MONTANA STATE PRISON
OPERATIONAL PROCEDURE

Procedure:	**MSP HS E-02.0 INTAKE HEALTH SCREENING AND PHYSICAL ASSESSMENT**
Effective Date:	11/01/2010 Page 1 of 4
Revision Date(s):	10/01/2024; 06/30/2026
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I. PURPOSE

Establish processes to ensure all inmates arriving at Montana State Prison are screened to identify urgent or emergent health needs and receive initial health assessments.

II. DEFINITIONS (see Glossary)

III. REQUIREMENTS

A. General Requirements:

1. Admissions staff will ensure that each inmate arriving at the Martz Diagnostic and Intake Unit (MDIU) completes a *Receiving Questionnaire* as part of the initial intake process. This questionnaire will be reviewed by MDIU admissions staff immediately upon completion by the inmate.
2. Information should be provided to the offender during intake processing on how to access health services, including emergency, routine medical, dental, and mental health services including how to utilize the grievance process for health-related complaints.
3. MDIU admissions staff will immediately refer any inmate who has impaired consciousness, is bleeding, or is otherwise in need of medical attention to the appropriate on-site medical and/or mental health staff for care and medical clearance into the facility.
4. MDIU intake staff will immediately refer (to medical or mental health staff for care and medical clearance into the facility) any inmate who reports on the *Receiving Questionnaire*:
   a. positive answers for symptoms of contagious diseases or illness,
   b. to be on chronic medications (for example, insulin), and/or
   c. to have significant mental problems.
5. If health care staff are not currently on duty at the MDIU for immediate referrals, admissions staff will contact and notify other MSP health care or mental health staff of the inmate's condition.
   a. If hospitalization or outside emergency care occurs, admission or return to the facility will be predicated upon written medical clearance from the hospital.

B. Screening

1. Receiving Screening will be completed by the Qualified Health Care Professional on all incoming inmates within 24 hours of their arrival in order to identify any acute or current health related conditions or requirements.
   a. Nursing staff will use the EHR *Receiving Screening* as approved by the RHA.
   b. Receiving Screening will be conducted using a form and language fully understood by the inmate. Nursing staff will also consider appropriate communication for inmates who may have a physical (for example, speech, hearing, sight) or mental disability.

2. At minimum, MDIU health care staff will inquire about:
   a. current and past illnesses, health conditions, or special health requirements (for example, hearing impairment, visual impairment, ambulation impairment);
   b. current assistive devices (for example, ambulation aids, eyeglasses, hearing aids, sleep apnea machine, monitors, implanted devices);
   c. past serious infectious disease;
   d. recent communicable illness symptoms (for example, a chronic cough, coughing up blood, lethargy, weakness, weight loss, loss of appetite, fever, night sweats);
   e. past or current mental illness, including hospitalization;
   f. history of or current suicidal ideation;
   g. dental problems (decay, gum disease, abscess);
   h. allergies;
   i. special dietary needs;
   j. prescription medications (including type, amount, and time of last use)
   k. legal and illegal drug use (including type, amount, and time of last use);
   l. current or prior drug withdrawal symptoms;
   m. current symptoms or need for testing for chlamydia, gonorrhea, HIV, Hepatitis C, syphilis, etc.; and
   n. other health problems as designated by the responsible physician.

3. MDIU health care staff, using the EHR *Receiving Screening* form will record observations of the inmate's:
   a. behavior (for example, disorderly, appropriate, insensible);
   b. state of consciousness (for example, alert, responsive, lethargic);
   c. ease of movement (for example, body deformities, gait);
   d. breathing (for example, persistent cough, hyperventilation);
   e. skin (including lesions, jaundice, rashes, infestations, bruises, scars, tattoos, and needle marks or other indications of drug abuse); and
   f. appearance (for example, sweating, tremors, anxious, disheveled).

4. MDIU health care staff will pay attention for signs of trauma and will report suspected abuse of inmates in custody to the appropriate authorities. Inmates with recent signs of trauma are to be treated or referred immediately for medical and/or mental health treatment if needed.

5. When clinically indicated, MDIU health care staff will immediately refer inmates to the appropriate health care service and note this referral on the EHR *Receiving Screening* form in the EHR.

6. MSP Health Services may request any individual with comprehensive medical issues or needs to be a priority for prioritized classification and movement into a main compound housing unit.

7. MDIU health care staff will indicate the disposition of the inmate (for example, immediate referral to an appropriate health care service, placement in general population) in the EHR *Receiving Screening* form and will assure that disposition is appropriate to the findings of the form.

8. MDIU health care staff will initiate a request for outside medical records at the time of the intake assessment as deemed necessary by that staff. This will include obtaining a signed release from the inmate. This request will be documented in the appropriate area in the EHR.

9. MDIU health care staff will:
   a. complete a screening test for tuberculosis; and
   b. isolate inmates identified as having pulmonary tuberculosis disease from the general inmate population and will initiate immediate treatment for the disease.

10. MDIU health care staff will identify and address immediate health needs and isolate potentially infectious inmates.

11. All incoming medication and medication administration records will be reviewed by nursing staff with a provider and continued as appropriate.

C. Health Assessment

1. The physical assessment will be completed by a physician, physician assistant, nurse practitioner, or other practitioner as permitted by law as soon as possible, but no later than 7 calendar days after the inmate's arrival. The physical assessment is conducted with the intent that clinicians assess, identify, and develop a plan for meeting the health needs of the individual. The initial physical assessment will include, but is not limited to:
   a. a review of the receiving screening results;
   b. the collection of additional data to complete the medical, dental, and mental health histories;
   c. review of past, available health records;
   d. a recording of vital signs collected by a Qualified Health Care Professional that includes height, weight, pulse, blood pressure, and temperature);
   e. physical examination (including rectal and testicular exams as indicated by the patient's gender, age, risk factors, and clinical practice guidelines);
   f. laboratory and/or diagnostic tests for communicable diseases including sexually transmitted disease as indicated in *DOC 4.5.11 Infection Control Program*;
   g. other diagnostic labs when appropriate;
   h. immunizations when appropriate;
   i. specific problems are integrated into an initial problem list in the individual medical chart;
   j. diagnostic and therapeutic plans for each problem are developed as clinically indicated; and
   k. enrollment in the appropriate chronic care category.

D. Transfer Screening

1. Transfer Screening will ensure that inmates transferred within the Montana Department of Corrections system continue to receive appropriate health services.

2. Intra-system transfers into MSP will receive a nursing screening assessment and will be scheduled for a provider physical assessment as outlined above. This will happen in a timely manner.

3. When transferred from an intake facility, inmates who have not had initial medical, dental, or mental health assessments are to be evaluated as outlined above in a timely manner.

4. Documentation in the EHR will demonstrate continuity of health care and medication administration.

5. If health records have not been forwarded with the inmate, they should be requested in a timely manner to assure continuity of health care and medication administration.

E. Mental Health Screening and Evaluation

1. This is to be conducted as outlined in *MSP HS E-05.0 Mental Health Screening and Evaluation*.

IV. CLOSING

Questions about this procedure should be directed to the Medical Health Services Manager.

V. REFERENCES

A. *NCCHC Standards P-E-02, P-E-03, 2018*
B. *DOC 4.5.11 Infection Control Program; DOC 4.5.13 Intake and Receiving Health Screening; DOC 4.5.14 Offender Health Care Assessments*
C. *MSP 4.1.1 Inmate Admission Process; MSP HS B-02.4 Disease Prevention TB Control Plan; MSP HS E-05.0 Mental Health Screening and Evaluation*