	<b>DEPARTMENT OF CORRECTIONS AND REHABILITATION</b> <b>CORRECTIONS ADMINISTRATION</b> <b>POLICY AND PROCEDURES</b>	<b>EFFECTIVE DATE:</b> January 01, 2024	<b>POLICY NO.:</b> COR.10.B.03
		<b>SUPERSEDES (Policy No. &amp; Date):</b> COR.10.1F.09 (10/03/14)	
<b>SUBJECT:</b> <b>CLINICAL PREVENTIVE SERVICES</b>		Page 1 of 3	

## 1.0 PURPOSE

The purpose of this policy is to ensure that incarcerated individuals are provided with clinical preventive services as medically indicated.

## 2.0 SCOPE

This policy and procedure shall apply to all correctional facilities, their assigned personnel, and contracted staff.

## 3.0 REFERENCES, DEFINITIONS & FORMS

### .1 References

- a. National Center for HIV, Viral Hepatitis, STD, and TB Prevention, At a Glance: CDC Recommendations for Correctional and Detention Settings: Testing, Vaccination, and Treatment for HIV, Viral Hepatitis, TB, and STIs, (August 2022).
- b. Standards for Health Services in Prisons. National Commission on Correctional Health Care, (2018).
- c. Standards for Health Services in Jails. National Commission on Correctional Health Care, (2018).
- d. Standards for Mental Health Services in Correctional Facilities. National Commission on Correctional Health Care, (2015).
- e. Performance-based Standards and Expected Practices for Adult Correctional Institutions. The American Correctional Association. Standards: 5-ACI-6A-10, 5-ACI-6A-12, 5-ACI-6A-14, 5-ACI-6A-15, 5-ACI-6A-16. (2021).
- f. U.S. Preventive Services Task Force:  
[https://www.uspreventiveservicestaskforce.org/uspstf/topic\\_search\\_results?topic\\_status=P](https://www.uspreventiveservicestaskforce.org/uspstf/topic_search_results?topic_status=P)

### .2 Definitions

**NOT CONFIDENTIAL**

<b>COR</b>  <b>P &amp; P M</b>	<b>SUBJECT:</b>  <b>CLINICAL PREVENTIVE SERVICES</b>	<b>POLICY NO.:</b> <b>COR.10.1B.03</b>
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- a. Responsible Physician: A designated M.D. or D.O. who has the final authority at a given facility regarding clinical issues and whose decisions cannot be countermanded by non-clinical staff.

#### **4.0 POLICY**

- .1 Clinical preventive health services shall be provided for incarcerated individuals as medically indicated.

#### **5.0 PROCEDURES**


- .1 The Medical Director and responsible physicians shall determine the medical necessity and/or timing of screenings and other preventive services (e.g., mammograms, colorectal screening, prostate screening, Pap smears) based on United States Preventative Services Task Force Recommendations and Specialty Clinical Practice Guidelines.
- .2 The Medical Director and responsible physicians shall determine the medical necessity and/or timing of screening for communicable diseases (e.g., HIV, hepatitis, syphilis, gonorrhea, chlamydia), as well as laboratory confirmation, treatment, and follow-up as clinically indicated, based on United States Preventative Services Task Force Recommendations and Specialty Clinical Practice Guidelines.
- .3 The Medical Director and responsible physicians shall determine the frequency and content of periodic health assessments.
  - a. If the incarcerated individual is younger than 45 years old with no comorbidities, the registered nurse shall complete a periodic health assessment annually.
  - b. If the incarcerated individual is older than 45 years old and/or has comorbidities, the medical provider shall complete a periodic health assessment annually.
- .4 Clinical preventative health services shall be available upon request and as clinically indicated.
- .5 Immunizations shall be administered by nurses to incarcerated individuals as clinically indicated based on the Centers for Disease Control and Prevention Immunization Schedules

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.6 The dentist manager and dentists shall determine the frequency and content of periodic dental evaluations.


APPROVAL RECOMMENDED:


JAN 0 1 2024  


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Deputy Director for Corrections Date

APPROVED:


JAN 0 1 2024  


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DIRECTOR Date

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