

Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 1 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

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

Clinicians may request consultations, Diagnostic Procedures, Therapeutic Procedures, or Treatment only when medically indicated and after other appropriate therapeutic measures have been implemented without satisfactory results. Consultations and procedure requests will be submitted through SCRIBE and/or contract vendor EHR system; and subject to Utilization Management (UM) review and approval. This procedure is applicable to all facilities that house Georgia Department of Corrections (GDC) offenders to including county facilities and private prisons.

II. Authority:

- A. Ga. Comp. R. & Regs. 125-4-4-.04 (2);
- B. GDC SOPs: 508.19 Mental Health Referral and Triage, 507.04.09 Hospital and Specialized Ambulatory Care, 507.04.11 Referrals for Outside Health Care Services, 507.04.12 Telemedicine, 507.04.13 Continuity of Care for Ambulatory Services, and 507.04.16 Utilization Management;
- C. NCCHC Adult Standards: P-D-04 and P-D-05; and
- D. ACA Standards: 5-ACI-6A-04, 5-ACI-6A-05, 5-ACI-6C-05, 4-ALDF-4C-05, and 4-ALDF-4D-16.

III. Definitions:

- A. **Diagnostic Procedure** Tests such as Magnetic Resonance Imaging (MRI), Endoscopy, Intravenous Pyelogram (IVP), etc., used to diagnose medical conditions.
- B. **Therapeutic Procedure or Treatment** A surgical or medical process used to treat or cure illness and/or surgical condition, such as angioplasty, inguinal hernia repair radiation therapy, etc.
- C. **SCRIBE** Statewide Correctional Repository and Information System.



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 2 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

D. **Responsible Health Authority** - A qualified health care professional, who may or may not be a physician, that is designated to ensure the provision of appropriate health care for all offenders. When this authority is other than a physician, medical judgments rest with a designated licensed physician.

IV. Statement of Policy and Applicable Procedures:

- A. Utilization Management of Consultations, Procedures and Specialty Outpatient Care:
 - 1. The Utilization Management (UM) Medical Director for the GDC vendor of health services will develop clinical protocols to be used by site Medical Directors or designees for clinical evaluation of selected medical conditions and when it is appropriate to request consultations and procedures. These protocols are subject to the approval of the GDC Statewide Medical Director.
 - 2. Consultation requests for elective procedures will be requested in accordance with the GDC Summary of Benefits.
 - 3. The Statewide Dental Director or designee will review and approve all dental and oral surgery requests.
 - 4. Mental Health referrals for evaluation will not be subject to UM review and approval. Institutional staff will request evaluations in accordance with SOP 508.19, MH/MR Referral and Triage. Utilization review of the offender's placement on the Mental Health caseload, and initiation and continuation of psychotropic medications will be conducted by GDC's vendor of Mental Health services.
 - 5. Private prisons will request consultations and procedures in accordance with Section VI. (N).
 - 6. The contract vendor will provide a written list of referral sources to include emergency and routine care. This list will be reviewed and updated annually.



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 3 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

B. Initiating Consultation or Procedure Requests:

- 1. Clinicians may initiate requests for subspecialty consultations, Diagnostic Procedures, Therapeutic Procedures, or Treatment when medically indicated, and only after other appropriate clinical strategies have been implemented.
- 2. When the clinician determines that a consultation/procedure is medically indicated, the clinician will document the rationale for the request in the progress notes and write a physician order.
- 3. The clinician will document the request for the consultation or procedure on the paper Consultation Request Form (PI-2007). This is a carbonless, duplicate form. The original will serve as the health record copy, the duplicate forwarded to the clerk/nurse for entry into SCRIBE or contract vendor EHR system.
- 4. The consultation form will be legible and completely filled out by the clinician and include the following information:
 - a. Offender name;
 - b. Offender GDC number;
 - c. Date of birth and race;
 - d. Parent facility;
 - e. Date of request;
 - f. Patient complaint/diagnosis;
 - g. Type of consultation/procedure requested;
 - h. Timing of the request (routine or urgent);



Standard Operating Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 4 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- i. A complete description of the history of the present illness, including symptom onset, duration, aggravating and alleviating factors, etc. Personal and family history relevant to the problem should also be included;
- Objective data, including positive and negative physical findings, which are pertinent to the evaluation and pertinent laboratory or diagnostic, test results;
- k. Current medications;
- 1. Clinical question(s) to be answered by the consultant, or procedures requested;
- m. Clinician signature and date the consult was completed; and
- n. Co-signature of the facility Medical Director indicating concurrence with the need for consultations initiated by mid-level providers.
- 5. After completion, the clinician will place the original copy of the Consultation/Procedure Request Form in the Consultation Section of the health record. The clinician will forward, on the same working day, the carbon copy of the Consultation/Procedure Request Form to the clerk/nurse who is responsible for maintaining the Consultation Log and entering the request into SCRIBE or contract vendor EHR system.
- C. Logging the Consultation/Procedure Request onto the Consultation/Procedure Tracking Log:
 - 1. The clerk/nurse will log each Consultation/Procedure Request onto the Consultation/Procedure Tracking Log (P-03-0005-12) within one (1) working day of receipt. For each request, the following information will be entered:
 - a. Offender name;



Standard Operating Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 5 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- b. Offender GDC number;
- c. The date ordered by the clinician;
- d. Type of request (consultation or procedure); and
- e. Timeframe in which it should be completed (urgent or routine).
- 2. Once the consultation/procedure request has been entered onto the Consultation Tracking Log, the clerk/nurse will enter the information into SCRIBE.
- D. Obtaining Access Rights for Entering Consultations/Procedures Into SCRIBE:
 - 1. The Responsible Health Authority (RHA) or designee at each facility will designate staff who are authorized to enter consultation/procedure requests into SCRIBE.
 - 2. The RHA or designee will forward the name, social security number and date of birth of each authorized person (or replacement) to the facility Operations Analyst (OA) who will forward to the SCRIBE Application Coordinator.
 - 3. The SCRIBE Application Coordinator will provide the names and requested information to the GDC Office of Information Technology (OIT).
 - 4. The OIT Section of GDC will assign access rights for entering and closing consultations at each facility.
 - 5. The OIT Section has developed a SCRIBE Medical Consults User Guide for training purposes. In addition, a Help Icon on the Medical Consult main menu will provide on-line instructions. The HSA/Nursing Authority will be responsible for ensuring that the person(s) designated to enter consultation/procedure requests into SCRIBE have been properly trained in



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 6 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

entry procedures and security of information. This guide is available on the GDC CAPTIVA website.

E. Disciplinary Practice for Non-compliance:

Medical Staff Must NEVER inform an offender of a pending appointment date or location to safeguard against escapes. Non-compliance by employees, supervisors and managers will be considered a serious infraction and will be referred to the violator's employer for an adverse employment action, up to and including termination. Such actions also may lead to criminal prosecution.

F. Entering Consultation/Procedure Requests into SCRIBE:

- 1. The clerk/nurse must enter the Consultation/Procedure request into SCRIBE as soon as possible and within one (1) working day of receipt.
- 2. The clerk/nurse will enter the consultation/procedure request into SCRIBE exactly as written by the clinician. The clerk will notify and discuss with the clinician any aspects of the request requiring clarification.
- 3. The clerk/nurse should use the SCRIBE Medical Consultation User Guide for instructions for entering the consultation/procedure request into SCRIBE or access instructions available in SCRIBE via the Help icon.
- 4. There may be periods of time when SCRIBE is temporarily unavailable (e.g., server or telecommunication problems). In these cases, the submission of the consultation/procedure request should be delayed until the problem is resolved. Do not fax the request to the UM Office.

G. Utilization Management Review and Approval of Consultation/Procedures:

1. Only the Utilization Management contractors/staff will have the access rights to approve or deny medical consultation/procedure requests.



Standard Operating Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 7 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- 2. To review consultation/procedure requests, the UM contract vendor/GDC UM will select Approve Consults from the Medical Consultation Menu. Requests will be listed in chronological order (oldest to newest). Urgent requests will be listed first.
- 3. The contract vendor UM Medical Director or Nurse Analyst will review and make a determination regarding each consultation/procedure request within five (5) working days of submission.
- 4. Utilization Management dispositions include the following:
 - a. ASMP Services;
 - b. Telemedicine;
 - c. Local Outside Services;
 - d. Local GDC Clinic/Service; and
 - e. GSP mobile surgery.
- 5. If the consultation request is likely to be approved based upon the clinical information provided, yet lacking a single piece of key information, the UM Reviewer should contact the facility (by email or phone) to request the needed information prior to making a final determination. If no response is received within two (2) working days, the request will be approved or denied based upon the available information.
- 6. If the consultation is poorly written or lacks sufficient clinical information to justify the request, or is not medically indicated, the UM Medical Director or UM Reviewer will deny the request and note in the Comments section the specific reason for the denial.



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 8 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- 7. If the consultation is entered under the incorrect request for service in SCRIBE, and the clinical information clearly indicates the appropriate service, the UM Medical Director or UM Reviewer can approve for the appropriate services. Otherwise, the request will be denied and noted in the Comments section. The consultation request should be re-submitted using the correct request for service.
- 8. Following a denial by UM, if the site Medical Director believes the consultation/procedure request is still medically indicated, the clinician will resubmit the consultation with the information requested by UM, or personally contact the UM Medical Director to discuss the case. If unresolved the contract vendor Medical Director should be consulted.
- 9. If no satisfactory resolution is achieved after consulting with the contract vendor Medical Director, the GDC Statewide Medical Director will have final authority regarding the clinical decision.
- 10. Following the UM disposition, the consultation/procedure request will be updated on SCRIBE and may be viewed by site staff with access rights. Approvals will be electronically forwarded to the UM Appointments Section.

H. Scheduling Consultation/Procedure Appointments:

- 1. Only the contract vendor Appointments staff will have the access rights to enter appointment dates and locations into SCRIBE.
- 2. The contract vendor appointments staff will directly schedule all appointments including telehealth/telemedicine.
- 3. If the appointment is scheduled to take place within five (5) calendar days, the contract vendor appointments staff will directly notify (via telephone or email) the RHA or designee at the facility to enable them to prepare the offender for the appointment. The contract vendor appointments staff must telephone the



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 9 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

RHA if the appointment is scheduled or canceled within forty-eight (48) hours of transport.

- 4. The contract vendor appointments staff will indicate in the Appointment Notes Section any clinical information needed by the consultant which should accompany the offender (e.g., diagnostic imaging disc, pre-operative instructions (i.e., NPO, bowel prep, etc.), laboratory results, etc.).
- 5. The contract vendor appointments staff will notify the ASMP appointment clerk/nurse of all appointments which are scheduled to take place at ASMP or in the Augusta area unless they are transported by the home facility. The ASMP appointment clerk will enter the information into the SCRIBE within one working day.
- 6. The contract vendor appointments staff will coordinate all unique transportation arrangements for medical appointments and notify the appropriate parties (sending and receiving facility, Warden or designee, offender administration, and facility medical staff).
- 7. The contract vendor appointments staff will coordinate with the facility staff for any consults in the local area. The contract vendor appointments staff will enter the information into SCRIBE within two working days of receipt. If the appointment date is changed, the site clerk/nurse will again notify the facility and contract vendor appointment staff will update the changes and the information will be updated into SCRIBE.
- I. Monitoring Consultation/Procedure Appointments through SCRIBE Medical Reports:
 - 1. The Responsible Health Authority and Site Medical Director responsible for tracking consultation/procedures will monitor the timeliness of appointments through SCRIBE Medical Reports.



Standard Operating Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 10 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- 2. The Ten-Day Detail Report identifies offenders who have appointments scheduled within the next ten (10) days. The Responsible Health Authority and clerk will check this report daily. This information should be utilized to coordinate with custody/security staff of all off-site medical appointments.
- 3. The Responsible Health Authority or designee will ensure that all telemedicine appointments are implemented in accordance with SOP 507.04.12 (Telemedicine).
- 4. The Responsible Health Authority or designee will review the health record to ensure that the consultation request is on the chart, and that all requested clinical information, including diagnostic discs, are available for transport with the offender. If critical clinical information is not available as requested by protocol or consultant request, the Medical Director should be notified to determine if the appointment must be rescheduled.
- 5. Each working day, the site clerk/nurse should review the Consultation Tracking Log and note the time frames for pending and scheduled appointments and determine whether the appointment falls within a target of seven (7) days for urgent consultations and procedures and a target of thirty (30) days for routine procedures and initial consultations.
- 6. The clerk/nurse should view the Scheduled Consults Report each working day to determine the time frames for which future appointments are scheduled. The clerk will update the Consultation Tracking Log in the appropriate space.
- 7. If an offender was recently transferred from another facility, the clerk/nurse will look up the offender by selecting the facility the offender was previously assigned when the initial request was made. This information must be recorded on the Consultation Tracking Log during the Intra-System Transfer review process.
- 8. The clerk/nurse will provide a written report to the site Medical Director of routine consultations/procedures, which are not scheduled to take place within



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 11 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

required time frames on a weekly basis and a daily basis for urgent consultations/ procedures.

- 9. The site Medical Director or designee will monitor patients whose appointments are scheduled outside approved time frames. If the patient is at risk of deterioration, the clinician will contact the UM Medical Director to discuss the case and determine the most appropriate course of action. This may include obtaining the medical service locally.
- 10. If the clinician determines that the patient is not at risk of deterioration, no immediate clinical action is required. The clinician will document a progress note of the assessment in the health record and continue to monitor the patient until the service is rendered.
- J. Offenders with Consultations/Procedures Scheduled who may be Transferred or Released:
 - 1. The clerk/nurse will also check the institutional transfer/release list daily, to determine whether there are offenders on the list who are imminently scheduled for a consultation/procedure.
 - 2. The clerk/nurse will notify the site Medical Director of an offender who is scheduled to be transferred. The site Medical Director will make a determination as to whether the offender should be placed on medical hold until the consultation/procedure takes place.
 - 3. The clerk/nurse will notify the site Medical Director of an offender who is about to be released through discharge or parole. The site Medical Director will make a determination as to whether the appointment should be cancelled or performed.
 - 4. The clerk/nurse will notify the site Medical Director of offenders who are scheduled to go Out-to-Court (OTC). If the site Medical Director determines that the transfer out to court will place the offender's health in immediate



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 12 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

jeopardy, the Medical Director will notify the Warden/Superintendent who will make arrangements for the requesting Judge to be notified.

5. The clerk/nurse will notify the contract vendor schedulers as soon as possible of cancelled appointments. The clerk/nurse will update the Consultation Tracking Log.

K. Closing Consultation/Procedures:

- 1. The Close Consult Module is used to indicate that the consultation/procedure appointment is completed or no longer needed. Consultations/Procedures should be closed out within three (3) working days of the offenders return to the facility.
- 2. If the service took place as scheduled, the clerk/nurse will enter in the respective field the name of the service provider, the date the service was rendered, and attending medical staff.
- 3. The clerk/nurse will locate the consultation report with findings and recommendations and enter the recommendations into the respective field (maximum 800 characters) and select the button indicating the time frame the recommendations are to be implemented (routine or urgent).
- 4. If the consultation/procedure did not take place and is no longer needed, select the option in SCRIBE that indicates the reason. This includes the following:
 - a. The offender refused treatment;
 - b. The offender was released/paroled from GDC (including out to court);
 - c. The offender is deceased; and
 - d. The clinician cancelled the request because it is no longer clinically indicated.



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 13 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- 5. If the appointment did not take place but is still clinically indicated, the consultation/procedure request cannot be closed, and the appointment must be rescheduled.
- 6. If the appointment is approved for ASMP or telemedicine, the site clerk/nurse will notify UM appointments that the appointment did not take place and that a new appointment is requested.
- 7. If the consultation is approved for local services, the contract vendor scheduling staff will make the appointment and enter the information into SCRIBE.
- 8. The clerk/nurse will update the Consultation Tracking Log to include the date the service was provided, date the consultant report was received, and date the patient is scheduled for an appointment by the clinician that initiated the request.

L. Clinical Care Following Completion of a Consultation/Procedure:

- 1. When an offender returns to the parent facility following a consultation, the nurse triaging the patient will review the consultant's findings and recommendations. If any of the recommendations are recommended urgently, an appointment with the clinician will be scheduled the next working day, otherwise within five (5) working days.
- 2. At the follow-up appointment, the clinician will review the consultant's findings and recommendations and date and initial the consultation form (or typed report if available).
- 3. If consultant/procedure reports are not yet available, the clinician will enter a progress note in the health record and reschedule the offender within ten (10) working days. Arrangements should be made to obtain the report within this time frame.



Standard Operating Procedures

Policy Name: Consultations and Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 14 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- 4. The clinician will discuss the findings and recommendations with the offender and develop a written plan of care. Documentation will include what was discussed with the offender and whether the offender agrees to participate in the plan.
- 5. If the clinician disagrees with the recommendations of the consultant, the provider will document the rationale for the disagreement and recommend an alternative treatment plan.
- 6. The clinician will monitor the offender to determine that the plan of care has been implemented and the desired clinical results are achieved.

M. Offenders held at ASMP following a Consultation/Procedure:

- 1. If an offender is to be held at ASMP for clinical follow-up and treatment, it is understood that the ASMP Medical Director or designee is responsible for all ongoing routine health care. In addition, if the stay extends beyond thirty (30) days, the ASMP Medical Director or designee is responsible for the following:
 - a. Chronic illness clinic visits;
 - b. Annual physicals and vaccinations;
 - c. Closing out consultations initiated by the parent facility and completed at ASMP; and
 - d. Initiating additional consultations and procedures as medically indicated.
- 2. When the Medical Director or designee determines that transfer back to the parent facility is appropriate, nursing staff will document a discharge planning note addressing all medical needs including future diagnostic tests, medications, profiles, etc., as medically appropriate.



Standard Operating Procedures

Policy Number: 507.04.10	Effective Date: 02/14/2022	Page Number: 15 of 15
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

- N. Private Prisons and Consultation/Procedure Requests:
 - 1. Clinicians will follow the same procedures in VI (B) 1-5 for initiating consultation/procedure requests.
 - 2. The clerk/nurse will enter the request onto the Consultation Tracking Log and into SCRIBE.
 - 3. Private prisons will submit consultation and procedure requests to a Utilization Management (UM) contract vendor of their choosing for review and approval. Requests should be reviewed, and a disposition made within five (5) working days.
 - 4. Once a UM disposition the private prison will coordinate the appointment.
 - 5. Clinicians will clinically monitor patients according to procedures in Section K.
- V. <u>Attachments</u>: None.
- VI. Record Retention of Forms Relevant to this Policy: None.