

GEORGIA DEPARTMENT OF CORRECTIONS



**Standard Operating Procedures**

**Policy Name:** Health Screening-Offender Transfers

**Policy Number:** 507.04.25

**Effective Date:** 02/15/2022

**Page Number:** 1 of 9

**Authority:**  
Commissioner

**Originating Division:**  
Health Services Division  
(Physical Health)

**Access Listing:**  
Level I: All Access

**I. Introduction and Summary:**

Offenders who are transferred within the Georgia Department of Corrections (GDC) will have their health records screened prior to transfer and upon arrival at the receiving facility to promote continuity of care. Current medications will be transferred to the receiving facility. This procedure applies to all facilities that house GDC offenders to include county and private prisons.

**II. Authority:**

- A. GDC Standard Operating Procedure (SOPs): 103.63 Americans with Disabilities Act (ADA), Title II Provisions, 507.04.01 State Offenders in County Correctional Institutions, 507.04.04 Patient Tracking Systems, 507.04.28 Chronic Care, and 507.04.52 Patient Transport;
- B. NCCHC Adult Standard: P-E-03;
- C. ACA Standards: 5-ACI-6A-22 (Mandatory), 5-ACI-6A-24, 4-ALDF-4C-23, 4-ALDF-4C-25, 4-ALDF-4C-40, and 4-ALDF-4D-27.

**III. Definitions:**

- A. **Licensed Health Care Provider** - A licensed practical nurse, registered nurse, nurse practitioner, Physician assistant, Physician, dentist, or dental hygienist.
- B. **Physician** - Medical Doctor (MD) or Doctor of Osteopathy (DO).
- C. **Medical Hold** - Administrative order to delay a transfer for medical reasons.

**IV. Statement of Policy and Applicable Procedures:**

- A. Intra-system Transfer (The Transferring Facility):
  - 1. Facility authorities will notify the Responsible Health Authority of offenders who will be transferred to another facility. When possible, the medical staff should receive at a minimum twenty-four (24) hours' notice.

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2. The Responsible Health Authority will ensure that health records of offenders to be transferred are reviewed by a Licensed Health Care Provider and the Intra-System Transfer Form is completed (CAPTIVA, P-30-0001-01) or approved form. The purpose of the pre-transfer review is to ensure continuity of care as offenders move through the correctional system.
3. When notified that an offender is to be transferred to another facility, a Licensed Health Care Provider at the sending facility will do the following:
  - a. Review the record for acute or chronic illnesses, current medications, therapeutic diet, pending appointments or consultations, physical and/or communication disabilities or limitations, mental health history and allergies.
    - i. If the offender being transferred is not ordered any current medications, this box on page two will be checked and the Licensed Health Care Provider will sign and date the appropriate space at the bottom of page two of the form. The form will be placed behind page one in the Progress Note section of the health record.
    - ii. Review the Problem List and update, if necessary, based on current findings.
    - iii. Review the Health/Activity Profile and update, if necessary, based on current findings. If special equipment, appliances, or transportation is required, it should be noted on the form. Offenders with physical disabilities shall be allowed to transfer with and keep assistive devices on their person (i.e., hearing aids, medically prescribed dark glasses, prescribed glasses, dentures, walking canes or braces, walkers, wheelchairs, white canes, etc.). Offenders with physical disabilities who have been assigned wheelchairs or other devices for mobility impairment will be transferred using accessible vehicles. Profiles related to this equipment should continue at the receiving facility.

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- b. The top portion of the Intra-System Transfer (IST) Form will be completed, signed by the reviewing Licensed Health Care Provider and page one placed in the Progress Notes section of the health record. All data will be filled in on the form. Other parts of the health record should not be referenced in place of data (e.g., see Physician orders, see Problem List etc.).
  - c. The health record will be prepared for transfer by placing it in a large, clear plastic envelope which is labeled “Medical Record” with the offender's name and ID number written in the space provided. (Medical Record Plastic bags will be obtained through the Business Manager at the Facility)
  - d. Make arrangements with security to provide necessary medical care during transport to offenders with special medical needs (e.g., insulin dependent diabetics to receive injections or therapeutic diet etc.).
4. Preparing and Packaging Medications for Transport: (White Medication Plastic bags will be obtained through the Business Manager at the Facility)
- a. Directly Observed Therapy (DOT) Medications:
    - i. The assigned Licensed Health Care Provider will complete the second page of the Intra-System Transfer Form (P30-0001.01) or approved form indicating the names of the current medications and the number of unit doses being sent (e.g., 24 pills, one bottle etc.) The licensed healthcare provider packaging the medications for transfer will sign and date the second page in the space provided. If a different Licensed Health Care Provider reviewed and listed current medications but did not package them, that Licensed Health Care Provider will sign and date the appropriate space on page two. All DOT medications are sent to the receiving facility, except narcotics.
    - ii. All DOT medications being sent, and the second page of the IST Form will be placed in the white plastic “Medication” envelope labeled with

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the offender's name and identification number and sealed by the licensed healthcare provider or trained health staff.

- iii. The white medication envelope will be placed in or securely taped to the clear envelope containing the medical record. The tape will not obscure any demographic information on either envelope.
- iv. The health record and medication envelope (s) will be forwarded to the designated location for transfer.

b. Self - Administered Medications (SAM):

- i. The officer preparing the offender for transport will complete the property inventory sheet to include the number of medication blister packs and any other medications (e.g., inhalers, bottles etc.)
- ii. The officer will allow the offender to keep all SAM medications on his/her person during transport for the purpose of self-administration of medications that might be needed during transport.

B. Delaying Transfers for Medical Reasons (Medical Holds):

- 1. If for any reason it is not medically appropriate to transfer the offender at that time, the Physician or designee will be notified. Reasons for a delay in transfer would include an acute illness or a pending urgent or routine local appointment. Transfers will not be delayed for circumstances that could easily be managed by the receiving facility.
- 2. If the Physician agrees that it is not appropriate to transfer the offender, an order will be written in the health record and entered in SCRIBE, indicating that the offender is on Medical Hold and the date the hold expires. The Warden/Superintendent or designee will then be notified of the offender's status.

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3. If the offender is being transferred out-to-court (OTC), the Warden or designee should be notified so that court officials issuing the order can be contacted. This may also be accomplished by contacting the clerk handling court production orders in Offender Administration, Central Office.
4. The nurse reviewing the transport list should note any offender being transferred to a private prison. Offenders with pending consultations within or who have been scheduled for a procedure/surgery should not be transferred until the consultation or surgery has been completed.
5. When the reason for the Medical Hold no longer applies, an order will be written in the health record discontinuing the Medical Hold and the Warden/Superintendent or designee will again be notified.

**C. Intra-System Transfer (The Receiving Facility):**

1. The purpose of the post-transfer review is to identify acute or chronic illness requiring evaluation or treatment in order to provide continuity of care.
2. Upon arrival at the receiving facility, the offender will be evaluated in the medical section with SAM/DOT medications and the health record present. All medical records and medication envelopes will immediately be sent to medical staff for processing.
3. A Licensed Health Care Provider will conduct the encounter and perform the following:
  - a. Interview the offender and review the health record for current and past illnesses, including medical, dental, and mental health problems and conditions.
  - b. Record weight, vital signs, and other pertinent objective data.
  - c. Review the Master Problem List and update if necessary.

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- d. Note chronic health conditions requiring enrollment into the chronic care clinic system.
  - e. Note pending and completed consults, laboratory tests, diagnostic studies, and therapeutic diets. Refer any pending items to the appropriate staff member for tracking.
  - f. Review status of physical profile and dates of most recent physical examination, health screening and TB skin testing.
  - g. Review status of any medical restrictions/profiles.
  - h. Review mental health status.
4. Processing Medications - Review of current medications including whether or not medications were transferred with the offender, self-administration vs. directly observed therapy status, disposition of medications, and notation of medication renewal dates, if applicable.
- a. Directly Observed Therapy (DOT) Medications:
    - i. The assigned licensed healthcare provider will open the “Medications” envelope and compare the DOT medications sent with the health record to the completed page two of the IST Form noting medications received and any discrepancies.
    - ii. Medications will be reviewed for correctness and expiration dates. Referrals to Physician, Physician assistant or nurse practitioner for renewals will be made as needed.
    - iii. All current medications received will be placed in the designated medication administration area. Any medication not placed in this area for reasons such as being expired or a change in Physician orders will be returned to the pharmacy for proper disposal.

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- i. Licensed Health Care Provider or other health trained staff processing medications will report any medications not received or obviously tampered with to the responsible health authority who will report to the Warden or designee at the facility.
  - ii. The Licensed Health Care Provider or other health trained staff will document the medications received on page two of the IST Form, sign, and date the form in the space provided and file it in the progress note section of the health record behind page one of the IST form (if there are no self-administered medications (SAM) to review.)
- b. Self-Administered Medications (SAM):
  - i. The offender will bring his/her SAM medications to the Intra-system screening process done by a licensed healthcare provider.
  - ii. The licensed healthcare provider will review the SAM/OTC medications, brought by the offender, for necessary referrals or reorders and compare them to currently order medications.
  - iii. All appropriate SAM/OTC medications will be returned to the offender. Any medication that is expired or has been changed by Physician order will be confiscated and returned to the pharmacy for proper disposal.
  - iv. The licensed healthcare provider will document the SAM/OTC medications received at the facility in the space provided on the IST form page two then sign and date the form in the space provided and will place page two of the IST form behind page one in the Progress Note section of the health record.
5. Screening activities will be documented onto the lower section of the Intra-System Transfer Form. All data will be filled in on the form; other parts of the health record should not be referenced in place of data (e.g., see Problem List,

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See orders etc.). If more space is needed, staff will document in the progress notes and indicate this at the bottom of the form. The first page of the IST Form will be filed in the progress note section of the health record when it is complete.

6. The Licensed Health Care Provider will document orders based upon the assessment of the offender. These orders will include:
  - a. Informing the offender verbally and in writing of policies and procedures for accessing sick call and other health services (for non-English speaking persons, written materials should be developed, or a staff interpreter contacted).
  - b. Referring offenders requiring medication renewal immediately to a Physician, Physician assistant or nurse practitioner, or obtaining a verbal order for medication renewal until an appointment can be scheduled.

Refer offenders with acute medical/dental/mental health, abuse, or trauma conditions to an appropriate provider immediately.

- c. Document previous and future dates of TB skin testing and periodic physicals on the Intra system Transfer Tracking Log (P-30-0001-02) or other approved form.
- d. Document previous dates and future dates for chronic illness clinic appointments.
- e. Notation of pending consultation(s) (e.g., cardiac) or completed consultations requiring follow-up care on the Intra-System Transfer Tracking Log.
- f. Document whether a mental health referral is indicated.



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- g. If female, notation of Pap smear and mammogram due dates on the Intra-System Tracking Log.
- 7. Following completion of the intra-system transfer review, a Physician, nurse practitioner or Physician assistant will initiate a complete set of orders. The orders should address aspects of care including medications, consultations, chronic illness clinic enrollment and lab work to be obtained prior to the next clinic appointment, therapeutic diet, and medical profiles, if applicable.
- 8. The data gathered during the screening process will be transferred from the Intra-System Transfer Log to the TB Skin Test and the Physical Examination Tracking Logs within three (3) working days. Data will be transferred to the Consultation Tracking Log, Chronic Illness Clinic Log, and other logs as applicable. See SOP 507.04.04 Patient Tracking Systems Other approved tracking systems may be utilized.

**NOTE:** All forms associated with this SOP may be found on the GDC Intranet at Captiva/Resources/Health Services Documents/02 Physical Health/Health Record Manual.

V. **Attachments:** None.

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