

	State of Indiana Indiana Department of Correction	Effective Date 4/1/2022	Page 1 of 2	Number 1.20
HEALTH CARE SERVICES DIRECTIVE-ADULT Manual of Policies and Procedures				

Title NOTIFICATION IN EMERGENCIES

Legal References (includes but is not limited to) IC 11-8-2-5	Related Policies/Procedures (includes but is not limited to) 01-02-101	Replaces: National Correctional Healthcare Standards
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I. PURPOSE:

This Health Care Services Directive (HCSD) describes the process through which next-of-kin are notified regarding health-related emergencies.

II. GUIDELINES:

- A. Next-of-kin, as designated in the incarcerated individual's facility packet, shall be notified in the event of an incarcerated individual's admittance to a critical care unit or placed on imminent death status. The person calling shall be provided with appropriate information prior to making a call. Only the following information may be communicated to next-of-kin when calling regarding a critically ill incarcerated individual:

1. Identification of the caller;
2. Incarcerated individual name and number; and,
3. Diagnosis including any other relevant clinical information.

- B. Contact with next-of-kin should be made by the Warden or designee in the case of any death.

The Warden is encouraged to permit visitation when the incarcerated individual is on imminent death status, unless there is a security concern that precludes this. If visitation is permitted, the Warden or designee shall provide the following information:

1. Name and number of the individual;
2. Reason for the call;
3. Name of hospital; and,
4. Telephone and room number of the hospital.

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- C. If direct notification has been successful, a letter confirming the information provided shall be sent from the Warden's or Deputy Warden's office to confirm.
- D. If telephone notification to next-of-kin fails, the Office of Investigations and Intelligence, local or State police may be contacted for assistance. If this also fails, a mailgram containing the information described in "B" shall be sent to the next-of-kin of record.
- E. If requests for information are received by the facility or by hospital personnel, the requests shall be referred to the Warden's office. This office shall provide only the information as described above in "B."

III. APPLICABILITY:

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

signature on file

Kristen Dauss, MD
Chief Medical Officer

Date