POLICY TITLE: HEALTH CARE RECORDS POLICY NUMBER: 18.9 CHAPTER 18: HEALTH CARE SERVICES		PAGE 1 OF 6
STATE of MAINE DEPARTMENT OF CORRECTIONS Approved by Commissioner: Joseph Ponte		PROFESSIONAL STANDARDS: See Section VII
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I. AUTHORITY

The Commissioner of Corrections adopts this policy pursuant to the authority contained in 34-A M.R.S.A. Section 1403.

II. APPLICABILITY

All Departmental Adult Facilities

III. POLICY

It is the policy of the Department of Corrections to maintain health care records for all prisoners to enable health care providers to accurately assess a prisoner's health care status and document diagnoses, treatment and plan of care. The method of recording entries in the records, the form and format of the records, and the procedures for their maintenance and safekeeping shall be approved by the facility's Health Services Administrator.

IV. CONTENTS

Procedure A: Health Care Records Management
Procedure B: Transfer of Health Care Records
Procedure C: Retention of Prisoner Health Care Records

V. ATTACHMENTS

None

VI. PROCEDURES

Procedure A: Health Care Records Management

1. The health care records for each prisoner shall be maintained in an electronic format and shall include the prisoner's name, date of birth and MDOC number.

2. All progress notes entered into a prisoner's health care records shall follow a problem oriented charting style (Subjective, Objective, Assessment, Plan -- SOAP note).

3. Each prisoner's health care record (paper and/or electronic) shall contain, at a minimum, the following items filed in a uniform manner:

    a. Prisoner's name, and MDOC number on each printed sheet,
    b. Problem list, including allergies,
    c. Admission health screening form,
    d. Health assessment forms,
    e. All significant findings, diagnoses, treatments and dispositions,
    f. Progress notes,
    g. Health care practitioners' orders,
    h. Laboratory reports,
    i. X-ray reports, diagnostic studies, operative reports, pathology reports, and examination and consultation reports, and telemedicine reports, if applicable,
    j. Consent to treat and/or refusal of treatment forms,
    k. Release of information forms,
    l. Flow sheets and chronic care clinics and wellness clinics (annual examinations), and special needs treatment plan, if any,
    m. Physical activity limitation sheets,
    n. Food Service Medical Clearance Form,
    o. Immunization records,
    p. Medication Administration Record (MAR),
    q. Sick Call Slips, if applicable,
    r. Hospital, nursing home records, if applicable,
    s. Advance Directives
    t. Correspondence,
    u. Mental health records,
    v. Dental records,
    w. Optometric records,
    x. Physical therapy records,
    y. Individualized treatment plan,
    z. Place, date and time of health encounters
    aa. Hospital discharge summaries and termination summaries for outpatient treatments and special services, as applicable,
    bb. Information received as a result of release of information requests, if applicable,
    cc. Transfer and/or discharge health care summary forms, and
    dd. Documentation of prisoner death, if applicable.

4. Information related to HIV testing, treatment and follow-up may only be released to a staff member whom the Chief Administrative Officer of the facility deems has a legitimate need to know this information. This information may only be released to other agencies or individuals who, by law, have a right to view this information or by virtue of a release form signed by the prisoner or the prisoner's guardian, if applicable, specific to information relating to HIV.

5. Each entry into a prisoner's health care record shall include signature, title, date and time of entry. Each entry shall be made immediately following the event, unless impractical. A late entry shall be made as soon as possible and shall reflect the delay in making the entry.

Procedure B: Transfer of Health Care Records

1. The Classification Officer, Records Officer, or designee, shall be responsible to notify the health care staff of transfers in a timely manner to facilitate the preparation of medications and health care records, as applicable. (See Policy 18.4)

2. Once health care staff are notified of a transfer or impending transfer to another Department facility, the health care staff shall prepare a Medical Transfer form (See Policy 18.4, Attachment F).

3. When a prisoner is transferred to a facility in another jurisdiction, a Medical Transfer form shall be forwarded to the receiving facility with the prisoner, along with a printed version of the prisoner's MAR, immunization record, and a Health Care Discharge Summary (see Policy 18.5, Attachment G). Additional health care information shall be provided upon request.

4. Designated health care staff shall evaluate the prisoner's medical suitability for travel, with attention to communicable disease issues, and shall provide written instructions for the transport officers, if necessary, regarding medication or health interventions required en route, as well as any specific precautions to be taken by transport officers.

5. Upon release from a facility, a Health Care Discharge Summary (Policy 18.5, Attachment G) shall be prepared and a copy given to the prisoner or the prisoner's legal guardian, if applicable.

6. Upon release of the prisoner from the custody of the Department, health care record information shall be provided to specific and designated health care practitioners or community hospitals, only with the written request or authorization of a former prisoner who has no legal guardian or, if the former prisoner has a legal guardian, only with the written request or authorization of the prisoner's legal guardian.

Procedure C: Retention of Prisoner Health Care Records

1. Inactive prisoner health care records shall be forwarded to the facility's Classification or Records Officer, or designee, within sixty (60) days of the prisoner's release and shall be kept at the facility as set out in the Department's record retention schedules.

VII. PROFESSIONAL STANDARDS

ACA:

ACI - 4-4366 Health appraisal data collection and recording will include the following:

- **a uniform process as determined by the health authority**
- **health history and vital signs collected by health-trained or qualified health care personnel.**
- **collection of all other health appraisal data performed only by qualified health professional**
- **review of the results of the medical examination, tests, and identification of problems is performed by a physician or mid-level practitioner, as allowed by law.**

ACI - 4-4396 (MANDATORY) The principle of confidentiality applies to offender health records and information about offender health status.

- **The active health record is maintained separately from the confinement case record.**
- **Access to the health record is in accordance with state and federal law.**
- **To protect and preserve the integrity of the facility, the health authority shares with the superintendent/warden information regarding an offender's medical management.**
- **The circumstances are specified when correctional staff should be advised of an offender's health status. Only that information necessary to preserve the health and safety of an offender, other offenders, volunteers/ visitors, or the correctional staff is provided.**
- **Policy determines how information is provided to correctional/ classification staff/volunteers/visitors to address the medical needs of the offender as it relates to housing, program placement, security, and transport.**
- **The release of health information complies with the Health Insurance Portability and Accountability Act (HIPAA), where applicable, in a correctional setting.**

ACI - 4-4413 The health record file (paper and/or electronic) is complete and contains the following items filed in a uniform manner:

- **patient identification on each sheet**
- **completed receiving screening form**
- **health appraisal data forms**
- **a problem summary list**
- **a record of immunizations**

- **all findings, diagnoses, treatments, dispositions**
- **a record of prescribed medications and their administration records, if applicable**
- **laboratory, x-ray, and diagnostic studies**
- **the place, date, and time of health encounters**
- **health service reports (for example, emergency department, dental, mental health, telemedicine, or other consultations)**
- **an individualized treatment plan, when applicable**
- **progress reports**
- **a discharge summary of hospitalization and other termination summaries**
- **a legible signature (includes electronic) and the title of provider (may use ink, type, or stamp under the signature)**
- **consent and refusal forms**
- **release of information forms**

The method of recording entries in the records, the form and format of the records, and the procedures for their maintenance and safekeeping are approved by the health authority. The health record is made available to, and is used for documentation by, all practitioners.

ACI - 4-4414 **Non-emergency offender transfers require the following:**

- **health record confidentiality to be maintained.**
- **summaries, originals, or copies of the health record accompany the offender to the receiving facility. Health conditions, treatments, and allergies should be included in the record.**
- **determination of suitability for travel based on medical evaluation, with particular attention given to communicable disease clearance.**
- **written instructions regarding medication or health interventions required en route should be provided to transporting officers separate from the medical record.**
- **specific precautions (including standards) are to be taken by transportation officers (for example, masks and gloves).**

A medical summary sheet is required for all inter-and intra-system transfers to maintain the provision of continuity of care. Information included does not require a release-of-information form.

Inmates confined within a correctional complex with consolidated medical services do not require health screening for intra-system transfers.

ACI - 4-4415 **Inactive health record files are retained as permanent records in compliance with the legal requirements of the jurisdiction. Health record information is transmitted to specific and designated physicians or medical facilities in the community upon the written request or authorization of the offender.**

4-ACRS-4C-22 **If medical treatment is provided by the facility, accurate health records for offenders are maintained separately and confidentially.**

4-ACRS-4C-23 **If medical treatment is provided by the facility, the method of recording entries in the records, the form and format of the records, and the procedures for their maintenance and safekeeping are approved by the health authority.**

4-ACRS-4C-24 **If medical treatment is provided by the facility, for offenders being transferred to other facilities, summaries or copies of the medical history record are forwarded to the receiving facility prior to or at arrival.**