

Continuation of Care

721.1 PURPOSE AND SCOPE

The purpose of this policy is to establish and maintain a proactive health system in the facility that fosters the continuation of health care needs that, if discontinued, would have a negative effect on the health of the inmate. The sole objective is to maintain or improve the health of the inmates. This policy is intended to ensure that inmates receive health services in keeping with current community standards as ordered by qualified health care professionals.

721.2 POLICY

It is the policy of this agency that all inmates shall have access to the continuation of care for a health issue, provided the treatment plan meets community standards. The inmate's health care needs will be assessed by qualified health care professionals and continued as determined or referred after release.

721.3 CONTINUITY OF CARE

The Jail Commander is responsible for coordinating with the Responsible Physician to ensure that all inmates receive appropriate health care, including, but not limited to:

- (a) Newly booked inmates shall have a medical screening as part of the booking and classification process. This screening includes documentation of acute or chronic health issues or conditions, existing injuries and medications or treatments the inmate is currently receiving.
 - 1. Any prior jail health records, including those from other facilities, should be reviewed.
 - 2. Current medications will be verified and continued as deemed appropriate by the Responsible Physician or the authorized designee.
- (b) A health appraisal is completed on or before the 14th day of continuous incarceration.
- (c) Individual treatment plans that are used to guide treatment. The format for planning may vary but should include, at a minimum:
 - 1. The frequency of follow-up for medical evaluation and adjustment of treatment modality.
 - 2. The type and frequency of diagnostic testing and therapeutic regimens.
 - 3. When appropriate, instructions about diet, exercise, medication and adaptation to the correctional environment.
 - 4. Custody staff is informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate.
- (d) Reasonable effort should be made to obtain information and records relating to previous health care professionals with the consent of the inmate, if the inmate is currently under medical care.

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- (e) Upon transfer to another facility, a medical discharge summary of the inmate's current condition, medications and treatment plan will be forwarded in a sealed envelope (to maintain confidentiality) to the receiving facility.
- (f) Response to requests for health information from medical facilities and health care professionals, with the inmate's written consent.
- (g) When inmates are sent out of the facility for emergency or specialty medical treatment, written information regarding the inmate's reason for transfer, pertinent medical problems and list of current medications should be sent with the inmate and may be given to those providing care upon request. The name and phone number of a contact person who the medical facility can call should be included with the patient health information. Upon the inmate's return to the facility, treatment recommendations should be reviewed by the Responsible Physician or the authorized designee and appropriate plans should be made for continuing care in the facility based on the treating facility's diagnosis, recommended medications and other treatment.
- (h) Upon release from the facility, inmates should be given written instructions for the continuation of care including, but not limited to:
 - 1. The name and contact information of health care facilities for follow-up appointments.
 - 2. Prescriptions and/or an adequate supply of medication for those with chronic medical or psychiatric conditions.