

26th Annual Health Directors' Legal Conference
UNC School of Government
April 26, 2007

Jail Health: What Is The Local Health Director's Role?

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The Local Health Director's role in jail health care is: (1) to assist in developing the Jail Medical Plan; (2) to approve the Jail Medical Plan; (3) to annually review the Jail Medical Plan; (4) to make sure the Jail Medical Plan includes HIV education of jail staff and inmates; and (5) to be notified in the event of a death in the jail.

Legal Sources:

GS 153A-221 – Minimum standards for local confinement facilities.

GS 153A.225 – Medical care of inmates and requirement of a jail medical plan.

10A NCAC 14J.1000-1102 – Health care of inmates.

10A NCAC 14J.1209 – Requirements for the jail medical area.

10A NCAC 41A.0202(8) – Requirement of inmate/staff education about HIV.

1. The LHD must be consulted during the development of the Jail Medical Plan.

“Each unit that operates a local confinement facility shall develop a plan for providing medical care for prisoners in the facility. . . .The unit shall develop the plan in consultation with appropriate local officials and organizations, including the sheriff, the county physician, the local or district health director, and the local medical society.” GS 153A-225(a).

Plan requirements:

- A. Must be designed to protect the health and welfare of the prisoners and to avoid the spread of contagious disease.

- B. Must provide for medical supervision of prisoners and emergency medical care for prisoners to the extent necessary for their health and welfare.
- C. Must provide for the detection, examination and treatment of prisoners who are infected with tuberculosis or venereal diseases.
- D. Must be made available for easy reference by jail personnel.
- E. Must include a description of the health services available to inmates.
- F. Must include policies and procedures addressing the following areas:
 - 1. Health screening of inmates upon admission;
 - 2. Handling routine medical care;
 - 3. Handling inmates with chronic illnesses or known communicable diseases;
 - 4. Administration, dispensing, and control of prescription and non-prescription medications;
 - 5. Handling emergency medical situations, including emergencies involving dental care; chemical dependency; pregnancy; and mental health;
 - 6. Maintenance and confidentiality of medical records; and
 - 7. Privacy during medical exams and conferences.
- G. Must provide that inmates have the opportunity every day to communicate their health complaints to a health professional or to a detention officer.
- H. Must provide that qualified medical personnel be available to evaluate the inmates' medical needs.
- I. Must provide that a written record be kept of the request for medical care and the action taken.
- J. Must reflect that inmates may not perform any medical functions in the jail.

Other provisions that it is reasonable to include in the Jail Medical Plan:

- A. Health, welfare, and humane treatment of inmates.
- B. Mental health, mental retardation, and substance abuse services.

- C. Health screening forms and other medical forms.
- D. Isolation and quarantine.
- E. Exercise.
- F. Layout and setup of the jail medical area.

2. The LHD must approve the Jail Medical Plan.

"The plan must be approved by the local or district health director after consultation with the area mental health, developmental disabilities, and substance abuse authority, if it is adequate to protect the health and welfare of the prisoners." GS 153A-225(a).

- LHD must approve the Plan if it is adequate, but should not approve it if it is not adequate.
- The LHD must consult with mental health, developmental disability, and substance abuse authorities.
- The Jail Medical plan also must be adopted by the governing body (county commissioners or city council).

3. The LHD must review the Jail Medical Plan annually.

"The medical plan shall be reviewed annually." 10A NCAC 14J.1001(e).

- The Department of Health and Human Services develops the minimum standards for the jails and inspects the facilities. Annual review is a DHHS regulation, and DHHS takes the position the annual review must be done by the LHD.
- There is no statutory or regulatory requirement that the "annual review" be the full process required for development of a new Jail Medical Plan, but that is advisable for any substantive changes to the Plan.

4. The LHD must make sure the Jail Health Plan includes HIV education of jail inmates and staff.

“The local health director shall ensure that the health plan for local jails includes education of jail staff and prisoners about HIV, how it is transmitted, and how to avoid acquiring or transmitting this infection.”

5. The LHD must be notified in the event of a death in the jail.

“If a prisoner in a local confinement facility dies, the medical examiner and the coroner shall be notified immediately. Within five days after the day of the death, the administrator of the facility shall make a written report to the local or district health director and to the Secretary of Health and Human Services.” GS 153A-225(b1).

- No specific legal guidance as to how a LHD should respond to such a report.
- There may be circumstances when the LHD should investigate, if the cause or manner of death implicates public health concerns.

6. Other considerations:

- A. Communication – Open lines of communication between health department and jails, regardless of whether the health department currently provides jail health services.
- B. Documentation – Documenting care; maintaining patient privacy and confidentiality; maintaining records.
- C. Community-wide public health concerns:
 - Disaster planning?
 - Pandemic planning?
 - Other?