State of Iowa Department of Corrections

Policy and Procedures

Policy Number: HSP-619
Applicability: DOC
Policy Code: Public Access
Iowa Code Reference: N/A
Chapter 6: Health Services
Sub Chapter: Acute/Specialty Services
Related DOC Policies: IO-SC-18
Administrative Code Reference: N/A
Subject: Medical Care Observation
ACA Standards: N/A
Responsibility: Dr. Jerome Greenfield
Effective Date: March 2021
Authority:

1. PURPOSE

The purpose of this policy is to have a system in place that allows for observation of a patient for possible medical conditions which may require additional monitoring to ensure health concerns are addressed properly.

2. POLICY

It is the policy of IDOC that patients that may pose a health threat to themselves or others, or who require additional medical monitoring, will follow the procedure outlined below for consistency throughout the institutions.

3. DEFINITIONS

A. Medical Care Observation (MCO) - a status for those with medical issues that warrant closer observation than their current living situation allows.

B. Dry cell - a segregation status that is used by security to place patients in when reasonable belief exists that a patient has ingested contraband. This status can only be authorized by the Warden and must be re-evaluated every 7 days by the Warden.

C. See IDOC Policy **AD-GA-16** for additional definitions.

4. PROCEDURES

All institutions within the IDOC will utilize this policy to monitor a patient's medical status that provides accurate observation and ensures health concerns are addressed properly.

A. Medical Care Observation may be used for the following reasons (not all inclusive):

1. To observe for seizure activity
2. To place patients in a status that reduces contact with other patients.
3. To monitor activities of daily living.
4. To monitor medical treatment compliance issues
5. To ensure preps for UIHC are completed.

Medical Care Observation shall never be used for segregation or punitive actions.

B. Authorization/Notification

1. Any licensed member of the health services team may determine if Medical Care Observation is warranted.
2. A medical practitioner must be consulted for the observation status and provide necessary orders.
3. Security staff will be notified by the Health Services staff member that placed the patient in MCO.
4. Each institution's procedure will designate the housing assignment when MCO is utilized.

C. Documentation and Monitoring Standards

1. Nursing staff will assess the patient and write a Nursing Encounter to include vitals each shift to include their mental health status.

2. Medical practitioners will see the patient on the next working day and complete an encounter when placed in MCO, and then see weekly or more frequently if indicated until released from MCO.

3. The medical provider will determine when a patient can be released from MCO status.

D. Patient Property/Privileges

Property and privileges for patients in MCO will be the same as if in administrative segregation status.

E. Discontinuation of MCO

1. Criteria to be considered for discontinuation of MCO status:

    a. Improvement in symptoms, no longer infectious or contagious.

    b. Patient compliance with recommended medical treatment.

    c. Patient is able to perform daily activities.

2. The medical practitioner has final responsibility for terminating Medical Care Observation. The living unit and shift supervisor shall be notified of the discontinuation order by Health Services Staff and documentation completed in ICON Medical.

F. Dry Cell

1. When reasonable belief exists that a patient ingested contraband, health services staff will be immediately notified by security staff.

2. Nursing staff will complete a head to toe assessment of the patient and immediately refer to the on-site practitioner to determine medical management.

3. In the event the on-site practitioner is unavailable, nursing staff will notify the on-call practitioner to determine the medical management of the patient.