


Idaho Department of Correction  	<b>Standard          Operating          Procedure</b>	Title: <b>Privacy of Care</b>		Page: 1 of 3
		Control Number: <b>401.06.03.009</b>	Version: <b>4.0</b>	Adopted: 11-12-1998

**Pat Donaldson, chief of the Management Services division, approved this document on 06/16/2015.**

Open to the public:  Yes  No

**SCOPE**

This standard operating procedure applies to all Idaho Department of Correction health care services staff, inmates, contract medical providers, and subcontractors.

<b>Revision History</b>
Revision date (06/16/2015) version 4.0: Periodic review to confirm accuracy, clarified language in section 2. Previous revision date: 07/15/2014

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**BOARD OF CORRECTION IDAPA RULE NUMBER 401**

Medical Care

**POLICY CONTROL NUMBER 401**

Clinical Services and Treatment

**PURPOSE**

The purpose of this standard operating procedure is to establish procedures ensuring privacy of patient information and discussions during clinical encounters.

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## RESPONSIBILITY

### ***Health Authority***

The health authority is responsible for

- Monitoring and overseeing all aspects of health care services
- The implementation and continued practice of the provisions provided in this standard operating procedure

If health care services are contracted, the health authority is responsible for

- Reviewing and approving all applicable contract medical provider policy, procedure, and forms before implementation
- Monitoring the contract medical provider's performance, reviewing processes, procedures, forms, and protocols used by the contract medical provider to ensure compliance with all health care-related requirements of contracts, this standard operating procedure, and NCCHC standard P-A-09

### ***Contract Medical Provider***

The contract medical provider is responsible for

- Implementing and practicing all provisions of this standard operating procedure, unless specifically exempted by written contracts
- Ensuring that all aspects of this standard operating procedure and NCCHC standard P-A-09 are addressed by applicable contract medical provider policy and procedure
- Ensuring facility health authorities use all applicable contract medical provider policy, procedure, forms, and educational information to fulfill all health care-related requirements provided in this standard operating procedure, NCCHC standard P-A-09, or as indicated in their respective contracts
- Ensuring all applicable contract medical provider policy, procedure, and forms are submitted to the health authority for review and approval before implementation

Nothing in this standard operating procedure relieves a contract medical provider of any obligation or responsibility of respective contractual agreements.

### ***Facility Medical Director***

The facility medical director is responsible for

- Establishing and monitoring contract medical provider policy and procedure
- Ensuring all elements of this standard operating procedure and NCCHC standard P-A-09 are done as required

### ***Facility Health Authority***

The facility health authority is responsible for

- Ensuring the presence of an adequate number of appropriately trained staff and materials are available to meet the requirements of this standard operating procedure

Along with the facility medical director, the facility health authority is responsible for

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- Establishing and monitoring contract medical provider policy and procedure
- Ensuring all elements of this standard operating procedure and NCCHC standard P-A-09 are done as required

### ***Facility Head***

The facility head is responsible for ensuring that security staff is available when there is a threat to safety of the health care services staff or others.

## **STANDARD PROCEDURES**

Health care services staff and security staff must be familiar with the requirements of this standard operating procedure.

### **1. Requirements**

- Health care services staff must respect the inmate's privacy and dignity while providing care. Clinical encounters and health care discussions must be private.
- All facilities must designate space for on-site health care that provides privacy for the health care provider and inmate.
- Attempt to provide an interpreter or other assistive devices when speech, hearing, or language barriers compromise communication during the clinical encounter.
- Contract medical staff must attempt to preserve confidentiality when cell-side triage is required in restrictive housing units.

### **2. Safety Concerns**

If the inmate's behavior poses an immediate threat to the safety of the health care professional or others, take the following precautions:

- A correctional officer is present only if the offender poses a probable risk to the safety of the health care staff or others during the clinical encounter. Health care staff must advise the correctional officer that any health-related information obtained is confidential.
- Try to maintain reasonable privacy for the inmate by using a privacy screen if full privacy is not possible.

### **3. Compliance**

The health authority ensures compliance with this standard operating procedure and all related protocols by monitoring clinical practice guidelines, routine reports, program reviews, and record reviews.

## **REFERENCES**

National Commission on Correctional Health Care (NCCHC), Standards for Health Services in Prisons, Standard P-A-09, *Privacy of Care*

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