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GOVERNOR

# State of Alabama Department of Corrections

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COMMISSIONER

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**ADMINISTRATIVE REGULATION  
NUMBER** 700

**OPR: HEALTH SERVICES**

## **OFFICE OF HEALTH SERVICES DIVISION**

### **I. GENERAL**

This Alabama Department of Corrections (ADOC) Administrative Regulation (AR) establishes the responsibilities, policies, and procedures for the Office of Health Services (OHS) Division. The assigned OHS Associate Commissioner is duly authorized and responsible for the management, implementation, and oversight of the health services, care, treatment, and programs provided for the inmates assigned to the custody of the ADOC.

### **II. POLICY**

This AR quantifies the authority, duties, and responsibilities of the ADOC – Office of Health Services. The Department’s intent is that all administrative and clinical decisions and actions regarding the provision of health services and programs is based on the philosophy that medical, dental, and mental health decisions should be made for medical, dental, and mental health reasons by qualified medical, dental, and mental health professionals.

The Department’s intent is to ensure that inmates in the custody of ADOC have access to medical, dental, and mental health services and are housed in institutions that can provide for the inmates specific health care needs, with the assistance of the Office of Health Services.

### **III. DEFINITION(S) AND ACRONYM(S)**

- A. **Administrative Management:** A person who by virtue of licensure and/or certification, or allied health education and administrative experience, is capable of assuming responsibility for arranging all levels of health care and ensuring appropriate and accessible health services.
- B. **Clinical Management:** The examination and treatment of patients, the evaluation of care and services provided, or omitted, as relative to clinical outcome and expected patient goal attainment.

- C. **Health Authority:** The licensed and/or certified allied health professional, governmental health authority, or health care contractor responsible for the institution's health care services, including arrangements for all levels of health care and ensuring quality and accessibility of all health services provided to inmates.
- D. **Health Care Services:** The sum of all actions taken, preventative and therapeutic, to provide for the physical and mental well-being of the inmate population. This includes, but is not limited to, medical and dental services, mental health services, nursing, pharmaceutical services, personal hygiene, and dietary services, and environmental conditions.
- E. **Health Staff:** This includes all qualified health care professionals as well as administrative and support staff such as - health record administrators, laboratory technicians, nursing and medical assistants, and clerical workers.
- F. **Health Service Vendor:** An entity by virtue of practice and experience that is contracted by the ADOC to provide health services (medical, dental, or mental health) to the inmate population.
- G. **Inmate:** An individual sentenced to serve a prison term in the custody and control of the ADOC.
- H. **Institution:** An Alabama Department of Corrections (ADOC) prison, community based facility/work center, work camp, or other designated housing unit where ADOC inmates are assigned.
- I. **Medical Services:** The management and provision of constitutionally adequate, comprehensive medical services to identified inmates sentenced to the ADOC. Services encompass various levels of care to include a full range of on-site and off-site primary, secondary, and tertiary care.
- J. **Mental Health Services:** The management and delivery of constitutionally adequate, comprehensive mental health services to identified inmates sentenced to the ADOC. Services encompass various levels of care to include a full range of psychiatric and psychological treatments, procedures, programs, institutional staffing and management. The provision of services is primarily provided on-site at the institutions.
- K. **Provider:** A licensed physician, nurse practitioner, physician assistant, dentist, or mental health clinician.
- L. **Qualified Health Care Professionals:** This includes, but is not limited to, physicians, physician assistants, nurses, nurse practitioners, dentists, mental health professionals, and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for patients.
- M. **Qualified Mental Health Professionals:** This includes, but is not limited to, psychiatrists, psychologists, psychiatric social workers, psychiatric nurses, and others who by virtue of their education, credentials, and

experience are permitted by law to evaluate and care for the mental health needs of patients.

- N. **Quality Improvement/Quality Assurance Review**: A procedure to monitor and improve upon the fundamental aspects of the health care services system.
- O. **Triage**: The sorting and classifying of an inmate's health care request by qualified health care professionals to determine priority of need and the proper place for health care to be rendered.

#### IV. **RESPONSIBILITIES**

- A. The Associate Commissioner of the Office of Health Services is responsible for:
  - 1. Serving as the ADOC advisor to the Commissioner in matters related to the administration and provision of health care services provided to ADOC inmates.
  - 2. Serving as a technical and financial advisor in matters related to the procurement of contracts relevant to the provision of inmate health care services.
  - 3. Implementing, administering, and monitoring the provision of health care services and treatment programs for those inmates assigned to the ADOC.
  - 4. Directing and supervising the Office of Health Services Division.
  - 5. Providing direction and oversight to the health services vendor(s).
  - 6. Providing direction to the ADOC staff in inmate health care matters.
  - 7. Clarifying health care mission, as necessary and relevant, in the overall processes required for the provision of inmate health care services, and treatment programs.
  - 8. Initiating Administrative Regulations, directives, policies and procedures as relative to ADOC and the OHS Division.
  - 9. Serving as the administrative authority for health care services and treatment program decisions.
  - 10. Selecting, directing, and supervising the ADOC Contracted Medical Director who will be the clinical authority for health care services and treatment programs.

11. Determining the goals and objectives for the inmate health care services and treatment programs.

B. The ADOC Contracted Medical Director is responsible for:

1. Serving as the ADOC Clinical Health Authority in matters directly related to the clinical management of treatment provided by the ADOC's contractors or agents in the delivery of inmate health care services.
2. Serving as the ADOC advisor in matters related to treatment protocols, secondary, and tertiary case management.
3. Serving as an advisor to the OHS Associate Commissioner in clinically related matters.

C. The Office of Health Services Division is responsible for:

1. Implementing the requirements established by this regulation.
2. Monitoring assigned areas of responsibility to ensure expectations are met.
3. Investigating inmate health care services complaints, inquiries, or grievances.
4. Reporting deviations from inmate health care service goals and provide recommended corrective action(s).
5. Working cooperatively with institutional and health services administrative and clinical staff, to ensure mutual expectations are understood.
6. Working cooperatively with, and assisting, the ADOC General Counsel and legal staff in all litigation matters related to health services.

D. Wardens/Division Directors are responsible for:

1. Developing their security procedures, as necessary, for the implementation of AR 700, *Office of Health Services Division*.
2. Ensuring that designated ADOC personnel adhere to the provisions of this regulation.
3. Providing inmates access to those facility health services when this is not unreasonably related to the needs of the facility.

4. Notifying the OHS Associate Commissioner in writing if unable to implement a specific health service, or there is a conflict between ADOC and contractor polices.

E. The Health Service Vendor is responsible for:

1. Meeting the conditions and requirements of their respective contract(s) with the ADOC.
2. Defining health care services and treatment programs so health staff can competently perform their job assignments.
3. Assessing the health care services and treatment programs provided to ensure services meet constitutionally required and adequate health service provision for those inmates assigned to the ADOC.
4. Submitting recommended changes to the OHS Associate Commissioner, as necessary, for those health care services, and treatment programs provided, or omitted, that are in the best interest of the ADOC, and welfare of those inmates assigned to the ADOC.
5. Investigating health care service complaints, inquiries, or grievances submitted concerning inmate health care as reported to the vendor, as requested by the Commissioner, the Associate Commissioner, or OHS staff. Report findings expediently and appropriately.
6. Reporting issues of access to care impediment immediately to the appropriate facility Warden and OHS staff.

F. Treating Clinical Manager(s) are responsible for:

1. Providing clinically effective medical services to ADOC inmates while fostering an environment of trust and cooperation.
2. Providing continuity of health care services for the incarcerated inmates; beginning at the time of reception, continuing through their stay, and until their final release from the ADOC.
3. Recognizing and understanding the legal context of services: the right to access care, the right to receive treatment as ordered, the right to a professional medical opinion.
4. Triage and diagnosis of inmate's health needs to determine priority of need and the proper place for health care to be rendered.

**V. PROCEDURES**

Approved OHS procedures shall be posted on the ADOC Intranet, at Health Services.

**VI. DISPOSITION**

Any forms used will be disposed of and retained according to the Department Records Disposition Authority (RDA).

**VII. FORMS**

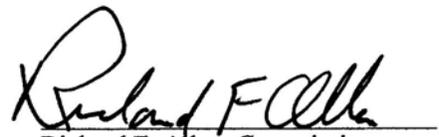
There are no forms prescribed in this regulation.

**VIII. SUPERCEDES**

This is a new Administrative Regulation and does not supercede any other regulations.

**IX. PERFORMANCE**

- A. *Estelle B. Gamble*, 429 U. S. 97 (1976), U. S. Supreme Court.
- B. *Washington v. Harper*, 494 U. S. 210 (1990), U. S. Supreme Court.
- C. *Farmer v. Brennan Et Al* 511 U. S. 825 (1994), U. S. Supreme Court.
- D. National Commission on Correctional Health Care (NCCHC), Standards for Health Services in Prisons.
- E. American Correctional Association (ACA), Performance-Based Standards for Correctional Health Care for Adult Correctional Institutions.
- F. Code of Alabama 1975 as amended § 22, Health, Mental Health, and Environmental Control.

  
Richard F. Allen, Commissioner