I. **PURPOSE:**
To provide for continuity and management of health concerns during periods of time when inmates are
not allowed to go to the health services center in groups.

II. **APPLICABILITY:**
To all affected departmental personnel.

III. **POLICY:**
It is the policy of the Department of Corrections to provide for the health care needs of inmates during
periods of lockdowns when inmates are not allowed to go to the health center (see PPD 5.75).

IV. **PROCEDURE:**
A. At time of initial lockdown or as soon as it is safe, medication distribution will begin as follows:
   1. Green medications to stay with the inmates
   2. Yellow medications to be delivered by security.
   3. Red medications:
      a. The unit officer in charge (OIC) is to notify the on-duty nurse when an inmate
         indicates red medication is scheduled to be given.
      b. The nurse is to assess medication necessity and consult with the on-duty physician
         for possible change in order.
      c. The nurse is to administer on-site red medication as clinically indicated.
   4. Over-the-counter medications: After 12 hours of lockdown:
      a. The unit manager or OIC will request from the pharmacist a stock supply of aspirin
         and Tylenol.
      b. The pharmacist will determine amount and frequency of supply.
      c. Security staff will deliver per inmate request one individual packet for self-
         administration. Individual packets specify dose and frequency that is to be followed.
   5. The kitchen staff will provide medical diet trays.
   6. Scheduled outside consult visits will be completed if unit security approves the inmate’s
      movement and the physician determines that it is inadvisable to reschedule.
   7. X-rays will be done as scheduled if movement from unit is approved by security.
8. Blood work will be rescheduled and drawn by the nurse during sick call rounds.
9. Physical therapy will be withheld until the end of the lockdown and security approves movement.
10. Health services will be notified for on-site assessment of any injuries that may have occurred during the lockdown procedure.
11. Until on-site daily sick call begins, security will call health services for individual inmate health concerns.
12. If a face-to-face assessment is needed, and unless otherwise clinically indicated, the inmate will be seen for an initial assessment by nursing at the lockdown site in a suitable location.

B. LOCKDOWN MORE THAN 48 HOURS:

1. NURSING:
   a. Will begin on-site daily sick call rounds.
   b. Will provide on-site nursing assessments at a location approved by security.
   c. After sick call, nursing will return to the Health Service Center (HSC) for needed items/supplies and then return to lockdown site for interventions.
   d. As clinically indicated, will request that individuals be brought to HSC for assessments and treatments that cannot be provided at the lockdown site or for admissions to inpatient.

2. DENTAL:
   a. Concerns will be referred by nursing or security staff.
   b. As clinically indicated, security staff will be requested to escort inmates to dental services.

3. PHARMACY:
   a. For green and yellow medication refills, security staff will provide refill slips during med rounds for inmates to complete.
   b. Refill slips will be forwarded to the Pharmacy.
   c. A pharmacist will dispense medications to the unit as usual.

C. DOCUMENTATION:

1. A nurse will sign unit log signifying presence on unit for sick call or treatment.
2. All individual health care will be noted in the health record.

REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards

Standards for Adult Correctional Institutions
Fourth Edition Standards

Standards for Adult Community Residential Services
Fourth Edition. Standards

Standards for Adult Probation and Parole Field Services
Third Edition. Standards

Other:

MACLEOD/pf