs of inmates. The plan will be reviewed annually by the Sheriff, Detention Center Provider and Union County Health Director, and adopted by the Union County Board of Commissioners.

SPECIFIC PROCEDURES: Content of Detention Center Medical Plan

The Detention Center Medical Plan shall address, at a minimum, the following medical services:

- A. Health screening of inmates during intake;
- B. Routine medical care;
- C. Health Care Request;
- D. Non-emergency services;
- E. Emergency services;
- F. Mental health services;
- G. Substance abuse services;
- H. Dental care;
- I. Administration, administering and controlling medications;
- J. Handling suicidal inmates;
- K. Chronic illnesses and communicable diseases;
- L. Confidentiality of medical records;
- M. Privacy during medical examinations and conferences and
- N. Medical co-payments, if authorized.

The plan must provide inmates a daily opportunity to communicate their health care complaints to a health professional or officer and require that qualified health personnel be available to evaluate the medical needs of inmates.

The medical plan will prohibit inmates from performing medical functions at the Detention Center and require detention officers inform inmates about access to health care services.

Involvement of County Health Director and Board of Commissioners

Pursuant to G.S. 153A-225(a) and IDA NCAC 14J .1001(e), and as directed by the Sheriff, the Detention Center Administrator will be responsible for the annual review of the facility Medical

Plan. Each policy and procedure of the plan will be reviewed annually and approved by the Sheriff and Health Director indicating review and approval of the plan.

After the Union County Health Director has approved the plan, the Sheriff will request the Union County Board of Commissioners adopt the Detention Center Medical Plan during a formal Commissioner's meeting.

A copy of the facility's Medical Plan will be posted in the control room and in other conspicuous areas to afford officers access to the plan.

4.01-A: Health Screening of Inmates during Intake

POLICY STATEMENT:

It is the policy of the Union County Detention Center to conduct a health screening on every inmate during the intake process to determine if the inmate is in need of emergency medical care, or mental health services.

DEFINITIONS:

Screenings of Inmates: A procedure for each newly-admitted inmate that combines visual observation of the inmate with an interview to obtain information about the inmate prior to the inmate's placement in the general population of the jail. See N.C. Jail Code 10A NCAC 14J .1002

SPECIFIC PROCEDURES:

Health Screening of newly admitted Inmates during intake

All inmates will be screened during the booking process by Union County Detention Center staff utilizing an intake health screening form. The intake health screening form will be periodically reviewed and amended as necessary, for use by the Sheriff and the Union County Inmate Health Services Team (IHST). Specific questions are to be asked of each inmate concerning their past and current medical need(s) and the answers will be recorded on the form by the intake officer. The intake officer will also make visual observations of the inmate and record the inmate's apparent physical and mental condition. The inmate and the intake officer will sign the form acknowledging that the answers were those given by the inmate. A copy of the form will be placed in the inmate's medical file, reviewed by an IHST member, and followed up as deemed appropriate by an IHST member.

Inmates needing immediate Medical Care

If during the health screening process, an inmate is deemed to need medical or mental health care, the arresting officer will be required to transport the inmate to the local area hospital. The arrestee may be refused admittance to the Union County Detention Center by Detention Center Staff and/or an IHST member based on the arrestee's medical or mental health status.

If the arrestee has refused medical treatment at the local hospital emergency department, this will be documented by a hospital staff member. The arrestee will only be accepted by the Detention Center Staff with discharge instructions, or documentation that the inmate was discharged Against Medical Advice ("AMA"). The IHST staff member may still refuse the arrestee if their current medical needs are beyond the capabilities of the Detention Center Health Services. After admittance, the IHST will determine if the arrestee should be placed on Special Watch. In the event that emergency medical care is needed, EMS will be contacted following the procedures set forth in the Emergency Medical section of the Union County Detention Center Medical Plan.

In the event the Detention Center Health Services are unable to meet the medical needs of an inmate who has left the hospital AMA, the IHST member will contact the Jail Administrator or and Assistant Jail Administrator immediately to consider safekeeping options.

4.01-B: Qualified Medical Personnel

POLICY STATEMENT:

Qualified medical personnel will be available to evaluate inmate medical needs at all times.

DEFINITIONS:

Medical personnel: A person or persons who provide medical care to inmates. This definition shall include all persons who provide medical or health care except for care provided for mental health needs. The list of persons included in this definition include but are not limited to: Physicians, Physician Assistants, Nurse Practitioners, Registered Nurses, and Licensed Practical Nurses.

Mental health personnel: A person or persons who provide mental health services to inmates. The list of persons included in this definition include but are not limited to: Psychiatrists, Psychologists, Registered Nurses, and Social Workers.

Medical Provider: A health care professional who can issue directives and write prescriptions to address inmate health needs. The list of persons included in this definition include but are not limited to: Physicians, Physician Assistants, and Nurse Practitioners.

SPECIFIC PROCEDURES:

24-Hours availability of Healthcare Personnel

The IHST will provide 24-hour medical, emergency, dental and mental health screenings at the Union County Detention Center. A Medical Provider will be available for consultation 24 hours a day and will come to the facility as needed. A licensed Nurse (LPN or RN) will be on-duty at the Detention Center or on call 24 hours a day to provide medical care.

Inmates prohibited from performing Medical Functions

Inmates will not perform any function in or for the Medical Unit in the Detention Center, regardless of any license or certification the inmate may hold as per N.C. Jail Code 10A NCAC 14J .1001 (d).

Health Care Professional's Qualifications

Health professionals who are hired under contract to provide medical services to the Union County Detention Center must have and maintain an active NC Professional License and be competent to provide those services.

Exclusive responsibility for Medical Decisions

Health professionals who provide medical services at the Union County Detention Center will have the exclusive responsibility for medical decisions and services rendered to inmates in the custody of the Sheriff. At the same time, however, they will be subject to the same security requirements and procedures as detention officers and civilian staff.

4.01-C: Medical Care / Health Care Request

POLICY STATEMENT:

It is the policy of Union County Detention Center to provide each inmate with regular access to routine health care services from a qualified provider to screen, refer, and provide basic treatment for ongoing or emerging health care needs. Inmates will be provided an opportunity each day to communicate their medical needs to a health care professional or detention officer.

DEFINITION:

Health Care Request is an organized method of receiving and being notified of, inmate health needs through a regularly scheduled triage session. It provides inmates with the opportunity to report a medical illness or other health need, and to receive diagnosis or treatment to alleviate the condition, if reasonably possible.

Routine care: Medical care that includes physical examinations, health screenings, diagnostic testing, and treatment for an illness, a medical condition, or a mental health condition that is not an emergency medical need

Serious medical need: Any medical need that has been diagnosed by health professional as mandating treatment or one that is so obvious that even a lay person would easily recognize the necessity for a medical professional's attention. *See Iko v. Shreve*, 535 F.3d 225, 241 (4th Cir. 2008)

SPECIFIC PROCEDURES:**Inmates will be informed how to obtain Medical Care**

The Intake Officer, during the booking process, will inform the inmate of the procedure for obtaining medical care.

Officers will respond to Healthcare Needs

Officers will respond to and take appropriate action when an inmate makes a health care request, including dental needs and mental health needs. If an IHST is unavailable to respond, the officer receiving the request will inform the Shift Supervisor of the reported medical need. The Shift Supervisor will evaluate the circumstances, notify the medical supervisor, and if necessary, make immediate arrangements for addressing the medical need as provided in the medical plan.

Inmates allowed to communicate daily Healthcare Needs

Inmates will be provided an opportunity to communicate their health care needs daily verbally or by submitting a Health Care Request as per N.C. Jail Code 10A NCAC 14J .1001 (c) according to the following procedure:

- A. An inmate can submit a Health Care Request inquiry via KIOSK. If an inmate is illiterate or unable to submit a request, an officer will submit the request on the inmate's behalf.

- B. IHST will evaluate and respond to each Health Care Request. IHST will respond to Health Care Requests on a daily basis.
- C. All medical actions taken, will be documented and signed by a member of the ISHT. Health Care Requests and medical treatment will be kept and filed in the inmate's medical record.

IHST management of Health Care Request

IHST will conduct Health Care Requests on a regular and established schedule and will:

- A. Evaluate the inmate to the extent required to ascertain the nature of the need;
- B. Provide appropriate treatment consistent with standing or verbal orders issued by the appropriate Medical Provider;
- C. Schedule the inmate for further examination or treatment by the appropriate Medical Provider;
- D. Cordiant care for the inmate to receive consultations and/or treatment as ordered by the Detention Center Medical Provider.

The Shift Supervisor will assign an officer to move inmates, as necessary, to facilitate Health Care Requests. The officer will be responsible for safety, security and for handling inmate supervision while the inmate is receiving treatment from the IHST.

Review of Medical Health Care Request

A Medical Provider will review Health Care Requests on a regular basis. Reviews may include:

- A. An examination of records.
- B. Evaluations and follow ups of the inmate, if necessary.
- C. Referrals made for routine schedule follow ups.

Detention Center Medical Provider and Specialists will be available

A Medical Provider will be available to respond to inmate medical needs referred by IHST and officers. Other Medical Providers or Specialists will be available as needed. All serious medical needs of inmates will be met.

Medical Restricted Diets

Inmates with medical, dietary needs will be placed on a restricted or special diet as ordered by the provider, to included food service meals and commissary food items.

Dental Care

Dental care will only be provided by the facility when the inmate is in need of emergency dental care and treatment or a dentist has diagnosed a serious medical need for dental care. This care and treatment will be by a licensed dentist, and will be limited to medically necessary tooth extractions.

4.01-D: Emergency Medical Care

POLICY STATEMENT:

It is the policy of the Union County Detention Center to provide emergency medical care for inmates that is consistent with community standards of health care. Medical emergencies and serious medical needs will be reported to IHST immediately. IHST will respond promptly to all such requests. Until IHST is available, officers will render basic first aid services and other assistance. Inmates will not be escorted to the Detention Center clinic without the expressed permission of on-duty IHST. Basic first aid kits will be available at various duty stations within the Detention Center.

DEFINITIONS:

Medical Emergency: Any medical, mental health, dental, acute illness, or an unexpected health need that cannot be deferred until the next scheduled health care request clinic.

Serious medical need: Any medical need that has been diagnosed by health professional as mandating treatment or one that is so obvious that even a lay person would easily recognize the necessity for a medical professional's attention. *See Iko v. Shreve*, 535 F.3d 225, 241 (4th Cir. 2008)

SPECIFIC PROCEDURES:

Emergency Medical Care

Officers will notify IHST if an inmate states he or she is experiencing medical difficulties, and is requesting immediate medical care, or the officer observes the inmate to have a serious medical need. The Officer will inform IHST of the inmate's symptoms or complaint. IHST will evaluate the needs of the inmate and determine if the inmate should be seen immediately or enter a Health Care Request.

Officers are required to administer first aid (including CPR) without unnecessary delay.

Health Services Staff (IHST) will evaluate medical needs

IHST will respond to any report of a medical emergency within the Union County Detention Center, evaluate the situation and render appropriate aid. Under normal circumstances, IHST will determine if local Emergency Medical Services Provider should be requested.

If an inmate is experiencing a medical emergency or complains of symptoms that indicate an emergency, a detention officer will notify IHST via emergency procedures.

The Detention Center Clinic is not equipped as an emergency room. Inmates will not be escorted or transported to the Detention Center Clinic without approval of the shift supervisor and knowledge of the IHST staff. When it involves a life threatening emergency, IHST will respond to the scene of the incident.

Emergency Dental Care

In the event of a dental health emergency, the facility will provide emergency dental care and treatment. This care and treatment will be by a licensed dentist.

- A. Should an officer detect a serious medical need relating to dental care or receive a Health Care Request from an inmate reporting that he/she is suffering from a serious medical need relating to dental care (e.g., severe swelling of the facial area or gums, broken or damaged teeth, severe pain), the officer will immediately contact the IHST and explain the inmate's symptoms so the IHST may determine whether and what treatment is appropriate.
- B. Emergency dental procedures will be limited to emergency dental extractions only.

Activation of Emergency Medical Services (EMS)

Any officer or staff member has the authority to request the local Emergency Medical Services (EMS) to be dispatched.

Master Control Operator will notify EMS

If notified of an emergency health need or the need for EMS, the Master Control Operator will contact Union County Communications and request EMS. Whenever EMS is dispatched to the Detention Center, an officer will be assigned to stand by outside the facility until EMS arrives and escort them to the medical emergency.

Officer to accompany Inmate to Medical Facility

Whenever an inmate is transported outside this facility, the Shift Supervisor will assign sufficient detention staff to assure the inmate's safety, security and custody is properly maintained.

An officer will remain with the inmate at all times and will maintain proper custody of the inmate. Whenever feasible, inmates will be handcuffed or otherwise restrained at all times. Restraints should not be removed except by specific order of Health Services Staff, and only if sufficient assistance is available to maintain secure custody of the inmate. If feasible, one type of hard restraint (handcuffs or leg restraints) should be maintained at all times. Officers will inform IHST of the possible consequences of removing restraints from offenders / persons experiencing psychological emergencies, and inmates who pose an escape risk.

First Aid Kits

First responder kits will be placed in the command area and storage area between the four housing blocks. The Shift Supervisor will ensure that medical supplies are replaced after use.

Automatic External Defibrillator (AED)

Automatic External Defibrillator (AED) is located in Master Control and a second AED is located in the Medical Clinic. Detention and IHST staff will maintain certifications necessary to perform Basic Life Support (BLS), which includes proper use of the AED.

Notification of Detention Center Administrator

The Detention Center Administrator or his / her designee shall be notified if an inmate is transferred to the hospital for a medical emergency.

Escorting Officer with Discharge Instructions

The officer accompanying an inmate for treatment shall return all health care related documents to IHST.

No Fee for Emergency Medical Treatment

An inmate will not be charged a co-payment fee for emergency medical treatment or officer initiated visit.

4.01-E: Mental Health Care

POLICY STATEMENT:

The Union County Detention Center will provide treatment, services, and housing for inmates committed and confined in its facility who display or have been diagnosed as having mental health problems. In such cases, mental health care will be provided at no cost.

DEFINITIONS:

Special inmates: an inmate that includes a geriatric inmate, an inmate with a mental health disorder, developmental disability, intellectual disability, or substance use disorder, and an inmate with a physical disability.

Mental health personnel: A person or persons who provide mental health services to inmates. The list of persons included in this definition include but are not limited to: Psychiatrists, Psychologists, Registered Nurses, and Licensed Clinical Social Workers.

Mental Health Disorder: refers to a person with mental condition(s) to such an extent that he or she requires care and treatment for his or her own welfare or the welfare of others.

Intellectual disability: refers to a person with substantial sub-average general intellectual functioning that is associated with impairment in adaptive behavior.

Mentally impaired inmate: refers to an inmate who has *Mental Health Disorder(s)* or *Intellectual disability(s)*.

SPECIFIC PROCEDURES:

Officers will ask Mental Health questions during intake

Inmates committed to the Union County Detention Center shall be screened using the approved Mental Health Questionnaire required by Session Law 2007-323, Section 10.49(f) and make observations during intake in an effort to identify mentally impaired inmates who may not adapt well to a detention setting or who may be imminently dangerous to themselves or others. Officers will make contact with IHST to seek a referral. IHST shall collaborate with Local Management Entity (LME) to develop medical management procedures between Detention Center staff and mental health providers. Detention Center Staff will be trained to recognize signs of mental illness pursuant to Session Law 2007-323, Section 10.49(f). Officers will observe inmates throughout their incarceration in an effort to identify possible mental health problems. If an inmate presents an imminent danger to self or others, Detention Center staff may take appropriate action to ensure the safety of inmates and staff (such as using restraints).

Inmates given daily opportunity to communicate Mental Health Needs.

Inmates will have the opportunity each day to submit Mental Health Care Request inquiry via KIOSK or verbally to any officer or IHST. The IHST will review and follow up on Mental Health Care Request submitted via KIOSK or to an officer. The request and action taken will be documented in the inmate's medical file.

Mental Health Treatment

Officers will respond to an inmate who has mental health need at any time and take appropriate action. If IHST are unavailable, the officer who receives the request will notify the Shift Supervisor who will evaluate the circumstances. If necessary, the Shift Supervisor will make immediate arrangements for intervention and / or evaluation.

Mental Health Screening

On admission, the intake officer will evaluate each inmate with regard to obvious signs of *Mental Health Disorder or Intellectual disability*. When an officer suspects an inmate is mentally impaired, they will contact IHST who will assess the situation and, if necessary, contact the on-call provider who will then determine necessary additional measures. Additional diagnostic tests or examinations may be ordered. Pending this review, an inmate demonstrating signs of serious mental illness may be housed in a holding cell, medical cell or transported to a more appropriate facility.

Examples of Acute Mental Illness

Officers should be alert to possible indicators of acute mental illness, including the following:

- A. Delusions of grandeur and/or persecution, with hallucinations or a constant attitude of suspicions and hostility;
- B. Intense anxiety or exaggerated levels of fear or panic in the absence of any danger;
- C. Inappropriate emotional responses, bizarre delusions or unpredictable, hollow giggling;
- D. Hallucinations such as hearing, seeing, tasting, or smelling something or someone that is not present at the moment;
- E. Extreme depression, withdrawal, neglect of hygiene and appearance, refusal to eat or leave the cell for long periods of time, or periods of uncontrollable crying; and,
- F. Exaggerated mood swings from elation and over activity to depression and under activity or a combination or alternation of these.

Inmates exhibiting unusual behavior shall be placed on Special Watch.

Crisis Intervention

When an inmate exhibits behavior that is suicidal, homicidal or otherwise extremely inappropriate, the staff shall request a medical evaluation *see* N.C. Jail Code 10A NCAC 14J .0601 (c)

The IHST will evaluate the situation and, if necessary, contact the on-call provider. IHST will make recommendations concerning the monitoring, observation and handling of the inmate. In no case will these recommendations override safety and security considerations. Any question, regarding potential conflicts between medical recommendations and a compromise of facility security, will be resolved by the Detention Center Administrator or their designee.

No Fee for Mental Health Treatment

An inmate will not be charged a fee for mental health treatment.

4.01-F: Acute Substance Dependency

POLICY STATEMENT:

The Union County Detention Center will provide treatment, services, and housing for all inmates committed and confined in its facility who display acute substance dependency.

SPECIFIC PROCEDURES:

Arresting Officers at Intake

In the event an arrestee is suspected of ingesting or has entered any chemical substance into the body, administered Naloxone or other treatment to counteract or reverse the effects of any impairing substance, the arresting officer shall transport the arrestee to the local hospital for medical evaluation.

Officer Will Screen Inmates upon Intake

Inmates committed to the Union County Detention Center are questioned and observed during intake in efforts to identify persons who may be experiencing acute substance withdraws.

Inmate Will Have an Opportunity to Communicate Needs Daily

Inmates will be provided an opportunity to communicate their health care needs daily verbally or by submitting a health care request according to the following procedure:

- A. An inmate can submit a Health Care Request inquiry via KIOSK. If an inmate is illiterate or unable to submit a request, an officer will submit the request on the inmate's behalf.

- B. An IHST will evaluate and respond to each health care request. IHST will respond to Health Care Requests on a daily basis.
- C. All medical action taken will be documented and signed by a member of the IHST. Health Care Requests and medical treatment, if indicated, will be kept and filed in the inmate's medical record.

Substance Use Disorder Screening

On admission, the intake officer will evaluate each inmate with regard to obvious signs of acute substance use or dependency. When an Officer suspects an inmate is a substance user or has a substance use disorder (SUD), they will contact IHST who will assess the situation and, if necessary, contact the on-call provider, who will then determine necessary additional measures. Additional clinical tests or evaluations may be ordered. Pending this review, an inmate demonstrating signs of serious illness may be housed in a holding cell, designated medical housing or transported to a more appropriate facility. If a pregnant Inmate is currently enrolled in an opioid withdrawal treatment program, this treatment will continue.

Examples of Substance Use Disorder or acute substance withdrawal

Officers should be alert to possible indicators of acute substance withdrawal, including the following:

- A. Unconsciousness or semi-consciousness;
- B. Serious drug or alcohol induced intoxication;
- C. Intense anxiety or exaggerated levels of fear or panic in the absence of any real or present danger;
- D. Hallucinations such as hearing, seeing, tasting, or smelling something or someone that is not present at the moment;
- E. Other signs of symptom indicating the need for immediate medical care.
- F. Recent Naloxone administration.

Inmates exhibiting unusual behavior may be placed on medical, mental health, suicide watch or withdrawal protocol. Inmates exhibiting psychotic or dangerous behavior that appears to originate from substance use will be referred to IHST for emergency evaluation.

Crisis Intervention

When an inmate exhibits behavior that is suicidal, homicidal or otherwise extremely inappropriate, the staff shall request a medical evaluation. *See N.C. Jail Code 10A NCAC 14J .0601 (c)*

The IHST will evaluate the situation and, if necessary, contact the on-call provider. IHST will make recommendations concerning the monitoring, observation and handling of the

inmate. In no case will these recommendations override safety and security considerations. Any question, regarding potential conflicts between medical recommendations and a compromise of facility security, will be resolved by the Detention Center Administrator or their designee.

No Fee for substance and chemical Treatment

An inmate will not be charged a fee for mental health treatment.

4.01-G: Administration and Control of Medications

POLICY STATEMENT:

A qualified health care professional will administer inmate medications in a timely manner and in accordance with orders issued by the prescribing provider. A detention officer will accompany the IHST during medication administration for the purpose of supervising inmates and maintaining order and safety.

SPECIFIC PROCEDURES:

Safe and Secure Storage of Medications

Medications will be secured in the medical area and will be inaccessible to inmates and non-health services staff. When necessary, the Detention Center Provider may authorize an inmate to carry and possess certain medications while incarcerated. Inmates authorized to carry and possess medication within their own housing unit must carry a written approval signed by the IHST, authorizing possession of the medication.

When being administered, all medications will remain under the exclusive care and control of IHST. Medication and/or unlocked medication carts will not be left unattended at any time.

Inmates not allowed to administer Medications

No inmate will assist with or otherwise participate in any way with administering medications.

Receiving Inmates with Medications

The receiving intake officer will confiscate all medications from incoming inmates. The medications will be inventoried and stored as per IHST medication storage policy.

Detention Center Health Services (IHST) will administer Medication

Medications will be administered according to a schedule approved by the Detention Center Provider. A member of the IHST will administer all medications. An officer will accompany IHST during any medication administration.

Medication will be administered as prescribed by the provider. The inmate is required to take the medication immediately and in the IHST presence. The officer will remain with the IHST at all times and will observe the inmate closely enough to ensure that the medication is being taken.

Administering Medications to aggressive or assaultive Inmates

The Union County Detention Center Staff in conjunction with the IHST will establish an individual process for administration of medications to inmates who may display behaviors which are aggressive or assaultive.

Releasing Inmates with Medications

If an inmate admitted to the Detention Center has medication in their possession, that medication shall be placed in the custody of the IHST. Upon release the inmate will sign a receipt acknowledging the return of medication. This form will be provided by IHST, which will be filed in his inmate medical record.

4.01-H: Potentially Suicided or Suicidal Inmates

POLICY STATEMENT:

Officers and IHST will be trained to recognize the signs of a potentially suicidal inmate and to respond to their needs as required. Officers of the Union County Detention Center will be watchful for signs of suicide among inmates and will intervene directly, when possible, in suicide threats or actions. Under the condition of a suicide watch, inmates are placed on a supervision regiment intended to reasonably protect the individual.

DEFINITIONS:

Suicide: the act or an instance of a person voluntarily and intentionally taking his or her own life.

Self-destructive Behavior: The act of intentionally causing serious injury to oneself; (such as repeatedly striking their own head against a concrete wall or steel doors).

Special Watch Rounds: an in-person check of an inmate by an officer at time intervals described more specifically in the N.C Jail Code 10A NCAC 14J .0601 (c).

SPECIFIC PROCEDURES:

Screening of Inmates

All inmates will be screened during the booking process for their potential risk of suicide. The Booking Officer will ask a set of standardized questions listed on the Brief Jail Mental Health Screen, developed by Policy Research Associates, Inc. © (2005), funded by the National Institute of Justice. The Booking Officer will sign the form and will request the signature of the inmate. A copy of the form will be forwarded to IHST for review and will be placed in the inmate's medical file and followed up as deemed appropriate by IHST. IHST will further screen the inmate for risk of suicide during the health screening process.

Officers will report Suicidal, Self-Destructive or Homicidal Behavior

When an inmate exhibits behavior that is suicidal, homicidal or otherwise extremely inappropriate, the staff should request a medical evaluation. As a result of this evaluation the inmate may be placed on special watch. Under the condition of a special watch, inmates are placed on a supervision regiment intended to reasonably protect the individual from self-destruction.

The IHST will evaluate the situation and, if necessary, contact the on-call provider. IHST will make recommendations concerning the monitoring, observation and handling of the inmate. In no case will these recommendations override safety and security considerations. Any question, regarding potential conflicts between medical recommendations and a compromise of facility security, will be resolved by the Detention Center Administrator or their designee.

Once a medical or psychiatric evaluation is completed, IHST will notify the Detention Staff Supervisor if changes in the normal watch procedure are required or recommended. The recommendations of the medical professional will be followed for the period indicated.

Officers and detention staff will be alert to possible indicators of potentially suicidal inmates, by such things as:

- A. Past history of suicide attempts;
- B. Observed behavior and verbal discussion of suicide during the admission process;

- C. Active discussion of suicide plans;
- D. Sudden drastic change in eating, sleeping, or other personal habits;
- E. Recent crisis in personal events, such as extended or life sentencing;
- F. Loss of interest in activities or relationships the inmate had previously engaged in;
- G. Depression, which might be revealed by crying, withdrawal, insomnia, variations in moods, and lethargy (abnormal drowsiness);
- H. Giving away personal property;
- I. Signs of serious mental health problems such as paranoid delusions or hallucinations.

Considerations for Special Watch

The following inmates will be placed on Special Watch:

- A. An inmate with a medical record maintained and preserved by the jail that indicates the inmate has attempted suicide at a previous time, unless the inmate is seen by a physician who determines a special watch is not needed.
- B. An inmate who reports a previous suicide attempt or threatens to commit suicide during their initial screening upon admission, unless the inmate is seen by a physician who determines a special watch is not needed.
- C. An inmate who has been assigned to special watch by medical or mental health personnel of the jail or an officer.
- D. An inmate who displays any of the following behavior:
 - 1. Physically hitting or trying to hit an officer;
 - 2. Verbal abuse of other people;
 - 3. Threatening other people, or threatening to or engaging in self-injury;
 - 4. Screaming, crying, laughing uncontrollably, or refusing to talk; and
- E. An inmate who is intoxicated by alcohol or drug use as determined at intake by one of the following:
 - 1. A blood alcohol content level of .15 or greater as measured;
 - 2. Exhibits use of slurred speech; or
 - 3. Exhibits the inability to control body movement.

4.01-I: Communicable Diseases

POLICY STATEMENT:

The Union County Detention Center will operate in a manner that protects the health and safety and welfare of all staff and inmates and will take reasonable steps to prevent the spread of communicable diseases and will provide medical evaluation and care to inmates

suspected of having a communicable disease. Inmates with a known communicable disease will be isolated, if it is reasonably necessary, to protect the inmate's health or the health of others. The Union County Sheriff's Office and Detention Center will provide training on the causes and methods of transmissions of various communicable diseases. The education will emphasize the use of universal safety precautions for preventing the spread of such diseases including blood borne pathogens. The Union County Detention Center will take special care to preserve the confidentiality of information regarding inmates with communicable diseases.

DEFINITIONS:

Bloodborne Pathogens: Pathogenic microorganisms that are present in human blood and body fluids which can cause disease in humans. These pathogens include, but are not limited to, hepatitis B, hepatitis C, and human immunodeficiency viruses.

Blood and Body Fluids: Blood, semen, cervical secretions, saliva, urine, vomit, and breast milk.

Universal Precautions: Infection control procedures, which should be taken to prevent transmitting infections. These procedures include wearing gloves when coming into contact with or handling blood or body fluids. These precautions are necessary with all persons since their status may not be known.

DISCUSSION:

North Carolina General Statute (N.C.G.S.) 153A-225(a) (1) requires the medical plan to address the handling of inmates with known communicable diseases. 10A NCAC 14J.1003 requires each Detention Center to "separate inmates who require medical isolation from other inmates, either by housing them in a separate area of the detention center or by transferring them to another facility." Federal law, state law and public health regulations must be obeyed.

SPECIFIC PROCEDURES:

Preliminary Health Screening Form during intake

If the inmate indicates that he/she has a communicable disease, the Booking Officer will instruct the inmate to report the medical condition to IHST during the health screening. If the Booking Officer believes, based on his/her own observation, that the inmate may have a communicable disease, the Booking Officer will confidentially notify IHST as soon as possible.

Common symptoms of communicable diseases may include:

Persistent tiredness weight loss cough fever

Diarrhea/vomiting night sweats swollen glands

Confidentiality Requirements

The Booking Officer must maintain the confidentiality of information obtained, from any person, during the preliminary health screening concerning communicable disease. Any information or records will be kept strictly confidential including medical records that might identify an inmate as having a communicable disease. Information will only be shared with IHST or detention staff chain of command, as needed, for the inmate's access to treatment or unique health care accommodations. Public health regulations authorize a local Health Department Director to notify the Sheriff if an inmate has reportable communicable diseases. The unauthorized release of information about an inmate's medical status may result in disciplinary action.

Testing for Communicable Diseases

An inmate may request a communicable disease test through regular Health Care Request procedures with IHST. The inmate will be charged the medical copayment under these circumstances unless the testing meets the parameters as set forth in the N.C. Communicable Disease Testing Guidelines. The inmates will be notified of the results and the inmate will be provided appropriate post-test counseling by IHST and/or referred to an infectious disease clinic. The counseling will be documented. IHST will inform all known infected inmates that they should follow NC state mandated control measures.

IHST provider may request an inmate to be tested for a communicable disease if, in the provider's reasonable medical judgment, the test is necessary for the inmate's appropriate medical treatment. Still, the inmate cannot be tested without his/her informed consent.

COVID-19: Operational Preparedness, Prevention and Management

UC Jail administrators and IHST, in partnership with UC Public Health, follow the CDC and NCDHHS interim guidance on management of COVID-19 in correctional and detention facilities <https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html>. Guidance on COVID-19 containment and mitigation is followed from the NCDHHS Jail Health Toolkit <https://covid19.ncdhhs.gov/guidance#correctional-facilities>. Testing of symptomatic inmates and exposed inmates is provided by the IHST at no cost to the inmate. Additionally, COVID-19 vaccinations are made available to inmates on a routine basis.

Testing following significant risk of exposure

Union County Blood borne Pathogen Exposure Control Plan shall be followed in the event of an exposure. The policy is located on County Connect in the Risk Management section.

An officer or inmate who has been exposed to blood or body fluids of an inmate should wash the exposed area with soap and water as soon as possible after the exposure. Outer garments should be removed in as close proximity to the exposure site as possible, handled as little as possible and placed in a Biohazard bag. (Please see the Blood-borne Pathogen Exposure Control Plan on County Connect for more information on this procedure.)

The officer will notify his/her supervisor immediately and complete a Detention Center incident report as soon as feasible after being exposed to any blood or body fluids, outlining the facts and circumstances of the incident. This report will be forwarded to the Detention Center Administrator by chain of command. The Designated Exposure Control Officer for our Union County Sheriff's Office will be notified to assist the officer in any way possible.

The officer will complete a worker's compensation report within 24 hours of the incident. If an officer is not physically able to complete the report, his supervisor will complete the report.

The officer will complete a Union County Blood-borne Pathogen Incident Report/Provider's written documentation of opinion. These reports will be stored in the employee's confidential medical file after completion by the Provider and Supervisor.

Any other person, not an employee of Union County, exposed to blood or body fluids of an inmate will be encouraged to consult with their private provider, an emergency room, or urgent care immediately. Documentation of this action, including date and time, should occur.

Housing and Classification for inmates suspected of having Communicable Diseases

The Booking Officer will consider relevant security factors in housing newly admitted inmates, including those inmates with a communicable disease:

- A. Inmates who are infected with a communicable disease but are asymptomatic may be placed into medical segregation (quarantine) when necessary to protect or promote their health or the health of others. IHST will determine if an inmate should be segregated.
- B. Inmates with a communicable disease who are symptomatic or contagious will be housed in medical segregation (isolation) or transferred to another correctional facility, pursuant to a court order authorizing transfer. This includes inmates with blood borne pathogen infections and who are violent, sexually active, or engage in

other high-risk behavior. The inmate will immediately be placed in medical segregation pending transfer.

- C. Inmates who have been exposed to a communicable disease but are asymptomatic will be housed in Medical Segregation until testing is completed or incubation period is surpassed.
- D. Inmates with a communicable disease in administrative or medial segregation will have reasonable access to all privileges available to other inmates including attorney visits, chaplain visits, commissary, social visitation, mail privileges and other programs.

Communicable Disease Reporting Requirements

IHST or the facility conducting the communicable disease testing is responsible for reporting positive labs to the local health department as required by state law.

Detention for Communicable Diseases

In accordance with N.C.G.S. 15A-534.3, if a judicial official conducting an initial appearance or first appearance hearing finds probable cause that an individual had a nonsexual exposure to the defendant in a manner that poses a significant risk of transmission of the AIDS virus or Hepatitis B by such defendant, the judicial official shall order the defendant to be detained for a reasonable period of time, not to exceed 24 hours, for investigation by public health officials and for testing for AIDS virus infection and Hepatitis B infection if required by public health officials pursuant to G.S. 130A-144 and G.S. 130A-148. (1989, c. 499, s 1; 2009-501, s.1.)

The purpose of the detention is to provide time for public health officials to conduct an investigation and for HIV or Hepatitis B testing if required by them. Judicial officials do not have the authority to order HIV or Hepatitis B testing, but only to detain the individual for investigation by public health officials who will determine if testing is required. Public health officials will follow the administrative codes that direct testing for blood borne pathogen exposure:

10A NCAC 41A.0202 (4) (a) (i)

10A NCAC 41A.0203 (b) (4) (a)

10A NCAC 41A.0214 (4) (a)

IHST will notify Union County Division of Public Health officials if a defendant is being detained for evaluation and possible testing for blood borne pathogens.

- A. Since the detention is for 24 hours maximum, IHST should notify health department officials as soon as possible.

- B. Public health officials will have reasonable access to the defendant upon their request.
- C. The defendant will be released after 24 hours whether the Union County Division of Public Health has responded to the notification or not.
- D. IHST and Detention staff will refer all questions concerning a defendant's medical status to the Union County Division of Public Health.

Detention Center Health Services Release of Inmate's Communicable Disease Status

Under the following circumstances, IHST is permitted to release an inmate's communicable disease status:

- A. Release is made to health care personnel who are providing medical care to the inmate.
- B. Release is made with the inmate's written consent or the written consent of the inmate's guardian.
- C. Release is made pursuant to a subpoena or court order.
- D. Release is otherwise authorized by G.S. 130A-143 for treatment, payment or healthcare operations or by regulations adopted by the Commission for Public Health.

Inmate participation in Programs

Inmates with communicable diseases and have been medically cleared/noncontagious have the same access to facility programs and services as other inmates. These inmates have the same visitation and recreational privileges as other inmates house in the same housing unit under the same classification level.

Detention staff will give consideration to all inmates when making work assignments or reviewing inmates for Inmate Worker status. Candidates for inmate Worker will be reviewed on a case-by-case basis under set requirements. An inmate with a communicable disease who has been medically cleared/noncontagious may not be refused Inmate Worker status based solely on his/her medical condition. However, those inmates may be refused if the basis for the refusal is unreasonable fear among other inmates or other legitimate penological concerns.

Inmates with communicable diseases may be denied access to facility programs or services if the IHST Provider determines that such restrictions are necessary to protect the inmate's health or the health of others.

Transfer of Inmate(s) with known Communicable Disease to Other Sheriff Office or the NC Department of Corrections

If a known inmate with a communicable disease is transferred to another Sheriff Office or the NC Department of Corrections, IHST will notify the medical department of that sheriff office or the Director of Health Services for the Division of Prisons and the prison facility administrator of the inmate's status.

Safety Equipment

As stated in the Union County Blood-borne Pathogen Exposure Control Plan, the Detention Center will make the following personal protective equipment available for use by Detention staff:

- A. Disposable latex or nitrile gloves
- B. Pocket masks with one-way valves for CPR and/or Ambu-Bags
- C. Coveralls, shoe covers and protective eyewear
- D. Puncture-resistant containers for holding sharp objects
- E. Disposable paper towels and cleaning supplies
- F. Plastic bags labeled as containers for bio-hazardous waste

Universal Safety Precautions

Detention Center staff will wear person protective equipment (PPE) including disposable gloves, surgical masks or goggles that is appropriate for the situation when they reasonably expect to come into contact with blood/body fluids, spurring or splashing blood, if they have time under the circumstances.

Once gloves or other PPE have been used, they will be thrown away immediately before any other task is performed and hand hygiene will be performed as instructed in the Union County Exposure Control Plan.

Detention Center staff who come into contact with blood or body fluids will wash the affected area thoroughly with warm water and soap as soon as possible after the contact.

Detention Center staff will protect against possible infection by covering cuts, open sores, or breaks in their skin with water-resistant bandages.

Detention Center staff will place all contaminated clothing, bedding, or other items that may be cleaned and reused into plastic bags that are marked clearly as contaminated materials (biohazard). Normal laundry and dry cleaning procedures are adequate to decontaminate clothing, bedding, and other washable items. Contaminated clothing will be washed at the

Detention Center. Employees are prohibited from taking contaminated clothing home to be washed.

Officers will wear disposable gloves whenever they engage in the following activities:

- A. Conducting cell searches
- B. Conducting searches of inmates
- C. Handling disruptive inmates whenever possible
- D. Any other activity likely to result in exposure to blood and body fluids.

Officers will exercise caution to avoid cuts or punctures with sharp objects including knives, razors, and hypodermic needles by adhering to the following:

- A. Officers searching cells shall avoid putting their hands into places they cannot visually inspect. Flashlights and mirrors will be used to assist in searching such places.
- B. Sharp objects will be placed into a puncture-resistant container for storage and disposal.

Officers will wear gloves and use a disinfectant solution when cleaning areas or surfaces contaminated with blood and/or body fluids.

- A. A ratio of 1:10 solution of household bleach and water (1 part bleach to 10 parts water) may be used for cleaning objects or areas contaminated with blood or body fluids. The solution should be labeled with mix date and expiration date of 30 days.
- B. All contaminated trash and sharp containers will be properly marked to identify the contents and be placed in the designated "Biohazard Storage Room" for pickup by the designated company.
- C. Mattresses and pillows shall be sanitized with a sanitizing solution or a hospital grade disinfectant as required by state standards.
- D. Contaminated disposable materials will be treated as infectious waste and disposed of in Bio-Waste containers.

Cleaning Cells

If physically able, all inmates will be responsible for routine cleaning of their own cells, according to standard procedure. If the inmate is unable to clean his own cell, the cell will be cleaned by an inmate under the supervision of an officer.

When an inmate leaves the Detention Center, the cell and its furnishings, including both sides of the mattress, will be cleaned according to standard procedures and disinfected with a 1:10 solution of household bleach and water solution (1 part bleach to 10 parts water). The

solution should be labeled with mix date and expiration date of 30 days. Inmates will wear gloves for these cleaning procedures.

Laundry

If clothing or linens are contaminated with blood or other body fluids, those items may be placed in special water-soluble bags for laundering or disposed of in accordance with local or state health regulations. Clothing or facility linens that have not been contaminated will be laundered according to usual laundry procedures. Inmates assigned to the laundry will wear gloves when handling all unwashed laundry.

Uniforms that have become contaminated with blood or body fluids will be removed and cleaned as soon as possible. The Detention Center laundry will launder all contaminated clothing. Officers will not take contaminated clothing home to be washed. If skin under the uniform has been contaminated, it should be washed thoroughly. Blood and body fluids on clothing and unbroken skin are not normally considered to be a blood borne pathogen exposure.

CPR with Communicable Disease

If CPR is required, those involved should use an Ambu-bag or a pocket mask with a one-way valve whenever possible. These devices reduce the risk of transmitting infectious diseases. Contact with saliva during CPR does not present a significant risk of transmitting blood borne pathogens.

Refusal by Detention staff to provide emergency care, including CPR, to an inmate may result in disciplinary action.

Employee Training

The Union County Sheriff's Office will provide new employees with Blood borne Pathogen policy training within ten (10) days of beginning work, normally on the first day of work during to Union County Detention Center Orientation. This training will familiarize officers with their legal responsibilities and the operational procedures of the Union County Detention Center as they relate to blood borne pathogens and other communicable diseases.

Officers will receive periodic training containing current information concerning blood borne pathogens and other communicable diseases.

4.01-J: Maintenance and Confidentiality of Medical Records

POLICY STATEMENT:

The medical records of inmates at the Union County Detention Center will be kept confidential as required by law. The records will be stored securely and maintained separately from confinement records, and access to medical records will be controlled and limited. These records will be stored and maintained by IHST in the Medical Office. When the medical records are not in active use, they will be filed in a manner inaccessible to unauthorized personnel.

DEFINITIONS:

Medical Record: A confidential record of medical problems, examinations, diagnoses, and treatments maintained on each inmate who receives health services through the UCI.

DISCUSSION:

NC State Detention Center Standards 10A NCAC 14J .1001(b) (6) provides "the medical plan for each Detention Center must address the maintenance and confidentiality of medical records." NC State Detention Center Standards 10A NCAC 14J .0101(25) defines a "medical record" as "a record of medical problems, examinations, diagnosis and treatments." NC State Detention Center Standards 10A NCAC 14J .1002 says that health screening forms "shall be reviewed for the presence of confidential information which cannot be made available to Detention Center officers.

SPECIFIC PROCEDURES:

Inmate to have medical chart

A chart will be created for an inmate whenever the inmate is evaluated or treated by a healthcare professional.

Contents of Medical Records

Medical records include, but are not necessarily limited to, the following:

- A. Copy of a completed health screening form;
- B. Medical findings, evaluations, treatments, medications and dispositions;

- C. Completed records of administered medications;
- D. Reports of laboratory, X-ray, and diagnostic studies;
- E. Progress notes;
- F. Consent and refusal forms;
- G. Release of information forms;
- H. Discharge summary of hospitalizations;
- I. Special treatment plans, including prescribed diet;
- J. Place, date and time of each encounter with a medical professional;
- K. The legible signature and title of each document.

Repository of Medical Records

The medical records of inmates will be kept confidential, and they will be stored separately from their confinement records. The Union County Sheriff's Office shall maintain all inmate health records in accordance with this policy. The Union County Sheriff's Office in conjunction with IHST will maintain strict control of all inmate medical records. When not in active use, the medical records of inmates will be stored in a secured area in the medical clinic. The UCSO in conjunction with IHST shall have access and control of the records and ensure confidentiality as required by law. All persons employed by the UCSO or the Union County Division of Public Health, who have access to confidential inmate health records will maintain the confidentiality of those records, at all time and shall not permit unauthorized access to them.

N.C.G.S. 153A-222 allows Detention Center inspectors with the North Carolina Detention Center and Detention Division to examine an inmate's medical record unless the inmate objects in writing. The inmate must be informed in writing of his right to object before an inspector can examine the record. If the inmate objects in writing, the inspector(s) will not be allowed to view the inmate's confidential medical record. Furthermore, "any confidential or privileged information received from review of records or interviews shall be kept confidential by the Department and not disclosed without written authorization of the inmate or legal representative, or unless disclosure is ordered by a court of competent jurisdiction."

Transfer of Inmate Medical Record

If an inmate is transferred to a county or regional detention facility in North Carolina, IHST will provide the transporting officer with copies of the inmate's medical records to deliver to the receiving detention facility. Treating health care providers may share confidential medical information to ensure continuity of medical care.

Inmates Requesting their own Medical Records

As patients, inmates are authorized to have copies of their confidential medical records, and copies of the records shall be provided to an inmate upon request and completion of a medical records release form.

Copies of inmate health records may be redacted before being given to the inmate, if necessary to protect the security and integrity of the UCJ. Redaction of inmate medical records may be done only with the authorization of the Jail Administrator, after consultation with the IHST and Legal Counsel, and the reason for any redaction will be clearly noted.

The inmate will be allowed one copy of their medical record at no cost per incarceration. The second and subsequent copies will be at a cost of \$0.10 per page.

Retention of Inmate Medical Records

The medical records of an inmate will be retained for 5 (five) years after the inmate's last release.

4.01-K: Privacy during Medical Examinations

POLICY STATEMENT:

It is the policy of the Union County Detention Center to conduct medical examinations and interviews in a confidential and private setting. Safety and security will not be jeopardized at any time.

SPECIFIC PROCEDURES:

Inmate Privacy

Inmates will be provided with a confidential and private setting while being examined, treated or interviewed by IHST or other Health Services staff. Officers will provide sufficient privacy during the exam or interview so the inmate will feel free to discuss any medical problem. Safety and security will remain the first priority and will not be jeopardized at any time.

4.01-L: Medical Co-Payments

POLICY STATEMENT:

NC G.S. § 153A-225. Medical care of prisoners

Inmates receiving self-initiated, non-emergency medical care, including dental care will be assessed a \$20.00 co-payment for each service or visit. Inmates will be assessed a \$10.00 co-payment for each prescription drug. Inmates receiving maintenance prescription drugs will be assessed a one-time \$10.00 co-payment per incarceration, per medication. These fees will be charged against the inmate's trust fund account. No inmate will be denied medical care, including dental and mental health care, because of an inability to pay. No co-payment fee will be assessed for emergency care, substance abuse treatment, mental health care, and prenatal care, laboratory tests ordered by IHST, routine physicals, follow-up visits, and psychiatric medications.

DEFINITIONS:

A medical emergency is any medical, mental health, dental, acute illness, or an unexpected health need that cannot be deferred until the next scheduled health care request clinic

A medical non-emergency is any medical event that does not require immediate medical intervention.

SPECIFIC PROCEDURES:

Inmates will be notified of medical and prescription drug co-payment fees.

Inmates may be notified and obtain information of co-payment fee amounts and their assessment in the following ways:

- A. Via a KIOSK message or;
- B. Inmates can review the Union County Detention Center Medical Plan via KIOSK, which contains information concerning the co-payment fees or;
- C. Informed of the co-payment fees by IHST during the initial intake screening interview or;
- D. Posted informational signage located in the screening office and clinic or;
- E. Health Care request inquiries will include a notice informing inmates of a co-payment fee for non-emergency care or;
- F. Assessed co-payment fee(s), are reviewable via KIOSK.

Unless, there is some compelling evidence to believe otherwise, IHST and officers will presume that all inmates are aware of the medical and prescription drug co-payment fees.

Indigent Inmates will not be denied Medical Care

No inmate will be denied medical care because they cannot afford a co-payment. Indigent inmates will be provided emergency and non-emergency medical services, including mental health and dental services, without regard to the ability to pay.

No co-payment will be charged for free services.

No co-payment fee will be assessed for the following medical services:

- A. Initial intake health screening;
- B. Tuberculosis tests;
- C. Over-the-counter medicine administered by the IHST;
- D. Pre-existing condition follow-ups;
- E. Emergency care (medical, mental health)
- F. Mental health services;
- G. Dental follow-up services;
- H. Acute Substance Dependency;
- I. Medical equipment or supplies prescribed by the IHST;
- J. Pre-natal care;
- K. Laboratory tests ordered by the Detention Center Health Services;
- L. Annual physical exam;
- M. Any physical examination or test required for inmate worker status;
- N. Any inmate work-related injury; or
- O. Medical services (including dental services) referred by IHST to another professional health care provider outside of the Union County Detention Center.

Self-Initiated, non-emergency Medical Services requiring Co-Payment Fee

Co-payment fees will be assessed for self-initiated, non-emergency medical care, dental care including Health Care Request, interviews or treatments provided by IHST. If the inmate is escorted to the clinic based on a submitted Health Care Request and refuses medical services for any reason, the inmate will be assessed a co-payment fee. An inmate will not be assessed a medical fee if they submit a Health Care Request and later refuses that medical visit based on a previous Health Care Request.

Detention Center Health Services (IHST) will Determine Payment of Fee

IHST will evaluate each situation on a case-by-case basis and will determine if an inmate will be assessed a co-payment fee. No fee will be assessed for any emergency or free service. (See above.) Inmates may appeal a co-payment fee through the inmate grievance system.

No fee will be assessed until services have been rendered. IHST will charge co-payment fees against the inmate's trust fund account. The account will be debited even if there are insufficient funds to pay the co-payment fee. An inmate may run a negative balance for co-payment fees on their current incarceration. If funds are deposited into the account during the current incarceration payment fee may be recovered. The inmate will be able to review the co-payment that is deducted via KIOSK.

4.01-M: Exercise

POLICY STATEMENT:

It is the policy of the Union County Detention Center to provide exercise pursuant to 10A NCAC 14J .1004.

SPECIFIC PROCEDURES:

Exercise

"After the fourteenth consecutive day of confinement, each inmate shall be provided opportunities for physical exercise at least three days weekly for a period of one hour each of the days. Physical exercise shall take place either in the confinement unit if it provides adequate space or in a separate area of the Detention Center that provides adequate space. The opportunity for physical exercise shall be documented" (10A NCAC 14J .1004).

4.01-N: Inmate Intake/Release Controlled Substance Count and Securement

POLICY STATEMENT:

Controlled substance medication (prescribed) that is the personal property of an inmate will be counted and verified by Intake Officer, On Duty Jail Supervisor, Registered Nurse or Licensed Practical Nurse upon entering the Union County Jail. All prescribed controlled substances will be stored in a secure location in the medical office where they

will be inaccessible to inmates and detention staff. Storage will be carried out according to guidance provided in Union County Detention Center Medical Plan section 4.01 G

PURPOSE:

Ensure chain of custody of controlled substances that are inmate's personal property.

Compliance with Union County Detention Center Medical Plan 4.01 G

SPECIFIC PROCEDURES:

Criteria for Inmate Health Staff to secure inmate's personal property controlled substance:

Medication must be labeled with a prescription label that includes the inmate's name, name of the medication and expiration date.

Inmate Health Staff are unable to hold medications for an inmate that do not meet the above criteria and will be discarded/destroyed according to the guidance provided by North Carolina Department of Health and Human Services and United States Drug Enforcement Administration.

Receiving and storage of controlled substance

When controlled substances enter the intoxilyzer hallway the Intake Officer will notify the Inmate Health Nurse there are controlled substance to be counted.

Once the medication has been counted, the Intake Officer will notify squad Supervisor for verification of count and witness the placement of medication in a sealed numbered bag. Squad Supervisor and Inmate Health Nurse will sign the bag.

The Inmate Health Nurse will place a "Hold" in JMS and enter a note stating "Patient has medication in medical with bag# (type number) verified by (Nurse Name and Squad Supervisor name).

Controlled Substances will be placed in the locked controlled substance drawer and remain locked at all times.

The top portion of the sealed bag with tracking number will be taped to the original Controlled Substance Count sheet.

The original Controlled Substance Count sheet will be placed in the controlled substance count logbook and will be verified that the sealed bag and matching tracking numbers is intact at the beginning and end of each shift by (2) nurses.

Released to Home

When the inmate is being released to go home the Releasing Officer will notify the Inmate Health Nurse to bring the inmate's controlled substance to Inmate Release.

In Inmate Release, the Releasing Officer and Inmate Health Nurse will verify tracking numbers and open the bag, verify and sign the Controlled Substance Count sheet.

Releasing Officer will take the controlled substance and walk the inmate out of the building and turn over to the released inmate.

The original Controlled Substance Count sheet will be placed in the inmate's medical chart as a permanent record.

Released to Other Agency

When the inmate is being release and being transported to another facility, the Releasing Officer will notify the Inmate Health Nurse to bring the inmate's controlled substance to Inmate Release.

In Inmate Release, the Union County Sheriff's Office Transportation Officer or Other Facility Transportation Officer and Inmate Health Nurse will verify tracking numbers, open the bag, verify and sign the original Controlled Substance Count sheet.

The original Controlled Substance Count sheet will be placed in the inmate's medical chart as a permanent record.

Squad Supervisor and Union County Sheriff's Office Transportation Officer or Other Facility Transportation Officer will reseal the controlled substance in a new bag, verify tracking numbers and sign bag.