GEORGIA DEPARTMENT OF CORRECTIONS



Standard Operating Procedures

Policy Name: Community Hospital Admissions and Discharge

Policy Number: 507.04.17	Effective Date: 01/27/2022	Page Number: 1 of 2
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level I: All Access
	(Physical Health)	

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

All offenders will have access to community hospitals for necessary inpatient hospital care, including emergency care and higher-level care not available at a correctional institution. Admission and discharge from community hospitals will be subject to standard procedures. This procedure is applicable to all facilities that house Georgia Department of Corrections (GDC) offenders to include private and county prisons.

II. Authority:

- A. Ga. Comp. R. & Regs. 125-4-4-.09 and 125-4-4-.10;
- B. GDC Standard Operating Procedures (SOPS): 507.04.09 Hospital and Specialized Ambulatory Care, 507.04.13 Continuity of Care for Ambulatory Services, 507.04.89 Do Not Resuscitate (DNR) Order, 507.04.18 Discharge Planning, and 507.04.87 Advance Directives;
- C. NCCHC 2018 Adult Standards: P-D-08; and
- D. ACA Standards: 5-ACI-6A-08 (Mandatory), 5-ACI-6A-04, and 5-ACI-6A-05.

III. Definitions: None.

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

- A. All facilities will have an identified local community hospital available to provide inpatient services for offenders. All facilities will have an identified local community hospital for the provision of emergency services. Emergency services must be available through a "911" or equivalent service.
- B. The responsible physician or designee for each facility will arrange admission to the local community hospital as necessary.
- C. In the event of emergency transport to a local community hospital, the responsible physician for the facility will be notified.

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- D. All inpatient admissions will be reported to the contract vendor utilization management (UM) staff in order to plan for transfer if and when appropriate.
- E. The contract vendor UM staff will manage all off-site inpatient care on a daily basis. This will be achieved through daily contact with the community hospital. This inquiry will include the condition and the potential for transfer or discharge. The contract vendor UM staff will work daily with the hospital provider to ensure effective and appropriate transitions of care are completed. The contract vendor UM staff will communicate with the receiving facility staff to ensure appropriate transition of care when the patient is eligible for transfer or discharge.
- F. Each community hospital will follow its own policies for hospital admission and discharge. However, minimal requirements for documentation will include an admission history and physical, a summary of the hospital course, and a discharge summary. All offenders discharged back to the GDC will be given discharge instructions or plans from the discharging hospital and, when indicated, discharge orders for medication or further treatment.
- G. All community hospital records will be filed in the offender's medical record or chart and kept at the facility where the offender resides.
- H. Following the return of an offender from a community hospital admission, the institutional physician is responsible for updating the Physical Health Activity Profile, if applicable and re-profiling the offender if:
 - 1. The current profile is incorrect;
 - 2. The current profile is not up to date; and
 - 3. Surgery has taken place.
- V. Attachments: None.
- VI. Record Retention of Forms Relevant to this Policy: None.