

GEORGIA DEPARTMENT OF CORRECTIONS



Standard Operating Procedures

Policy Name: Administrative Meetings and Reports

Policy Number: 507.01.07

Effective Date: 1/19/2022

Page Number: 1 of 4

Authority:
Commissioner

Originating Division:
Health Services Division
(Physical Health)

Access Listing:
Level I: All Access

I. Introduction and Summary:

Medical Management Committee meetings will be conducted on a quarterly basis to ensure ongoing communication and cooperative efforts between Facility Administration and Health Services Staff. This procedure is applicable to all facilities that house Georgia Department of Corrections (GDC) offenders to include private and county prisons.

II. Authority:

- A. GDC Standard Operating Procedures (SOPs): 507.01.08 Health Care Data/Statistical Reporting, 507.01.12 Continuous Quality Improvement, and 203.01 Operational Reporting;
- B. NCCHC 2018 Adult Standard: P-A-04; and
- C. ACA Standards: 5-ACI-6D-01 and 4-ALDF-7D-25.

III. Definitions:

- A. **Health Services Staff** - Includes Medical Directors, Health Services Administrators (HSA's), Medical Doctor's (MD's), Doctor of Osteopathic Medicine (DO's), Directors of Nursing (DON's), Licensed Vocational Nurses (LVN's), Registered Nurses (RN's), Licensed Practical Nurses (LPN's), Dentists, Physician Assistants (PA's), Nurse Practitioner's (NP's), Pharmacists, Mental Health Staff, as well as supporting Health Services Staff, (e.g., records staff, laboratory technicians).
- B. **Facility Administration** - Includes Wardens, Superintendents, Deputy Wardens, Deputy Wardens of Care and Treatment and Business Managers along with other key Security and Care and Treatment staff.
- C. **Medical Management Committee (MMC)** - An interdisciplinary team formed to promote ongoing communication and cooperation between Facility Administration and Health Services Staff.

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III. Statement of Policy and Applicable Procedures:

A. Quarterly Medical Management Committee (MMC) Meeting:

1. There will be at least a quarterly MMC meeting, chaired by the Responsible Health Authority.
2. The Health Services Administrator, as well as other necessary members of the Health Services Staff (medical, dental, mental health and custody staff) will attend the MMC Meetings.
3. The Facility Administrator or designee will be invited to attend the MMC meetings.
4. Guests may be invited to the MMC Meetings at the invitation of the Medical Director, Responsible Health Authority, Warden/Superintendent or Health Services Administrator.
5. Topics for the MMC meetings will include but not be limited to:
 - a. Utilization Management (UM) Report(s):
 - i. On-site services;
 - ii. Off-site care;
 - iii. Status of pending consultations;
 - iv. Other UM activities; and
 - v. Access to care issues.
 - b. Review of the most recent quality improvement reports;
 - c. Infection control;

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- d. Offender grievances and concerns;
 - e. Reports on unmet scheduled clinic appointments; and
 - f. Review of the most recent emergency drill, as appropriate.
6. Minutes will be kept and forwarded to the Warden/Superintendent, the contract vendor Regional Manager and to the Office of Health Services, as requested.

B. Monthly Staff Meeting:

- 1. In addition to the quarterly MMC meetings, a monthly Health Services Staff meeting will be held.
- 2. Minutes of the Health Services monthly staff meeting will be kept.

C. Monthly Statistical Reporting:

- 1. Monthly statistical reports will be maintained in accordance with SOP 507.01.08, Health Care Data/Statistical Reporting.

D. Staff Meetings for Transitional Centers:

- 1. Transitional Centers have at least a quarterly staff meeting attended by the Responsible Health Authority, Warden/Superintendent, or designee, along with other key Health Services Staff when applicable.
- 2. Discussions will include but not be limited to those topics listed in Section A (5) (a-f), above.
- 3. Minutes for this meeting will be kept. Copies will be distributed to the Facility Administrator and the contract vendor Regional Manager.

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V. **Attachments:** None.

VI. **Record Retention of Forms Relevant to this Policy:** None.