I. PURPOSE:
To establish a policy for the provision of Medical/Dental prosthetics.

II. APPLICABILITY:
To all inmates and medical/dental staff.

III. POLICY:
It is the policy of the Department of Corrections that medical/dental prosthetic devices will be provided to inmates in accordance with the procedures outlined below.

IV. PROCEDURE:
A. The practitioner will determine when a prosthetic device is indicated.
B. The criteria used by the practitioner will include, but need not be limited to:
   1. Level of functional impairment.
   2. Benefits and side effects of proposed prosthesis.
   3. Length of incarceration remaining.
C. Decisions will be made on a case by case basis. If inmates feel they are entitled to services and denied, they may appeal using the existing grievance procedures.
D. Practitioners will approve the least costly prosthetic device that will accomplish restoration of the basic functioning determined to be necessary.
E. Cosmetic services will not be provided, nor will any device not necessary for accomplishment of ordinary living tasks nor will devices be provided which will only marginally improve abilities.
F. Replacement:
   1. It is the responsibility of the department to replace prosthetic devices that have become non-functional because of long periods of use. Section IV.D. will apply for replacement devices.
   2. If a prosthetic device is lost or damaged from misuse, the department will not assume responsibility for its replacement. The inmate will be responsible for any costs associated with replacement, refer to PPD 6.16 "Health Care Co-Pay" Section IV A.
REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards
  4-4375

Standards for Adult Community Residential Services
Fourth Edition Standards

Standards for Adult Probation and Parole Field Services
Third Edition Standards

Other

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