

	State of Indiana Indiana Department of Correction	Effective Date  4/1/2022	Page 1 of  5	Number  1.01A
<b>HEALTH CARE SERVICES          DIRECTIVE-ADULT          Manual of Policies and Procedures</b>				

Title <b>HEALTH CARE SERVICES DIRECTIVES FOR ADULT SERVICES</b>
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Legal References (includes but is not limited to)  IC 11-8-2-5 IC 34-4-12.6	Related Policies/Procedures (includes but is not limited to)  01-02-101 01-02-106	Other References (includes but is not limited to)  National Correctional Health Standards
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I. **PURPOSE:**

This document describes Health Care Services Directives (HCSDs) applicable within facilities housing incarcerated individuals. These directives present information and procedures to both Health Care Services and other staff in the Department, regarding matters of concern in the provision of Health Care Services to staff and IDP's.

This directive describes the way the Health Care Services Directives the way policies, procedures and directives are developed, distributed and maintained, and implemented.

II. **GUIDELINES:**

A. Policy

Within the Department the term, "Policy," is a statement of executive intent and is normally used in conjunction with administrative procedures, both of which come from Central Office.

Formal direction from Central Office to the facilities may come in the form of Executive Directives, Administrative Procedures, and Division Directives. The Division of Health Services generally provides its direction to the facilities in the form of Health Care Service Directives.

Executive Directives are used by the Executive Staff and will not be addressed in this HCSD.

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**B. Development of HCSD**

HCSDs shall be developed by the Division of Health Services Executive Directors, CMO and/or Directors, in conjunction with the Health Services staff and shall cover topics relevant to the health and welfare of staff and incarcerated individuals within the Department.

Upon learning of the need for a HCSD, the Executive Directors shall consult with appropriate staff and seek their input in its development and regarding its potential impact. The appropriate Executive Director shall have the HCSD developed and prepared as described in this document.

Prior to issuance, HCSD drafts shall be forwarded to the Department Policy Manager for review. The Department Policy Manager shall ensure consistency of format and compliance with related policies or directives. Following the Department Policy Manager's review, the Department Policy Manager shall have it reviewed by appropriate Central Office personnel who shall advise regarding its approval.

Upon the completion of necessary reviews and approvals, the Department Policy Manager shall prepare an Executive Directive for signature. The HCSD shall be distributed under cover of an Executive Directive to all facilities and appropriate divisions.

**C. Format of HCSDs**

HCSDs shall follow a format similar to that demonstrated in this document. Each HCSD shall be numbered, dated, and titled.

Each HCSD shall have a permanent number assigned to it. This number shall not change when the HCSD is revised. Each number shall consist of one digit before and two digits following a decimal point, e.g., 1.01, 2.03, and so on. In a general sense, each digit shall include similar types of HCSDs as follows:

1.00	Administrative
2.00	Practice Guidelines
3.00	Physical Health
4.00	Behavioral Health
5.00	Transitional Health

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6.00

Oral Health

HCSDs shall be written in narrative form and shall include as general headings:

- Identifying caption
- Title
- Purpose – a brief description of the reason that the HCSD is issued,
- Guidelines – the information or direction
- Site Specific Needs – direction to individual facilities regarding making the HCSD applicable to individual sites, and
- Applicability
- Signature or record of approval by the Chief Medical Officer (CMO)

Headings may be subdivided.

Each page shall be numbered and identified by HCSD name and number.

#### D. Review of HCSDs

HCSD shall be reviewed annually for relevance and updates. The Division's Executive Directors shall review all HCSDs and Healthcare Policies annually and report to the CMO. The Department Policy Manager will be notified of the completed review by the Health Services Operations Administrator.

Any HCSDs found to be inaccurate or out-of-date shall be revised or rescinded by the Department as quickly as possible. Revisions shall be circulated as new HCSDs superseding old ones, and not as corrections in separate memoranda. Facility, division staff, and Health Services Vendor shall be notified by the Department Policy Manager in writing when HCSDs are rescinded.

#### E. Maintenance of HCSDs

Wardens or designee shall ensure that copies of all HCSDs are maintained for use by facility administrative staff and other required staff. Additionally, copies of HCSDs shall be maintained by the Health Services staff in Health Services areas for day-to-day use by staff.

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HCSDs are designated as public information but there is no requirement that they, as internal working documents, be filed in the facility law libraries. Should an incarcerated individual or a member of the public request to review or a copy of an HCSD, staff shall make the HCSD available. Copies shall be provided in accordance with Department procedures governing the release of information. If an HCSD is determined to be confidential/restricted, at the time of distribution the facility shall be notified in the covering Executive Directive and the HCSD shall be so marked.

The Department Policy Manager shall maintain master copies of all HCSDs.

#### F. Implementation

Wardens are responsible for local implementation of HCSDs and shall work closely with Health Care Administrators to accomplish this. When requested or appropriate, technical assistance shall be provided by Central Office Health Services staff.

Although some Policies, Procedures, and HCSDs are sufficiently precise to permit implementation, others require additional local directives for proper implementation. The local directive is called a “Facility Directive” and is described in Policy and Administrative Procedure 00-04-101, “The Development, Approval, and Implementation of Policy.” When site specific Directives are necessary, they are subject to Central Office review prior to implementation and to annual review at the local level.

Compliance with HCSDs is mandatory. If local compliance appears to be problematic, the Warden shall submit a completed State Form 48584, “Request for Exemption from Policy,” describing the difficulty, suggesting solution(s), and requesting permission to act other than as required by the HCSD, to the Department Policy Manager. The Department Policy Manager shall cause this request to be reviewed by appropriate Health Services Executive Directors and appropriate Division Executive Directors. After this review, the Department Policy Manager shall submit State Form 48584 to the CMO for final approval/denial. After receiving the approval or denial, the Department Policy Manager shall forward the State Form 48584 to the Warden and Facility Policy Manager. The Health Services Operations Administrator and the Department Policy Manager shall maintain these responses with the involved directives in their master files.

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### III. FACILITY SPECIFIC REQUIREMENTS:

Each facility shall establish locations in which manuals including up-to-date copies of HCSDs shall be maintained. These locations shall be sufficient to permit Health Services staff to become familiar with HCSD content and to facilitate consultation of the HCSDs as jobs are performed. No facility directive is required for this HCSD.

Each facility must maintain compiled manuals including

- Department Policies directly relevant to health service provision,
- All HCSDs and attachments
- Approved guidelines and protocols
- Approved manuals
- The site-specific materials which are necessary for health service provision.

These manuals must be readily available to personnel who need to use them, in areas such as infirmaries, outpatient clinics, and administrative offices.

At facilities, all manuals shall be kept current so that personnel can rely upon their contents.

### IV. APPLICABILITY:

This Health Care Services Directive is applicable to all facilities providing Health Services to incarcerated adults.

signature on file

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Kristen Dauss, MD  
Chief Medical Officer

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Date