

ARKANSAS REGISTER

Transmittal Sheet

Use only for **FINAL** and **EMERGENCY RULES**



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For Office

Use Only:

Effective Date _____ Code Number _____

Name of Agency _____

Department _____

Contact _____ E-mail _____ Phone _____

Statutory Authority for Promulgating Rules _____

Rule Title: _____

Intended Effective Date

(Check One)

Date

☐ Emergency (ACA 25-15-204) Legal Notice Published _____

☐ 10 Days After Filing (ACA 25-15-204) Final Date for Public Comment _____

☐ Other _____ Reviewed by Legislative Council _____
(Must be more than 10 days after filing date.)

Adopted by State Agency _____

Electronic Copy of Rule e-mailed from: (Required under ACA 25-15-218)

Contact Person

E-mail Address

Date

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance with the Arkansas Administrative Act. (ACA 25-15-201 et. seq.)


Signature

Phone Number

E-mail Address

Title

Date

 <div style="text-align: center;"> ADMINISTRATIVE RULES STATE OF ARKANSAS BOARD OF CORRECTIONS </div>	Section Number:	Page Number:
	833	1 of 3
	Board Approval Date:	
	3/30/90	
	Supersedes: 809; 824; 842; 855	Dated: 9/30/82; 2/24/88 10/18/88; 4/18/80
	Reference:	Effective Date: 4/2/90
SUBJECT: Health Services		

I. AUTHORITY:

The Board of Correction is vested with the authority to promulgate this Administrative Rule by Act 50 of 1968 as amended.

II. PURPOSE:

This Administrative Rule establishes the mission, components, adherence to appropriate standards and review mechanisms for the provision of health care services in the Department.

III. APPLICABILITY:

This Administrative Rule applies to all providers of health care to inmates. It also applies to administrators and staff making referrals and affected by recommendations of health care providers.

IV. DEFINITIONS:

- A. "Health care" refers to the variety of goods, services, personnel and procedures involved in providing the full range of prevention, evaluation and treatment of dental, medical and mental disorders.
- B. "Provider" refers to any health care organization, administrator, professional, paraprofessional or member of support staff, whether employed by the Department, under contract to the Department or paid on a fee-for-service basis, providing health care services to inmates.
- C. "Accessible" has a range of meanings depending on the acuteness and seriousness of the health disorder, but generally means that an inmate will be placed in contact with health care staff qualified to evaluate and/or treat the presenting complaint without undue delay or difficulty.
- D. "Reasonable and necessary" means that any treatable problem which significantly impairs the functioning of the individual, and/or presents a risk of contagion to others, and/or which is likely to worsen or cause unnecessary suffering without treatment, will be evaluated and treated according to the current community and professional standards and practices of health care.

V. POLICY:

It shall be the policy of the Department to provide health care services accessible to all inmates, which, at a minimum, meet reasonable and necessary health care needs.

VI. PROCEDURES:

- A. Each service shall be administered from within the Department of Correction in such a way as to ensure proper care of inmates, effective working relations with other divisions and staff, and program consistency with the mission and methods of the Department.
- B. Each administratively separate health care service shall establish policy and procedures consistent with applicable standards regulating the professional practices of that service.
- C. Each service shall establish a staffing pattern, whether based on funded positions, contract, or fee-for-service, that ensures an adequate number of staff to make services readily available, and proper credentialing to ensure quality of care.
- D. Each service shall ensure that all inmates entering the Department are screened, their health status documented, and that referrals for treatment are made promptly when serious needs exist.
- E. Each service shall establish procedures for inmate access to necessary services that are not provided within the confines of the Department. When transfer to another facility is required, procedure must address any impact on liberty interests and/or stigmatization.
- F. Each service shall have policy and supporting documentation addressing issues of informed consent about procedures, the principle of least restrictive or intrusive treatment, and the right to refuse treatment.
- G. Each service shall keep proper records of health needs and service delivery. Procedures will be written for safeguarding confidentiality and for informed consent for release of information.
- H. Each service shall have a mechanism for handling requests and grievances in such a manner as to assure prompt attention to needs and rapid resolution of problems.
- I. Each service shall have formal lines of communication with the warden/center supervisor to ensure proper notification concerning health needs, health care recommendations and incidents relating to health care services. This line of communication shall also provide for regular meetings to resolve problems and conflicts.
- J. Medical Services shall have procedures for dealing with special needs inmates, such as the aged, chronically ill, and those having severely limited perceptual or motor abilities.

- K. Mental Health Services shall have procedures for dealing with mentally disordered, mentally regarded, brain damaged and suicidal inmates, including provisions for special needs inmates requiring intensive and/or long term care.
- L. Each service shall establish some mechanism of quality review and/or certification to ensure that the service is adequately providing for the needs of the inmate population.
- M. Each service shall provide for training of staff and inmates in disease prophylaxis, recognition of problems, response to emergency health problems, and health care programs.

VII. **REFERENCES:**

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 1987.

Certification Standards for Health Care Programs, American Correctional Association, 1989.

Act 507 of 1981, 12-29-405.

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