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Screening New Arrivals	ACA Standards: 2-CO-4E-01, 5-ACI-6A-12M, 5-ACI-6A-21M, 5-ACI-6A-25M, 5-ACI-6A-28M, 5-ACI-6A-31M, 5-ACI-6A-32M		
Steven Harpe, Director Oklahoma Department of Corrections		Signature on File	

Screening New Arrivals

Medical, dental, and mental health screenings will be conducted by qualified health-care professionals on all inmates, excluding intra-system transfers, upon arrival at the assessment and reception center. (5-ACI-6A-21M, 5-ACI-6A-31M)

I. Initial Medical/Mental Health Screening (5-ACI-6A-21M, 5-ACI-6A-28M, 5-ACI-6A-31M, 5-ACI-6A-32M)

All inmates will receive an initial medical/mental health screening within 24 hours of arrival. (5-ACI-6A-28M b#1, 5-ACI-6A-31M) The initial screening will be performed by a registered nurse or licensed practical nurse. Results of the health screening will be documented utilizing the “Medical/Mental Health Screening” ([DOC 140114A](#), attached). The purpose of the medical/mental health screening is to gather information about each new arrival’s health needs to prevent medical emergencies and identify those inmates with serious medical/mental health needs, including those that may impact security. (5-ACI-6A-12M b#2, 5-ACI-6A-21M b#2)

A. Identification of Inmates

Inmates identified as having acute medical needs will be expedited for further medical evaluation. Inmates identified as needing further evaluation for mental health services will be referred by the medical nurse within the following timeframes. (5-ACI-6A-31M b#4)

1. Time Frame for Mental Health Referral

- a. Inmates who are on neuroleptic medication will be referred to and seen by the psychiatrist by the next working day. Inmates

who are on other psychotropic (non-neuroleptic) medication will be referred to and seen by a qualified mental health professional (QMHP) by the next working day and by a psychiatrist within one week unless a more urgent need is determined by the QMHP. Additional components of the mental health intake assessment are outlined in [OP-140201](#) entitled "Mental Health Services Duties and Responsibilities." (5-ACI-6A-31M b#3, b#5, b#6, 5-ACI-6A-32M b#2, b#3, b#4)

- b. Inmates who express current suicidal or homicidal ideation will be referred immediately to a QMHP. (5-ACI-6A-31M b#1)
- c. Observations of unusual or inappropriate behavior, verbal complaint or self-report of current symptoms of mental disorders, a history of mental health treatment and any history of suicide issues will be referred to and seen by a QMHP by the end of the next working day. (5-ACI-6A-31M b#2, b#5, b#12)

B. Dental Screening

Dentists will ensure that all inmates receive a dental screening and examination in accordance with [OP-140124](#) entitled "Dental Services." (5-ACI-6A-25M b#2, b#6, b#10). This will be documented utilizing the "Initial Exam" ([DOC 140124A](#)).

II. Initial Health Assessment

A. Purpose of Health Assessment

The purpose of the health assessment is to provide essential information for diagnosis of health conditions, preventative health maintenance and treatment. The health assessment provides a baseline, which helps determine programming, work, and activity assignments or restrictions. (5-ACI-6A-12M b#2, 5-ACI-6A-31M b#2) In addition, conditions impacting security/custody will be identified (e.g., unusual body cavities: cleft palate, ostomies) in which contraband may be hidden.

B. Components of the Health Assessment

Health care providers will ensure a comprehensive health assessment is completed on each inmate within four working days after arrival. If there is documented evidence of a health assessment within the previous 90 days, a new health assessment is not required except as determined by the designated health authority. The health assessment will include but is not limited to:

- 1. Review of any medical, mental health and/or dental records from a county jail, the "Medical/Mental Health Screening" ([DOC 140114A](#),

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attached) and the “Initial Exam” ([DOC 140124A](#)) by the health care provider. (5-ACI-6A-25M b#1, b#3, b#5, b#8, b#9);

2. Completion of the “Initial Intake and Routine Physical Examination” ([DOC 140114C, attached](#)) by the health care provider to include mental health and dental. (5-ACI-6A-25M b#1, b#2, b#3, b#4, b#5, b#6, b#7, b#10); and
3. Completion of the “Individual Health Activity Profile (IHAP)” ([DOC 140113C](#)) by a registered nurse, licensed practical nurse or the health care provider. (5-ACI-6A-25M b#1, b#8)

C. Initial Physical Examination and Laboratory Requirement

The “Initial Physical Examination and Laboratory Requirement: Male” ([Attachment A](#), attached) and the “Initial Physical Examination and Laboratory Requirement: Female” ([Attachment B](#), attached) is a list of requirements to assist the health care provider in preventive health care. Prompt and thorough follow-up will be completed and documented when signs and/or symptoms of illness or disease are detected.

III. Living Will/Advanced Directive

Either at reception or upon transfer to a facility, each inmate will receive information about establishing a “ODOC Living Will/Advance Directive for Health Care” ([DOC 140138A](#)) in accordance with [OP-140138](#) entitled “Inmate Living Will/Advance Directive for Health Care and Do Not Resuscitate (DNR) Consent.” Each inmate will be offered the opportunity to designate a person other than the inmate to whom protected health information may be released utilizing the “Authorization for Release of Protected Health Information” ([DOC 140108A](#)) located in [OP-140108](#) entitled “Privacy of Protected Health Information.”

IV. Transfer from Assessment and Reception

Prior to transferring from the assessment and reception center, medical staff will complete the “Transferring Facility” section on the “Medical Transfer Summary” ([DOC 140113A](#)).

V. Receiving Facility

A healthcare chart review will be completed by a registered nurse or licensed practical nurse by the next working day of the inmate’s arrival. The chart review will be documented in the “Receiving Facility” section on the “Medical Transfer Summary” ([DOC140113A](#)).

VI. References

Policy Statement P-140100 entitled “Inmate Medical, Mental Health and Dental Care”

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OP-140108 entitled "Privacy of Protected Health Information"

OP-140124 entitled "Dental Services"

OP-140138 entitled "Inmate Living Will/Advance Directive for Health Care and Do Not Resuscitate (DNR) Consent"

OP-140201 entitled "Mental Health Services Duties and Responsibilities"

VII. Action

The chief Medical/Mental Health Officers are responsible for the compliance with this procedure.

The chief Medical Officer is responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the agency director.

This procedure is effective as indicated.

Replaced: OP-140114 entitled "Screening New Arrivals" dated December 15, 2021

Distribution: Policy and Operations Manual
Agency Website

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<u>Referenced Forms</u>	<u>Title</u>	<u>Location</u>
DOC 140114A	“Medical/Mental Health Screening”	Attached
DOC 140114C	“Initial Intake and Routine Physical Examination”	Attached
DOC 140108A	“Authorization for Release of Protected Health Information”	OP-140108
DOC 140113A	“Medical Transfer Summary”	OP-140113
DOC 140113C	“Individual Health Activity Profile (IHAP)”	OP-140113
DOC 140124A	“Initial Exam”	OP-140124
DOC 140138A	“ODOC Living Will/Advance Directive for Health Care”	OP-140138

<u>Attachments</u>	<u>Title</u>	<u>Location</u>
Attachment A	“Initial Physical Examination and Laboratory Requirement: Male”	Attached
Attachment B	“Initial Physical Examination and Laboratory Requirement: Female”	Attached