GEORGIA DEPARTMENT OF CORRECTIONS				
Policy Name: Standard Operating Procedures (Physical Health)				
Policy Number: 507.01.05	Effective Date: 1/19/2022	Page Number: 1 of 3		
Authority: Commissioner	Originating Division: Health Services Division (Physical Health)	Access Listing: Level I: All Access		

I. <u>Introduction and Summary</u>:

The Office of Health Services will develop Standard Operating Procedures for use by each Georgia Department of Corrections (GDC) facility. Facilities will develop Local Operating Procedures (LOPs), as necessary, to carry out the Health Services Standard Operating Procedures (SOPs). This Procedure is applicable to all facilities that house GDC offenders to include private and county prisons.

II. <u>Authority</u>:

- A. GDC Board Rule: 125-1-2-.01, 125-4-4-.01, et seq.;
- B. GDC SOPs: 101.02 Standard Operating Procedures and 101.03 Local Operating Procedures;
- C. NCCHC 2018 Adult Standard; P-A-05; and
- D. ACA Standard: 5-ACI-6D-10.

III. <u>Definitions</u>:

- A. **Policy** The official position on a particular issue.
- B. **Procedure** Describes in detail how a Policy will be carried out.
- C. **Responsible Health Authority** A licensed physician or another qualified health care professional or health administrator with all matters of medical judgement resting with a designated licensed physician or statewide medical director.

IV. <u>Statement of Policy and Applicable Procedures</u>:

- A. The following actions will occur to ensure the development and maintenance of a manual of Health Services policies to serve as the essential reference for health care staff, who deliver health care services, within the GDC.
 - 1. Standard Operating Procedures will be developed and maintained by the Office of Health Services

GEORGIA DEPARTMENT OF CORRECTIONS				
Standard Operating Procedures				
Policy Name: Standard Operating Procedures (Physical Health)				
Effective Date: 1/19/2022	Page Number: 2 of 3			
Originating Division:	Access Listing:			
Health Services Division (Physical Health)	Level I: All Access			
	Standard Operating Procedur ing Procedures (Physical Health Effective Date: 1/19/2022 Originating Division:			

- 2. A Standing SOP Committee will conduct an annual review of SOPs for the Office of Health Services.
- 3. Finalized SOPs will be submitted to the GDC Health Services Director for concurrence and forwarded to the Assistant Commissioner for Health Services to approve.
- 4. Local Operating Procedures (LOPs), which are required by SOP, will be developed by the Responsible Health Authority. Each LOP will require annual review and approval signature, including review and signature by Central Office as required in SOP 101.03 Local Operating Procedures, before implementation. Required LOPs shall be based on the following SOPs:
 - a. 507.03.09 Orientation and Training of Health Care Personnel;
 - b. 507.04.27 Sick Call;
 - c. 507.04.28 Chronic Care;
 - d. 507.04.32 Transcription of Medical Orders;
 - e. 507.04.37 Urgent and Emergent Care Services;
 - f. 507.04.39 Evaluation Services for Urgent or Emergent Health Care Requests;
 - g. 225.02 Emergency Plans;
 - h. 507.04.42 Infirmary Care;
 - i. 507.04.43 Medication Distribution System;
 - j. 507.04.57 Needle and Syringe Control;

GEORGIA DEPARTMENT OF CORRECTIONS				
Policy Name: Standard Operating Procedures (Physical Health)				
Policy Number: 507.01.05	Effective Date: 1/19/2022	Page Number: 3 of 3		
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- k. 507.05.03 Dental Emergencies;
- 1. 507.05.10 Infection Control; and
- m. 507.04.77 Access to Pharmacy After Hours.
- 5. If an LOP is in conflict with any Office of Health Services SOP, written resolution by the GDC statewide medical director will be required.
- 6. LOPs will be printed in different color paper and filed behind the respective SOP in facility SOP manuals.
- V. <u>Attachments</u>: None.
- VI. <u>Record Retention of Forms Relevant to this Policy</u>: None.