

	DEPARTMENT OF CORRECTIONS AND REHABILITATION CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES	EFFECTIVE DATE: January 01, 2024	POLICY NO.: COR.10.E.07
		SUPERSEDES (Policy No. & Date): COR.10.1E.07 (10/20/15)	
SUBJECT: NON-EMERGENCY HEALTH CARE REQUESTS AND SERVICES		Page 1 of 5	

1.0 PURPOSE

The purpose of this policy is to ensure that incarcerated individuals' non-emergent health care needs are met.

2.0 SCOPE

This policy and procedure applies to all correctional facilities, their assigned personnel, and contract staff.

3.0 REFERENCES, DEFINITIONS & FORMS

.1 References

- a. Code of Federal Regulations Title 21, 45 CFR 160-169, Federal Register Documents, (2023).
- b. Hawaii Revised Statutes §323B, Health Care Privacy Harmonization Act.
- c. Hawaii Revised Statutes (HRS) §353-13.1, Nonemergency medical, dental, mental health services or treatment; intentional injury; payment by inmates.
- d. Standards for Health Services in Prisons. National Commission on Correctional Health Care, (2018).
- e. Standards for Health Services in Jails. National Commission on Correctional Health Care, (2018).
- f. Standards for Mental Health Services in Correctional Facilities. National Commission on Correctional Health Care, (2015).
- g. Performance-based Standards and Expected Practices for Adult Correctional Institutions. The American Correctional Association. Standard: 5-ACI-6A-03. (2021).

.2 Definitions

- a. Clinical Setting: An examination or treatment room appropriately supplied and equipped to address the incarcerated individual's health care needs.

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- b. Daily: Seven (7) days per week including holidays.
- c. Health Care Requests: Oral or written petitions for medical, dental, or mental health services. Not every written request is a health care request requiring a face-to-face evaluation (e.g., requests for an extra blanket, a religious diet, a question regarding co-payment).
- d. Qualified Health Care Professionals: Physicians, physician assistants, nurse practitioners, nurses, dentists, mental health professionals, and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for patients.
- e. Reasonable Safeguards: Appropriate administrative, physical, and/or technical safeguards that protect against use and disclosure of PHI not permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule, and includes incidental use or disclosure.
- f. Sick Call: The evaluation and treatment of a patient in a clinical setting by a qualified health care professional.
- g. Triage: The sorting and classifying of incarcerated individuals' health care requests to determine priority of need and the appropriate setting for health care to be rendered.

.3 Forms

- a. DCR 0450, Health Care Request.

4.0 POLICY

- .1 All incarcerated individuals, regardless of their housing assignment, shall be given the opportunity to submit oral or written health care requests at least daily.
- .2 Reasonable safeguards shall be implemented to ensure confidentiality, when appropriate.
- .3 Health care requests shall be picked up daily by health care staff.
- .4 Health care requests shall be reviewed and triaged daily by qualified health care professionals.

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- .5 A face-to-face encounter for a health care request shall be conducted by a qualified health care professional within twenty-four (24) hours of receipt by health care staff.
- .6 Incarcerated individuals shall be evaluated in a clinical setting as indicated.
- .7 All aspects of the health care request process, from review and triage/prioritization to subsequent face-to-face encounter, shall be documented, dated, and timed.
- .8 The frequency and duration of response to health care requests shall be sufficient to meet the health needs of the incarcerated population in a manner reasonably comparable to an individual living in the community who may be seeking health services (e.g., making an appointment with a health clinic or provider).

5.0 PROCEDURES

- .1 The Responsible Health Authority and the Responsible Mental Health Authority shall implement the facility process for incarcerated individuals to request non-emergent health care services and to receive requested services in a timely manner. The following methods may be used:
 - a. Written Health Care Requests.
 - 1. Incarcerated individuals complete the top part of the Health Care Request form [DCR 0450] and retain the patient's copy before placing it in the designated locked health care request box located in their housing area or other designated location.
 - 2. Health care staff shall pick up health care requests daily from the designated locked health care request box.
 - 3. Health care staff shall indicate the health care request form was received by stamping the date and time on the health care request form.
 - 4. Qualified health care professionals shall triage the health care request forms and conduct face-to-face encounters in a clinical setting within

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twenty-four (24) hours of receipt by health staff. Non-health care requests shall be provided a response as appropriate.

5. Qualified health care professionals shall indicate completion of the face-to-face encounter by signing the health care request form and stamping the date and time of completion on the health care request form. The health care encounter shall also be documented in the health record.
 6. When indicated, incarcerated individuals are referred to a provider. In general, when an incarcerated individual presents for non-emergency health services more than two times with the same complaint and has not seen a provider, the qualified health care professional shall schedule the incarcerated individual for an appointment with a provider.
- b. Health Care Sign-up Sheets or Logs.
1. Incarcerated individuals may sign-up for health care services using health care sign-up sheets or logs located in a designated area in housing or other designated location.
 2. Health care staff shall review health care sign-up sheets or logs daily and indicate the health care request was received by signing, dating, and timing the health care sign-up sheet or log.
 3. A qualified health care professional shall triage the health care requests from the sign-up sheet or log and conduct face-to-face encounters in a clinical setting for health care requests within twenty-four (24) hours of receipt by health staff. Non-health care requests shall be responded to appropriately.
 4. A qualified health care professional shall indicate completion of the face-to-face encounter through documentation in the health record.
 5. When indicated, incarcerated individuals are referred to a provider. In general, when an incarcerated individual presents for non-emergency health services more than two times with the same complaint and has not seen a provider, the qualified health care professional shall schedule the incarcerated individual for an appointment with a provider.

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c. Walk-In Clinic

1. Incarcerated individuals may present at scheduled walk-in clinics to request health care services.
 2. Qualified health care professionals shall indicate completion of the face-to-face encounter through documentation in the health record.
 3. When indicated, incarcerated individuals are referred to a provider. In general, when an incarcerated individual presents for non-emergency health services more than two times with the same complaint and has not seen a provider, the qualified health care professional shall schedule the incarcerated individual for an appointment with a provider.
- .2 The Responsible Health Authority and the Responsible Mental Health Authority shall monitor the process for requesting and providing non-emergency health care services and ensure that the frequency and duration of response to health care requests are sufficient to meet the health needs of the incarcerated population in a manner reasonably comparable to an individual living in the community who may be seeking health services (e.g., making an appointment with a health clinic or provider).

APPROVAL RECOMMENDED:



Deputy Director for Corrections

JAN 0 1 2024

Date

APPROVED:



DIRECTOR

JAN 0 1 2024

Date

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HEALTH CARE REQUEST

MEDICAL **MENTAL HEALTH** **DENTAL** **MEDICAL RECORDS**

Name: _____ SID #: _____

Facility/Housing: _____

Concern: _____

RECEIVED

Incarcerated Individual Signature: _____ Date: _____

Seen by Qualified Health Care Professional: Yes / No Appointment made w/: _____

Comments: _____

Health Care Staff Signature, Title: _____

COMPLETED

STATE OF HAWAII DEPARTMENT OF PUBLIC SAFETY
HEALTH CARE DIVISION

Original- Health Care

Yellow Copy- Incarcerated Individual

PSD 0450 (7/23)

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