

DEPARTMENT OF CORRECTION   <b>INSTITUTIONAL SERVICES DIVISION</b>	<b>DIRECTIVE NUMBER:</b> 401.06.03.064.01	<b>PAGE NUMBER:</b> 1 of 3
	<b>SUBJECT:</b> Transfer of Inmate Personnel to Other Facilities (Transport)	Adopted: 06-01-95 Revised: 05-01-99 Reformatted: 02-2001

## **01.00.00. POLICY OF THE DEPARTMENT**

It is the policy of the Idaho Board of Correction that the Department of Correction ensure proper medical, dental, psychiatric and psychological services and treatment be provided to inmates incarcerated under its jurisdiction, including those state-sentenced offenders held in non-IDOC facilities.

## **02.00.00. TABLE OF CONTENTS**

- 01.00.00. **POLICY OF THE DEPARTMENT**
- 02.00.00. **TABLE OF CONTENTS**
- 03.00.00. **REFERENCES**
- 04.00.00. **DEFINITIONS**
- 05.00.00. **PROCEDURE**

## **03.00.00. REFERENCES**

Standards for Adult Correctional Institutions, Third Edition, Standards 3-4360, 3-4361.

Standards for Health Services in Prisons, P-64.

## **04.00.00. DEFINITIONS**

Facility Health Authority: The on-site Health Authority or senior health staff assigned.

Medical Authority: Idaho Department of Correction Health Services Chief.

Medical Director: A physician (M.D.) either employed by the Idaho Department of Correction or the physician in charge if medical services are privatized.

Mid-Level Provider: Physician Assistant or Nurse Practitioner.

Qualified Health Professional: Physician, physician assistant, nurse practitioner, nurse, dentist, mental health professional and others who by virtue of their education, credentials, and experience are permitted by law within the scope of their professional practice are to evaluate and care for patients.

<b>DIRECTIVE NUMBER:</b> 401.06.03.064.01	<b>SUBJECT:</b> Transfer of Inmate Personnel to Other Facilities (Transport)	<b>PAGE NUMBER:</b> 2 of 3
--	--	-------------------------------

Regional Health Manager: The individual assigned as the primary manager who is administratively responsible for the delivery of medical services if health services are privatized.

#### **05.00.00. PROCEDURE**

The facility health authority or designee shall ensure that when a list of names of residents to be transferred is received by the medical records section, this roster of names and the accompanying medical files shall be reviewed by the senior on-site medical staff person, or his/her designee.

If a resident to be transferred requires special medication or observation during travel, this information should be documented in the medical file and made readily accessible to those transporting the inmate.

The facility health authority shall ensure that the resident's medical file and medications accompany the inmate being transported, as well as any medications or prosthesis/prosthetic appliances, wheelchairs, crutches, etc.

No medical aspects shall be overlooked, and security must be apprised of medical concerns.

There may be medical conditions where a special transport would be necessary. This includes, but is not limited to:

Handicap;

Special medical order/medication;

Geriatric;

Mental health diagnosis and presentation;

Pregnancies over five-month gestation.

The IDOC Inmate Placement Bureau has the authority and may request medical attendants on a special transport. Medical Services will cooperate. If there is a dispute, then the decision will be made by the Idaho Department of Correction Institutional Services Administrator or the Health Services Chief.

<b>DIRECTIVE NUMBER:</b> 401.06.03.064.01	<b>SUBJECT:</b> Transfer of Inmate Personnel to Other Facilities (Transport)	<b>PAGE NUMBER:</b> 3 of 3
--	--	-------------------------------

The transport team has the authority to refuse transport of an inmate requiring “special needs.” Transport will be required to make other transfer arrangements.

Upon arrival of an inmate/patient to any Department of Correction facility as a result of interstate transfer, the inmate/patient shall be given a cursory examination or review by the on-site qualified health professional or his/her designee.

The facility health authority shall not allow a patient to be transported if doing so would jeopardize that inmate’s health or medical stability.

**Out-Of-State Transfer:**

When an inmate in the custody of the IDOC is transferred out of state, a copy of the problem list, vaccination records, TB treatment and x-ray results, a list of special needs concerns, progress notes, physician orders, and other pertinent information as recommended by Institutional Services, shall accompany the patient/inmate in transport. Further, medications shall additionally be transported.

\_\_\_\_\_  
Administrator, Institutional Services Division

P

\_\_\_\_\_  
Date

Y

