

GEORGIA DEPARTMENT OF CORRECTIONS



Standard Operating Procedures

Policy Name: Women's Health Services

Policy Number: 507.04.69

Effective Date: 10/14/2022

Page Number: 1 of 8

Authority:
Commissioner

Originating Division:
Health Services Division
(Physical Health)

Access Listing:
Level I: All Access

I. Introduction and Summary:

Health services will be provided to address the unique needs of female offenders with regard to health maintenance, pregnancy, pre-natal care, and contraceptive needs prior to release. This procedure is applicable to all facilities that house Georgia Department of Corrections (GDC) female offenders, including private and county prisons.

II. Authority:

A. O.C.G.A §§16-12-141, 31-9B-2 and 42-1-11.3;

B. GDC Standard Operating Procedures (SOPs): 203.03 Incident Reporting, 507.04.07 Scope of Treatment Services, 507.04.19 Receiving Screening, 507.04.21 Health Assessment and Medical Diagnostics, 507.04.36 Periodic Physical Examinations, 507.04.28 Chronic Care, 507.04.23 Medical Classification Profiling, and 507.04.05 Charges to Offender Accounts for Health Care Provided;

C. NCCHC Adult Standards: P-G-01, P-G-07, P-G-10, and P-G-09; and

D. ACA Standards: 5-ACI-6A-19, 5-ACI-6A-21 (Mandatory), 5-ACI-6A-22 (Mandatory), 5-ACI-6A-25 (Mandatory), 5-ACI-5E-10, 4-ALDF-4C-13, 4-ALDF-2B-02-1, 4-ACRS-4C-14, and 4-ACRS-4C-14-1.

III. Definitions:

A. **Physician** - Doctor of Osteopathic Medicine (D.O.) or a Doctor of Medicine (M.D.).

B. **Clinician** - Physician, Nurse Practitioner, or Physician Assistant.

IV. Statement of Policy and Applicable Procedures:

A. Diagnostic and Health Maintenance Needs of Female Offenders:

1. Medical Diagnostics for Female Offenders:

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- a. In addition to routine, diagnostic tests received upon admission to the GDC, female offenders will receive the following:
 - 1) Health history screening regarding the patient's menstrual cycle, pregnancies, and gynecological conditions;
 - 2) A pelvic exam and Pap smear (the Pap smear may be deferred if there is a history of a hysterectomy unrelated to cancer);
 - 3) Breast exam and baseline mammogram for women greater than forty (40) years of age or with a family history of breast cancer or as clinically indicated;
 - 4) Serum pregnancy test; and
 - 5) Gonorrhea, Syphilis and Chlamydia tests.
 - b. No female offenders will receive medications contraindicated during pregnancy without first determining pregnancy status. Until the serum pregnancy test returns, this may be done through patient interview (i.e., determining last menstrual period, ruling out signs and symptoms of pregnancy).
2. Health Maintenance and Chronic Care.
- a. Routine health maintenance tests and periodic physical examinations will be in accordance with SOP 507.04.07, Scope of Treatment Services.
 - b. Monitoring of women with chronic illnesses will be in accordance with SOP 507.04.28, Chronic Care.

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B. Pregnancy and Reproductive Options:

1. Female offenders who at any time present signs or symptoms of pregnancy will be offered a pregnancy test.
2. Upon notification of a positive pregnancy test, the offender will be evaluated by a Physician, Physician Assistant, or Nurse Practitioner to confirm the pregnancy.
3. All pregnant female offenders will be provided counseling by a Clinician regarding available reproductive options. Counseling will be documented in the health record. Reproductive options include:
 - a. Carrying the pregnancy to term; or
 - b. Termination of the pregnancy.
4. For female offenders desiring to carry the pregnancy to term, referrals will be made to counseling staff or community social services regarding placement of the infant after delivery.
5. An appointment with an obstetrician will be made as soon as possible for appropriate medical care. Pregnant female offenders will be transferred to Helms Facility for all prenatal care until delivery.
6. Medical conditions and physical limitations will be considered when using restraints on ANY offender.
 - a. Restraints for Medically Identified Pregnant Female Offenders are to be Utilized as Follows:
 - 1) Restraints utilized on medically infirmed or pregnant female offenders shall be in accordance with the issued "medical restriction – no

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restraint" profile. (See SOP 507.04.23, Medical Classification and Profiling).

- 2) For pregnant female offenders, "medical restriction – no restraint" profiles shall be ordered and entered into SCRIBE in accordance with the SCRIBE Profile Manual and the medical record.
- 3) Chemical restraints (e.g.: pepper spray, tear gas, etc.) are NOT to be utilized on pregnant female offenders at any time.
- 4) Restraints are NOT to be utilized during the labor and delivery process.
- 5) Restraints for medical and/or mental health reasons shall be in accordance with SOP 508.27, Time Out and Physical Restraints and by authority of the Medical/Mental Health Physician.
7. The use of restraints on pregnant female offenders should be strictly prohibited, except in absolute extreme cases where there is imminent risk of escape, harm to the pregnant offender, or harm to the unborn child. In these cases, it must be determined by the Warden, Superintendent, or designee that the use of restraints is absolutely necessary, and risk cannot be managed through any other means.
8. When a determination is made that restraints must be used, it should **only** be wrist restraints applied to the front of the pregnant female offender. At no time should waist or leg restraints be used on pregnant female offenders.
9. In extreme cases where restraints have been authorized to be applied to pregnant female offenders, an incident report will be completed in accordance with SOP 203.03, Incident Reporting and will specifically note the following:
 - a. Specific reasons for use of the restraints;
 - b. Specific alternatives tried prior to use of restraints;

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- c. Who authorized the use of restraints;
- d. Type of restraints used in what manner;
- e. Specific time restraints were applied and removed; and
- f. Change in conditions that lead to the conclusion that restraints were no longer necessary.

NOTE: Should security or medical reasons justify, the Warden/Superintendent or their designee is authorized to deviate from the above requirements. Restraints are to be utilized only as long as the events justify. An incident report will be completed justifying said action. A copy of the incident report is to be placed in the offender's administrative file.

C. Prenatal Care:

- 1. Pregnant female offenders will be under the care of an obstetrician. The pregnant female offenders will receive routine prenatal care, high-risk prenatal care, management of care if chemically addicted, and post-partum follow-up.
- 2. Routine prenatal care includes, but is not limited to, guidance from the American College of Obstetrics and Gynecology (ACOG), medical examinations, advice on appropriate levels of activity and safety precautions, nutritional guidance, and counseling.
- 3. High-risk pregnancies will be monitored at the Helms Facility at the direction of the attending obstetrician and Medical Director.
- 4. Pregnant female offenders desiring termination of a pregnancy will be provided access to termination services subject to the limitations set forth in Georgia law. Female offenders desiring termination of pregnancy will be asked

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to submit their request in writing. The request will be placed in the consent section of the medical record.

5. The Responsible Health Authority will make arrangements with an outside medical facility to provide termination services to pregnant female offenders requesting these services. The medical section will schedule all appointments.
6. Terminations are prohibited if the unborn child has a detectable human heartbeat except when:
 - a. A Physician determines, in reasonable medical judgment, that a medical emergency exists;
 - b. The probable gestational age of the unborn child is 20 weeks or less and the pregnancy is the result of rape or incest in which an official police report has been filed alleging the offense of rape or incest; or
 - c. A Physician determines, in reasonable medical judgment, that the pregnancy is medically futile.
7. Consent for the termination procedure will be obtained by the outside medical facility.
8. Pre- and post-termination counseling by a licensed healthcare provider will be made available.
9. Under no circumstances will a pregnant female offender be forced to have a termination procedure against her will.

D. Contraception and Sterilization:

1. Contraceptive services will ordinarily not be provided to female offenders during incarceration except in preparation for release from the GDC.

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Contraceptive services will be provided in accordance with the following guidelines:

- a. Female offenders at any GDC facility who are within two (2) months of release may be offered oral contraceptives in the absence of contraindications. A prescription may be provided to the female offender and referral made to a family planning clinic upon release.
 - b. Female offenders at Transitional Centers will be offered on oral contraceptives or referred to a family planning clinic for counseling regarding other contraceptive options.
 - c. Female offenders in Transitional Centers will provide payment for medications or family planning services in accordance with SOP 507.04.05, Charges to Offender Accounts for Health Care Provided, and SOP 507.04.02, Transitional Center Health Services.
 - d. Female offenders housed in short-term facilities such as Probation Detention Centers, Residential Substance Abuse Treatment center, and Integrated Treatment Facilities who are on oral contraception upon admission may be continued on this regimen, if requested and at the discretion of the responsible Physician.
 - e. Female offenders who are currently undergoing treatment for dysfunctional uterine bleeding.
2. All requests for elective sterilization of female offenders will be forwarded to the GDC Statewide Medical Director for consideration.
 3. Tubal ligation will not be performed at the offender's request but can be considered if performed as a part of another invasive procedure such as a C-Section.

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E. Data Collection: The names of pregnant offenders will be recorded on the Obstetrical Tracking Log or other approved form (See Health Records Manual, Form P-03-0005-08, and birth viability (live birth, etc.).

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/09 Tracking Logs.

V. **Attachments:** None.

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