1. **AUTHORITY:** The Secretary of the Department of Public Safety and Corrections and La. R.S. 36:404.


3. **PURPOSE:** This policy serves to ensure emergency medical, dental and mental health services are available to all offenders in an efficient and expedient manner, 24 hours a day.

4. **APPLICABILITY:** Deputy Secretary, Chief of Operations, Department’s Medical/Mental Health Director, Regional Wardens, Wardens, Unit Health Directors, Health Care Professionals, Health Care Practitioners/Providers, Health Care Personnel/Staff. Each Warden is responsible for ensuring that appropriate unit written policy and procedures are in place to comply with the provisions of this policy.

5. **POLICY:** The Secretary’s policy is to ensure offenders have access to twenty-four (24) emergency health/mental care for acute illnesses and unexpected health care needs which cannot be deferred until the next scheduled sick call.

6. **DEFINITIONS:**

   **Emergency Care:** Care of an acute illness or an unexpected health care need which cannot be deferred until the next scheduled sick call.

   **Emergency Plan:** A written document or written documents which address specific actions to be taken in an institutional emergency or catastrophe, such as a fire, flood, hurricane, riot, or other major disruption.

   **Facility:** A place, institution, building (or part thereof), set of buildings, or area (whether or not enclosing a building or set of buildings) which is used for the lawful custody and/or treatment of individuals.
D. **Health Authority:** The health administrator, health unit, health section, or individual responsible for the provision of health care services at an institution, system of institutions, or facility. For example, the responsible, treating physician may be a health authority, as may be the Unit Health Director.

E. **Health Care Personnel/Staff:** Individuals whose primary duty is to provide health services to offenders in keeping with their respective levels of health care training, licensure, certification, or experience.

F. **Health Care Practitioner/Provider:** Clinicians trained to diagnose and treat patients, such as physicians, dentists, psychologists, licensed professional counselors, licensed social workers, podiatrists, optometrists, nurse practitioners, and physician assistants.

G. **Health Care Professionals:** Staff who perform clinical duties, such as health care practitioners/providers, nurses, licensed professional counselors, social workers, and emergency medical technicians, in accordance with each health care professional's scope of training and applicable licensing, registration, certification, and regulatory requirements.

H. **Mental Health Care Practitioner/Provider/Professional:** A mental health staff member who is qualified to diagnose and treat patients with a mental illness (for example, physicians, physician extenders, psychologists, licensed professional counselors, and social workers), in accordance with each mental health care professional's scope of training and applicable licensing, registration, certification, and regulatory requirements.

I. **Mental Health Care/Services:** The sum of all actions taken for the mental well-being of the offender population, including a range of diagnosis, treatment, and follow-up services. Mental health care and services may include the use of a variety of psychosocial, psychoeducational, and pharmacological therapies, either individually or in group settings, to alleviate symptoms, attain appropriate functioning, prevent relapses, and help patient-offenders develop and pursue their person recovery plans and cope with emergency situations.

### 7. PROCEDURES:

A. Each facility shall have a written plan for twenty-four-hour emergency medical, dental, and mental health services.

B. This twenty-four-hour emergency medical, dental, and mental health care or services plan shall include:
1) On-site emergency first aid;
2) Crisis Intervention;
3) Emergency evacuation of the offender(s) from the institution or facility;
4) Use of an emergency medical vehicle;
5) Use of one or more predetermined designated hospital emergency rooms or other appropriate health facilities;
6) Emergency on-call or available twenty-four hours per day, healthcare practitioner, including dental and mental health, professional services when the emergency health facility is not located in a nearby community;
7) Security procedures providing for the immediate transfer of offenders, when appropriate;
8) Emergency medications, supplies, and medical equipment.

C. The Health Authority shall report immediately to the Warden any situation or condition which poses a danger to staff or offender health and safety.

D. Each institution’s or facility’s health care staff shall be trained in the implementation of the facility’s emergency plans.

E. Health care staff shall be included in each facility’s or institution’s emergency drills, as applicable.

F. Designated Correctional Officers and all direct health care staff shall be trained to respond to health-related situations within a four (4)-minute response time.

G. A training program for correctional officers and all health staff shall be conducted and documented on an annual basis, as established by the Health Authority in cooperation with the Warden, and shall include instruction regarding the following:

1) Recognition of signs and symptoms and knowledge of action required in potential emergency situations;
2) Administration of basic first aid;
3) Certification in cardiopulmonary resuscitation (CPR) in accordance with the recommendations of the certifying health organization;
4) Methods of obtaining assistance;
5) Signs and symptoms of mental illness, violent behavior and acute chemical intoxication and withdrawal;
6) Procedures for patient transfers to appropriate medical facilities or health care providers; and
7) Suicide intervention.
Note: Offenders requiring emergency transport shall be accompanied by correctional staff who shall be available upon arrival of the emergency medical vehicle.

s/James M. Le Blanc
Secretary

This Health Care Policy supersedes Health Care Policy No. HC-04 dated 15 April 2011.