#### **HEALTHCARE SERVICES AGREEMENT**

This Healthcare Services Agreement (the "Agreement") is made and entered into as of \_\_\_\_\_\_\_, 2024 (the "Effective Date") by and between Reserve Health, P.C., a North Carolina professional corporation, authorized to do business in North Carolina, with its principal place of business located at 650 S Tryon Street, Charlotte, North Carolina, 28202 ("Reserve Health"), and Gaston County, North Carolina (the "County"), acting through its office of the Sheriff of the County (the "Sheriff") with its principal place of business located at 425 Dr. Martin Luther King Jr. Way, Gastonia, North Carolina 28052. The County and Sheriff are collectively referred to herein as the "Client." Reserve Health, the County, and the Sheriff are collectively referred to herein as the "Parties" and individually as a "Party".

#### **Recitals**

WHEREAS, Reserve Health is a medical practice that provides certain healthcare services described herein (the "Healthcare Services") to patients through its physicians, physician assistants, nurse practitioners, other healthcare providers (collectively "Healthcare Providers"), and operational staff ("Staff");

WHEREAS, the County is charged by law with the responsibility for obtaining and providing reasonably necessary medical care for inmates or detainees of the Gaston County Jail and the Gaston County Jail Annex (collectively, the "Facility");

WHEREAS, County and Sheriff desire to provide for healthcare services to inmates in accordance with applicable law;

WHEREAS, Reserve Health is experienced in providing the Healthcare Services to an inmate population; and

**WHEREAS,** the County, which provides funding for the Facility as approved by the Gaston County Commissioners, desires to enter into this Agreement with Reserve Health to promote this objective, Reserve Health is ready and willing to accept this engagement, and the Sheriff approves of this Agreement.

#### Agreement of the Parties

**NOW THEREFORE**, in consideration of the foregoing, the mutual covenants and agreements contained herein, and of other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

#### ARTICLE 1 GENERAL

1.1 <u>Incorporation of Recitals and Exhibits</u>. The Parties incorporate into the Agreement (a) the above-stated recitals and provisions, and (b) the Exhibits attached hereto, referenced throughout, and listed as follows:

Exhibit A (Definitions) Exhibit B (Compensation) Exhibit C (Healthcare Services) Exhibit D (Administrative Services) Exhibit E (Staffing and Schedule) Exhibit F (Health Records Services) Exhibit G (Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services) Exhibit H (Reserve Health Proposal for Jail Medical Services)

1.2 <u>Definitions</u>. Definitions of certain words and phrases included in this Agreement not otherwise defined herein are set forth on the attached <u>Exhibit A</u> (*Definitions*) which is incorporated by reference.

1.3 <u>Engagement of Reserve Health</u>. The County hereby engages Reserve Health to provide the Healthcare Services described in this Agreement, Reserve Health accepts such engagement, and the Sheriff approves of this engagement, all subject to the terms and conditions of this Agreement. The Healthcare Services are to be delivered to individuals (collectively, the "inmates") under the custody and control of the County at the Facility, and Reserve Health enters into this Agreement according to the terms and provisions hereof.

1.4 General Scope of Services. Reserve Health shall provide the Healthcare Services for all inmates committed to the custody of the Facility as described in the Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services dated on or about January 8, 2024 and Reserve Health Proposal for Jail Medical Services dated February 15, 2024, copies of which are attached as Exhibit G (Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services) and Exhibit H (Reserve Health Proposal for Jail Medical Services) and incorporated by reference. Generally, this includes all professional medical, dental, mental health, a substance abuse program, related health care and administrative services for the inmates, a comprehensive health evaluation of each inmate following booking into the Facility in accordance with NCCHC Standards and North Carolina law, booking / intake health screenings, including medical evaluation for inmate work details, regularly scheduled sick call, nursing care, regular physician and dentist visits to the Facility, detoxification, continuing care for illness and injuries, infirmary care, mental health services, medical, on site emergency medical care, Health Records management, pharmacy services management, health education and training services, a quality assurance program, administrative support services, and other services, all as more specifically described herein. Reserve Health will provide staffing described in Article 4 below.

1.5 <u>Intended Recipients of the Healthcare Services</u>. The Healthcare Services provided by Reserve Health under this Agreement are intended only for those inmates in the actual physical custody of the Facility. This includes inmates under guard arranged by County in outside hospitals and whose care is being managed by Reserve Health. Such inmates will be included in the inmate daily population count. Reserve Health is responsible for Healthcare Services required by inmates only when physically returned to the custody of the Facility after becoming ill, delivering an infant, or being injured while on temporary release. No other individuals, including, but not limited to, individuals in outside hospitals who are not under guard arranged by County, are included in this Agreement, nor shall such individuals be included in the inmate daily population count. In addition, Reserve Health is not responsible for providing healthcare services of any kind for or on behalf of County or Sheriff employees or staff, except for emergency care. In addition, individuals who are otherwise inmates but who are on any sort of temporary release, including, but not limited to: being on escape status, being on pass, parole, or supervised custody who do not sleep in the Facility at night, will not be included in the daily population count, and will not be included in this Agreement with respect to furnishing of the Healthcare Services. inmates in the custody of other police or other penal jurisdictions for any reason are likewise excluded from the population count and are not the responsibility of Reserve Health for the furnishing of health care services.

1.6 <u>Services Outside the Scope of this Agreement</u>. In the event the County and / or the Sheriff request Reserve Health to provide additional healthcare or related services which are outside the scope of this Agreement, the Parties shall enter into either an amendment to this Agreement or a separate contract in accordance with <u>Exhibit B</u> (*Compensation*).

1.7 <u>Changes in Standard of Care</u>. In the event a material change in the scope of Healthcare Services provided by Reserve Health is required due to new, amended, and / or a repealed law or laws (including statutes, codes, and / or case law), related legislation, and / or applicable regulations, the Parties hereby agree to renegotiate the affected terms of this Agreement in good faith, and within a reasonable time, in accordance with Exhibit B (*Compensation*).

## ARTICLE 2 HEALTHCARE SERVICES

2.1 <u>General</u>. Reserve Health will provide adequate and qualified Healthcare Services for twenty-four (24) hours per day, including administering, arranging, and bearing the cost of the healthcare services for the Facility as described in this Agreement, including on the attached <u>Exhibit C</u> (*Healthcare Services*) which is incorporated by reference, and <u>Exhibit G</u> (*Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services*) and <u>Exhibit H</u> (*Reserve Health Proposal for Jail Medical Services*). This includes developing and implementing a healthcare system that (a) aligns with the objectives, policies, and procedures of the Sheriff and County, and (b) includes periodic reporting to document successful performance hereunder. Reserve Health will provide the Healthcare Services in such a manner to meet or exceed the NCCHC Standards for Health Services in Detention facilities, ACA, PREA and federal, state (including health and rehabilitative services), local laws, statutes, and ordinances governing healthcare service delivery.

## 2.2 <u>Outside Medical Services</u>.

2.2.1 *Allocation of Duties*. Reserve Health shall arrange for the provision of "Outside Medical Services" to any inmate who, in the opinion of the Reserve Health Medical Director or his designee, requires care and treatment which exceed the scope of the Healthcare Services under this Agreement. To the extent possible, Reserve Health will utilize hospitals and healthcare practices located in Gaston County, North Carolina in accordance with NCGS § 153A-

225.2(c). The Client shall be responsible for the cost of all Outside Medical Services. However, Reserve Health will assist the Client, or an agent of the Client, in reviewing the applicable invoices for accuracy. The term "Outside Medical Services" refers to all healthcare services which are not provided on-site at the Facility, including but not limited to inpatient hospitalization, emergency room visits, outpatient surgeries, outpatient physician consultations, off-site medical specialist, and off-site diagnostic procedures. Additionally, Outside Medical Services shall also include on-site dialysis, on-site ultrasounds, all HIV medications, and / or hospice services provided on-site at the Facility. Reserve Health is not responsible for providers of Outside Medical Services, including for their actions, omissions, or the cost of their services. Reserve Health's sole obligation is to use commercially reasonable efforts to arrange for the provision of Outside Medical Services when medically necessary as determined by the Reserve Health Medical Director or his designee.

2.2.2 *Safekeeping Order Exception*. Notwithstanding Article 2.2.1, in the event Reserve Health recommends that an inmate be temporarily transferred to Central Prison in Raleigh, North Carolina to receive particular healthcare services (a "Safekeeping Order"), all reasonable costs associated with the Safekeeping Order are the responsibility of Reserve Health.

2.3 <u>Health Education</u>. Reserve Health shall conduct an ongoing health education program for inmates at the Facility with the objective of raising the level of inmate health and healthcare. If the Sheriff so desires, Reserve Health shall conduct the same program for detention officers at the Facility at no additional cost.

2.4 <u>Transportation Services</u>. To the extent any inmate requires off-site non-emergency healthcare treatment including, but not limited to, hospitalization care and Specialty Services, the Sheriff shall, upon prior request by Reserve Health, provide transportation as reasonably available. When medically necessary, Reserve Health shall arrange all emergency ambulance transportation of inmates through Gaston County EMS.

2.5 <u>Pregnancy Care</u>. Reserve Health shall arrange for and bear the cost of on-site healthcare for any pregnant inmate. Reserve Health shall not bear the cost of off-site healthcare services or Specialty Services for any pregnant inmate. Reserve Health will neither arrange for infant care nor be financially responsible for any costs associated with infant care. Likewise, Reserve Health will neither arrange for nor provide abortion services.

2.6 <u>Dental Care</u>. Reserve Health will provide for inmates dental triage screenings in accordance with criteria established by a North Carolina licensed dentist for the purpose of identifying inmates in need of dental services from a North Carolina licensed dentist. Reserve Health will be responsible for providing a dentist on-site on a regular basis.

2.7 <u>Exclusions from Healthcare Services</u>. The following circumstances are specifically excluded from the Healthcare Services provided by Reserve Health under this Agreement.

2.7.1 *Elective Medical Care*. Reserve Health shall not be responsible for providing elective medical care to inmates, unless expressly contracted for by the County and / or Sheriff. For purposes of the Agreement, "Elective Medical Care" means medical care which, if not provided, would not, in the opinion of Reserve Health Medical Director, cause the inmate's health

to deteriorate or cause definite harm to the inmate's well-being. Any referral of inmates for Elective Medical Care must be reviewed by the Sheriff prior to provision of such services. Decisions concerning Elective Medical Care will be consistent with the applicable AMA standards.

2.7.2 *Certain Medical Emergencies*. The Parties understand and acknowledge that certain medical emergencies may arise outside the scope of this Agreement. They include but are not limited to: medical emergencies involving visitors; individuals at the County's work release facility; or contractors, representatives, or agents of the Client. If Reserve Health Healthcare Providers and / or Staff are available and respond to provide such emergency services (i.e. other than for inmates), either upon request by the Sheriff, County, or otherwise, such services will be on an uncompensated, volunteer basis pursuant to NCGS § 90-21-14.

2.7.3 *Inmates Outside the Facility*. The Healthcare Services are intended only for those inmates in the actual physical custody of the Facility. This does not include inmates who are under guard in jails or prisons outside of the County, unless court ordered or as specifically provided in this Agreement. Such inmates are not to be included in the daily population count. No person(s), including those who are in any outside hospitals who are not under guard, shall be the financial responsibility of Reserve Health with respect to the payment or the furnishing of Healthcare Services. All costs for inmates transported to hospital or other healthcare providers after being accepted into custody at the Facility shall be the Client's responsibility. The cost of medical services provided to inmates who become ill or are injured while on escape status will not be the responsibility of Reserve Health. Persons in the physical custody of other public safety or other law enforcement at the Client's request or by court order are likewise excluded from the population count and are not the responsibility of Reserve Health for the furnishing or payment of Healthcare Services. Persons in federal custody being housed at the Facility pursuant to a valid contract between the Client and the US Marshals Service are included in the MADP and shall be provided Healthcare Services like every other inmate at the Facility. Persons in federal custody being housed at the Facility pursuant to a valid contract between the Client and the Federal Bureau of Prisons, as well as Persons in North Carolina State Work Release custody being housed at the Facility pursuant to a valid contract between the Client and the State of North Carolina are NOT included in the MADP and shall NOT be provided Healthcare Services like every other inmate at the Facility (emergency services pursuant to Article 2.7.2 may be provided).

2.7.4 *Work Release*. This Agreement does not apply to healthcare services and supplies required by inmates who are on work release and not under continual supervision of detention officers.

2.7.5 *Other Excluded Services*. Reserve Health shall not be responsible for providing for the costs associated with the following: transplants; experimental or investigative procedures; exceptional blood factor products; chemotherapeutics; HCV treatment; smoking cessation. In addition, Reserve Health will not perform body cavity searches, collect physical evidence (blood, hair, semen, saliva., etc.), or participate in the collection of forensic information as defined by NCCHC guidelines, unless required by court order or North Carolina law.

2.7.6 *Changes in Standard of Care.* Reserve Health shall not be financially responsible for significant changes in treatment standards of care, which are either not FDA approved or are not part of Reserve Health's written protocols in use at the Facility as of the Effective Date. Should any new treatment, standard of care, drug classes, or diagnostic tests be mandated and approved in relation to community health care standards for treatment and or required by the Reserve Health Medical Director as necessary for the treatment of inmates housed at the Facility, the Parties shall agree to negotiate in good faith reasonable additional compensation due Reserve Health in accordance with Exhibit B (*Compensation*).

2.8 <u>No Use of Inmate Population</u>. Reserve Health shall not employ, engage, or utilize inmates in rendering any Healthcare Services. Reserve Health shall not conduct any medical research projects involving inmates, other than projects limited to the use of information from records compiled in the ordinary delivery of healthcare activities, without the prior written consent of the Sheriff or his designee. In no event shall any information of any kind arising out of this Agreement be publicly disclosed which identifies any inmate, unless the inmate is of sound mind and specifically consents in writing to such disclosure. Further, in no event shall any inmate's health information be disclosed or made public in violation of any federal, state, or local law or regulation, or in violation of any standards applicable to the Facility.

## ARTICLE 3 ADMINISTRATIVE SERVICES

3.1 <u>General</u>. Reserve Health will provide certain healthcare-related Administrative Services described in this Agreement, including on the attached <u>Exhibit D</u> (Administrative Services) which is incorporated by reference, and <u>Exhibit G</u> (Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services) and <u>Exhibit H</u> (Reserve Health Proposal for Jail Medical Services).

## 3.2 <u>Meetings and Reports</u>.

3.2.1 *Meetings*. Reserve Health shall meet at least monthly with the Sheriff or his designees to discuss and analyze the provision of the Healthcare Services and any proposed changes in health-related procedures or other matters which the Parties deem necessary.

3.2.2 *Reports*. Reserve Health will provide to the Sheriff or his designees the following statistical reports based on the Healthcare Services provided under this Agreement.

3.2.2.1 Daily. To include data regarding: transfers to off-site hospital emergency departments; communicable disease reporting; suicide data (i.e., attempts and precautions taken); status of inmates in local hospitals and infirmaries; staffing; completed medical incident report copies; completed medical grievance report copies; and a list of lost Health Records (if any).

3.2.2.2 Monthly. To include data regarding: inmates' requests for services; inmates seen at sick call; inmates seen by a physician; inmates seen by a dentist; inmates seen by a psychiatrist; inmates seen by a psychologist; infirmary admission, patient days, average

length of stay; mental health admissions; off-site hospital admissions to include emergency room and general physician referrals; medical specialty consultation referrals; Intake medical screening; fourteen (14) day history and physical assessments; psychiatric evaluations; diagnostic studies; Report of third-party reimbursement, pursuit, and recovery; pharmacy report of inmates dispensed medication; inmates testing positive for a venereal disease; inmates testing positive for AIDS or AIDS antibodies; inmates testing positive for Tuberculosis; inmate mortality; number of hours worked by the Healthcare Providers and Staff, specifying each post or shift; monthly off-site visits; and other data reasonably requested by the Client.

3.2.2.3 Semi-Annually. To include data to comply with NCGS § 153A-225.2(c).

3.2.2.4 Annually. Prepared in accordance with ACA, NCAC, PREA and NCCHC standards.

3.3 <u>Financial</u>. Reserve Health will be responsible for all costs related to the Healthcare Services provided by Reserve Health at the Facility, including for the following: pharmaceutical / medical supplies and medical equipment as described in Article 8 below; office equipment and supplies; Healthcare Providers and Staff; and contaminated waste disposal.

3.4 <u>Third Party Reimbursement</u>. To the extent possible and available, Reserve Health will pursue third party or insurance reimbursement for the Healthcare Services performed by Reserve Health under this Agreement. This includes, but is not limited to, Reserve Health directing all providers to pursue all insurance and other applicable claims, and other means of subrogation, for medical treatment provided to inmates. In addition, Reserve Health will implement a process for billing the North Carolina Department of Public Safety for any Healthcare Services provided to inmates, as permitted by North Carolina law. Reserve Health will share with the Sheriff all documentation received regarding an insurance or other obligation to reimburse healthcare costs for inmates, to the extent permitted by law. The Client will designate Reserve Health as its respective agent to assert such rights and privileges to seek reimbursement or other payment for the Healthcare Services. Any funds collected will be credited towards the Annual Fee.

3.5 <u>Intentionally deleted</u>.

3.6 <u>Program Enhancements</u>. The Parties shall meet in December (at least six months prior to the end of the Fiscal Year) to discuss and analyze whether additional Healthcare Services are warranted to further enhance the healthcare offerings to the inmates and / or the Client. In the event the Parties agree to incorporate additional Healthcare Services, the Parties shall negotiate in good faith the applicable terms and either enter into an Amendment to this Agreement or a separate contract.

3.7 <u>Court Appearance / Litigation Support</u>. In the event Reserve Health Healthcare Providers of Staff are required to devote time to litigation, threatened litigation, or other similar disputes by or on behalf of the Client, or to testify regarding medications, treatment and care provided to inmates, time spent in this regard shall be part of their service time pursuant to this Agreement.

#### ARTICLE 4 HEALTHCARE PROVIDERS AND STAFF

4.1 <u>General</u>. Reserve Health will provide qualified Healthcare Providers and Staff to perform the Healthcare and Administrative Services for the Facility as described in this Agreement, including on the attached <u>Exhibit E</u> (*Staffing and Schedule*) which is incorporated by reference, and <u>Exhibit G</u> (*Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services*) and <u>Exhibit H</u> (*Reserve Health Proposal for Jail Medical Services*).

4.2 <u>Staffing Schedule</u>. Reserve Health will provide qualified healthcare professionals necessary to render the Healthcare Services contemplated in this Agreement, including as described in the staffing plan set forth on <u>Exhibit E</u> (*Staffing and Schedule*). Reserve Health reserves the sole and exclusion discretion to assign healthcare staff positions to cover shifts as necessary based on the operational needs of Reserve Health. For example, a physician may cover a nurse's scheduled shift. However, Reserve Health will provide the Sheriff prior notice of any change in shift coverage, and any such change shall not affect the quality of Healthcare Services rendered to the inmates.

4.3 Subcontracting and Delegation. Reserve Health may engage certain healthcare professionals as independent contractors rather than as employees. The Client consents to such subcontracting or delegation. As the relationship between Reserve Health and these healthcare professionals will be that of independent contractor, Reserve Health will not be considered or deemed to be engaged in the practice of medicine or other professions practiced by these professionals. Reserve Health will not exercise control over the manner or means by which these independent contractors perform their professional medical duties. However, Reserve Health shall exercise administrative supervision over such professionals necessary to ensure performance of the obligations contained in this Agreement. For each independent contractor, including all medical professionals, physicians, dentists, nurses, and others performing duties as agents of Reserve Health under this Agreement, Reserve Health shall provide the Client documentation that professional liability or medical malpractice insurance coverage is in place. The insurance shall be the same or exceed the insurance requirements in this Agreement. It is further understood that Reserve Health may subcontract for specialized services such as pharmacy, medical waste disposal, medical supplies, and other services provided under this Agreement. Any person who enters the Facility must pass a criminal background check completed by the Sheriff's Office.

## 4.4 <u>Sheriff and County Approval</u>.

4.4.1 *Pre-Approval*. The Sheriff shall pre-approve (not to be unreasonably withheld, conditioned, or delayed) all individuals performing services for Reserve Health, both direct employees and subcontractors, under this Agreement and who will have contact with inmates.

4.4.2 *Ongoing Approval.* In recognition of the sensitive nature of the Facility operations, the Sheriff may request replacement or re-allocation of Reserve Health personnel if the

Sheriff reasonably believes the individual is unable to carry out the responsibilities of this Agreement. The Sheriff shall provide Reserve Health written notice of such dissatisfaction and the underlying reasons. Reserve Health shall diligently make reasonable efforts to resolve the situation to the Client's satisfaction (not to be unreasonably withheld). If the issue is not resolved, Reserve Health shall remove the individual from providing services at the Facility. Notwithstanding the foregoing, for certain events, including but not limited to criminal charges or inappropriate contact with inmates, Sheriff may immediately suspend Reserve Health personnel or its subcontractor(s) from the Facility.

4.4.3 *Changes to Staffing.* The Parties shall negotiate in good faith with respect to changes in staffing requirements. Any such changes must be in writing and signed by the Parties.

4.5 <u>Licensure, Certification, Registration</u>. All personnel provided or made available by Reserve Health to provide Healthcare Services under this Agreement shall be licensed, certified, or registered, as appropriate, in their respective areas of expertise as required by applicable North Carolina and federal law. In addition, all Healthcare Providers shall be trained in accordance with and always abide by NCCHC, ACA, HIPAA, PREA, and any federal, state, or local laws, regulations, rules, guidelines, and standards applicable to their profession, including without limitation, medical, dental, vision, mental health, and pharmacy.

#### ARTICLE 5 RECORDS AND DOCUMENTATION

#### 5.1 <u>General</u>.

5.1.1 *Health Records Services*. Reserve Health shall provide Health Records management services as described in this Agreement, including on the attached Exhibit F (*Health Records Services*) which is incorporated by reference, and Exhibit G (*Gaston County Sheriff's Office Request for Proposal and Sample Contract for Jail Medical Services*) and Exhibit H (*Reserve Health Proposal for Jail Medical Services*). All Health Records shall be kept secure as required by applicable law, NCCHC standards, and the Sheriff's policy and procedures. The Client acknowledges and agrees that Reserve Health's responsibility for all inmate Health Records shall commence on the Effective Date, and that the responsibility for all inmate Health Records prior to the Effective Date and following termination or expiration of this Agreement shall rest solely with the Client. Nothing in this Agreement shall be interpreted to impose responsibility on Reserve Health for inmate Health Records prior to the Effective Date needs of the Effective Date or after termination or expiration of this Agreement.

5.1.2 *Maintenance of Health Records*. Reserve Health shall maintain complete and accurate Health Records for all inmates receiving Healthcare Services. Health Records shall be kept separate from such an inmate's confinement records. The Health Records will be maintained in accordance with all applicable laws and standards including NCCHC, HIPAA, PREA, and ACA standards and the Sheriff's policies and procedures. A complete and current copy of the individual Health Record shall be available to accompany each inmate who is transferred from the Facility to another location for off-site services or transferred to another institution. If not transmitted electronically, such Health Records shall be placed in a sealed envelope in such a way as to maintain the confidentiality of such records until delivered to the subsequent entity and titled to it pursuant to law. Reserve Health will keep Health Records confidential and shall not release any information contained in any Health Record except as required by published Sheriff policies, by a court order, or by applicable law.

# 5.2 <u>Format of Health Records</u>.

5.2.1 *EHR System*. Reserve Health will utilize an Electronic Health Records ("EHR") system to (a) develop, maintain, and store the Health Records, and (b) prepare reports, statistics, and other information related to the Healthcare Services. The EHR system must be able to interface with other systems used by the Client (including the Jail Management System, Laboratory and Pharmacy Systems). The EHR system will permit a subsequent vendor to have immediate access to all such Health Records. Reserve Health is responsible for all costs associated with the EHR system.

5.2.2 *Access*. Only Reserve Health shall have access to the Health Records stored in the EHR system.

5.2.3 *Termination*. Upon expiration or termination of this Agreement, Reserve Health will transfer any license(s) for the EHR system to the Client, and the Client will be responsible for any continuing maintenance and/or fees for the EHR system.

5.3 <u>Ownership</u>. The Health Records and other information and documentation developed for or used in the operation of the healthcare program under this Agreement shall be the property of the Client (with the exception of Reserve Health proprietary information which shall always remain the property of Reserve Health) and shall remain the property of the Client at expiration or termination of the Agreement. Upon termination of the Agreement, all Health Records in paper form shall remain in the Facility.

5.4 <u>Inmate Information</u>. Subject to applicable law, the Client will provide Reserve Health with information pertaining to inmates that Reserve Health and the Client identify as reasonable and necessary for Reserve Health to adequately perform under this Agreement and provide the best possible Healthcare Services to inmates. As examples, the Client will share information: (i) gathered during intake evaluations (e.g., substance abuse, immediate needs) and provide Reserve Health pertinent intake forms; or (ii) regarding inmate injuries. In certain limited circumstances, Reserve Health will provide the Client basic information regarding specific inmates which is either de-identified or is not Personal Health Information ("PHI") as defined under HIPAA. As examples, Reserve Health will share necessary information: (iii) in emergency situations to assist the Client and the particular inmates; or (iv) to provide medical clearance for an inmate to perform certain tasks.

5.5 <u>Reports Related to Third Party Activity</u>. A Party may request such records from the other Parties in connection with the investigation or defense of any claim by a third party related to the conduct of a Party in providing healthcare services to inmates. Any such information provided by a Party shall be deemed to be confidential information and shall be kept confidential

by the Party receiving the information, and shall not, except as may be required by law, be distributed to any third party without prior written approval by the Party providing the information.

#### ARTICLE 6 FINANCIAL ARRANGEMENT

6.1 <u>General</u>. In consideration for the Healthcare Services rendered by Reserve Health described in this Agreement, the Client shall pay to Reserve Health the compensation described on the attached <u>Exhibit B</u> (*Compensation*) and <u>Exhibit H</u> (*Reserve Health Proposal for Jail Medical Services*).

6.2 <u>Terms of Payment</u>. Reserve Health will provide the Client an invoice for the prior month's charges in accordance with <u>Exhibit B</u> (*Compensation*). The Client will pay the amounts charged within thirty (30) days of receipt of the invoice. In the event this Agreement should commence or terminate on a date other than the first or last day of any calendar month, compensation to Reserve Health will be pro-rated accordingly for the shortened month. Additionally, the Client shall bear the costs of any legal or collection fees and expenses incurred by Reserve Health in attempting to enforce the Client's payment obligations hereunder.

#### ARTICLE 7 COUNTY AND SHERIFF SERVICES

7.1 <u>General</u>. In addition to the responsibilities and obligations of the Client described elsewhere in this Agreement, the Client shall provide the following services.

7.2 <u>Security</u>.

7.2.1 *General*. Reserve Health, the County, and Sheriff acknowledge and agree that proper and adequate security services are essential and necessary for the safety of the owners, agents, representatives, employees, contractors, and subcontractors of the Parties, as well as for the security of the Facility and visitors, consistent with a correctional setting. The Client shall use all reasonable efforts to provide security sufficient to enable Reserve Health, its Healthcare Providers, Staff, owners, representatives, employees, agents, contractors, and / or subcontractors to safely provide the Healthcare Services described in this Agreement. It is expressly understood by County and Sheriff that the provision of security and safety for Reserve Health personnel is a continuing precondition of Reserve Health's obligation to provide its services in a routine, timely, and proper fashion. Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors shall follow all security procedures of the Client while at the Facility or other premises under the Client's direction or control.

7.2.2 *Limitations*. In extreme circumstances such as in Facility riots, any Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors may refuse to provide any non-emergency services required under this Agreement if such person is able to reasonably articulate a clear and significant threat to their own safety. Reserve Health shall be liable for any claims, losses, costs, expenses (including without limitation, attorneys' fees and court costs), injuries (to property or people, including death), or damages of

any kind or nature to real or personal property, asserted against the Client and resulting from or attributable to Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors unreasonable failure to provide the Healthcare Services. Subject to North Carolina law and government immunity afforded government entities, if any recommendation by Reserve Health for particular Healthcare Services for any inmate should not be implemented and carried out due to decisions and direction by the Client, the Client shall indemnify Reserve Health for any resulting damages and expenses (including reasonable attorneys' fees and costs).

7.2.3 *Acknowledgement*. Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors understand that the Facility is a detention or jail facility and that working therein involves inherent dangers. Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors further understand that the Client cannot guarantee anyone's safety in the Facility, and nothing herein shall be construed to make the Sheriff, his deputies, or employees a guarantor of the safety of Reserve Health, its Healthcare Providers, Staff, representatives, Staff, representatives, employees, agents, contractors and / or of the safety of Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors.

7.3 <u>Transportation</u>. The Client shall provide prompt and timely security as necessary and appropriate in connection with the transportation of an inmate to and from off-site healthcare services including, but not limited to, Specialty Services, hospitalization, pathology, and radiology services as requested by Reserve Health. Reserve Health shall coordinate with the Client in advance for the Sheriff's transportation to and from the off-site services provider, including doctor offices and hospitals. Said transportation cost and off-site services costs shall be the responsibility of the Client.

7.4 <u>Non-Medical Care</u>. The Client shall provide for all the non-medical personal needs and services of the inmates as required by law. Reserve Health shall not be responsible for providing, or liable for failing to provide, non-medical services to the inmates including, but not limited to, daily housekeeping services, dietary services (except for provision of medical diet determination), building maintenance services, personal hygiene supplies, laundry services, or linen supplies.

# ARTICLE 8 OFFICE SPACE, SUPPORT, EQUIPMENT, INVENTORY, AND SUPPLIES

8.1 <u>General</u>. The Client shall provide Reserve Health with office space, facilities, office furniture, and utilities (electricity, water, and sewer, but not internet) sufficient to enable Reserve Health to perform its obligations hereunder. Subject to the terms of this Article 8, Reserve Health shall provide all necessary office supplies, medical supplies, and additional equipment necessary to comply with the terms of this Agreement. The Client will provide necessary maintenance and housekeeping of the office space and the medical facilities. The Client shall be responsible for providing substitute space should the designated office space and medical facilities become unsafe for any reason.

8.2 <u>Office Space</u>. The Sheriff will provide in the Facility adequate and sufficient office, exam space, storage (for equipment, supplies, medications, paper Health Records, other documents, etc.) for Reserve Health, its Healthcare Providers, Staff, representatives, employees, agents, contractors, and / or subcontractors to use to carry out the requirements of this Agreement. Reserve Health acknowledges that it visited and toured the Facility, and it agrees that the space is adequate to perform under this Agreement. The Client will also provide all necessary utilities serving the spaces used by Reserve Health, including a telephone line and a fax line.

## 8.3 Equipment, Inventory, and Supplies.

8.3.1 *Delivery*. The Client will provide Reserve Health possession and control of all Client medical and office equipment, inventory, and supplies in place at the Facility. Reserve Health and the Client will jointly conduct a physical inventory of the office and medical equipment, inventory, and supplies on July 1, 2024.

8.3.2 *Provision*. Except for the equipment, inventory, supplies, and instruments owned by the Client as of the Effective Date and subject to requirements of Client to acquire additional equipment and supplies under this Agreement, Reserve Health will provide certain medical equipment, inventory, and supplies required for the adequate provision of the Healthcare Services during the Term of this Agreement.

8.3.3 *Maintenance and Replenishment*. To the extent the Client owns or acquires medical equipment that is used to provide medical services required by this Agreement, the Client will maintain such equipment in good working order, and replace it, as necessary. The Client is not obligated to provide any such medical equipment. Reserve Health is responsible for maintaining all medical equipment owned by Reserve Health for performance under this Agreement.

8.3.4 *Acquisition*. In the event new medical equipment, inventory, and supplies are required by Reserve Health to perform under this Agreement, it shall submit to the Client a written request for the purchase or lease of the equipment, inventory, and / or supplies. Reserve Health is responsible for the related cost of the medical equipment for year 1 of the Term.

8.4 <u>Maintenance</u>; <u>Housekeeping</u>. The Client will provide reasonably necessary maintenance and housekeeping services for the Reserve Health office space and the Facility. The Sheriff will provide for each inmate receiving healthcare services the same services and facilities provided by the Sheriff for all inmates at the Facility including, but not limited to, daily housekeeping services, dietary services, building maintenance services, personal hygiene supplies and services, and linen supplies. Reserve Health will keep all spaces occupied by Reserve Health neat and organized in accordance with Reserve Health's day to day operations. Reserve Health is responsible for the disposal of all contaminated medical waste in accordance with all federal, state, and local laws, regulations, and guidelines.

8.5 <u>Requirements upon Termination</u>. In addition to the requirements and obligations set forth in Article 9, at the termination of this Agreement the Parties agree as follows:

8.5.1 *Return to Client*. Reserve Health shall return to the Client possession and control of all Sheriff or County owned medical and office equipment and supplies. At such time, this equipment will be fully accounted for and in good working condition, reasonable wear and tear excepted. Reserve Health shall also return to Sheriff all inmate-specific medications.

8.5.2 *Retained by Reserve Health*. All office supplies and equipment purchased or leased by Reserve Health (i.e., medical equipment, computers, IT accessories, copiers, etc.,) will remain Reserve Health property. Reserve Health shall also retain any stock medication inventory and central supply inventory. The Client will have the option to purchase these inventories at Reserve Health's cost.

#### ARTICLE 9 TERM AND TERMINATION

9.1 <u>Term</u>. The Term of this Agreement shall commence on July 1, 2024. The Initial Term of this Agreement shall be for one (1) year and end on June 30, 2025.

9.2 <u>Renewal</u>. The Initial Term shall automatically renew for two (2) consecutive twoyear Renewal Terms, unless the Agreement is terminated as described herein.

9.3 <u>Termination</u>. This Agreement may be terminated as set forth below, or as permitted elsewhere in this Agreement:

9.3.1 *Mutual Agreement*. The Parties may agree in writing to terminate the Agreement on the terms described therein.

9.3.2 *Termination without Cause*. A Party may terminate this Agreement without cause upon one hundred eighty (180) days prior written notice.

9.3.3 *Termination with Cause*. By any Party upon a material breach of a material provision hereof by another Party, provided that the non-breaching Party provides the breaching Party with sixty (60) days written notice of any such breach, during which period of time the breaching Party shall have the opportunity to cure any such breach (or in the event of a non-monetary breach which is not curable within such sixty (60) day period, the breaching Party has commenced to cure such breach and continues to cure such breach with the exercise of due diligence). If any such breach is cured by the breaching Party during such period of time (or in the event of a non-monetary breach which is not curable within such sixty (60) day period but the breaching Party has commenced to cure such breach and does continue to cure such breach with the exercise of due diligence), it shall be as if such breach never occurred and this Agreement shall continue in full force and effect, unaffected by the non-breaching Party's notice.

9.3.4 *Termination due to Reserve Health Operations*. The Client reserves the right to terminate this Agreement immediately in writing if Reserve Health discontinues or abandons operations, is adjudged bankrupt or is reorganized under any bankruptcy law, insolvency, receivership, conservator law. The Parties agree that termination under this provision

will be considered with cause. The Client shall only pay for services rendered up to the date of termination.

9.4 <u>Responsibility of Care</u>. Upon termination of this Agreement, all responsibility for providing the Healthcare Services to all inmates, including inmates receiving healthcare services at sites outside the Facility, will be transferred from Reserve Health to the Client's subsequent provider of Inmate healthcare services. Reserve Health will transition the healthcare records to the subsequent provider.

9.5 <u>Termination Obligations</u>. In the event of termination, the Client shall pay within thirty (30) days upon receipt of Reserve Health's final invoice all outstanding compensation owing to Reserve Health under this Agreement up through and including the date of termination. Within fifteen (15) days of termination of this Agreement, Reserve Health will vacate the Facility, remove its property, and return to the Client all Client-owned property in Reserve Health's possession.

#### ARTICLE 10 CONFIDENTIALITY

10.1 <u>Protected Healthcare Information</u>. The Parties acknowledge that the purpose of this Agreement is to provide healthcare services to inmates, which will involve the development, maintenance, and protection of highly confidential and personal information, including PHI. To the extent a Party receives PHI of an inmate, the receiving Party shall protect the PHI and maintain confidentiality in accordance with applicable law. This obligation of confidentiality will survive the termination or expiration of this Agreement.

# 10.2 Public Records Laws and Protection of Certain Reserve Health Information.

10.2.1 *General*. The Parties acknowledge that the County and Sheriff are public entities and subject to North Carolina public records laws (*see* NCGS Chapter 132). The County and Sheriff are authorized under this Agreement to comply with public records laws to which they are subject and may release any information that is found to be: (a) a public record; and (b) no legal exception exists protecting that information from disclosure. The County and Sheriff agree, except to the extent they are required to comply with applicable public records laws, that each will keep confidential and secure all: (c) confidential and personal information, including PHI, of inmates to the extent they may have that information; and (d) all Reserve Health proprietary and confidential information included in <u>Exhibit H</u> (*Reserve Health Proposal for Jail Medical Services*) which is "RH Proprietary and Confidential Information".

10.2.2 *RH Proprietary and Confidential Information*. "RH Proprietary and Confidential Information" is that highly sensitive, personal, and valuable information of Reserve Health and its owner, including business and know how information resulting from significant time, effort, and resources expended by Reserve Health. RH Proprietary and Confidential Information also includes that information which qualifies as a trade secret pursuant to North Carolina law or other intellectual property. RH Proprietary and Confidential Information is

included in those pages of <u>Exhibit H</u> (*Reserve Health Proposal for Jail Medical Services*) that have (a) a header stating "RH Proprietary and Confidential Information", and (b) a "Proprietary Information Disclaimer" in the footer.

10.2.3 *Public Records Request Process*. In the event the County and / or Sheriff receives a public records request which includes the RH Proprietary and Confidential Information, the County and / or Sheriff will immediately notify Reserve Health of the request and will not release the information for five (5) business days from Reserve Health's receipt of such notice. Reserve Health shall notify the County and / or Sheriff in writing, within those five (5) business days, whether it objects to the disclosure or gives its permission for the disclosure. If Reserve Health objects to the disclosure, within ten (10) business days from Reserve Health's written notice of objection to the Sheriff and / or County, Reserve Health shall file an action in Superior Court in Gaston County, North Carolina seeking emergency relief authorizing the RH Proprietary and Confidential Information be withheld from disclosure. The County and / or Sheriff will abide by any final order of the Court and doing so shall not be considered a breach of this Agreement. If Reserve Health fails to take timely actions as set forth herein, the disclosure of the requested information to the requesting party by the County and / or Sheriff shall not be considered a breach of this Agreement. Business days shall be defined as all days that County is generally open for business with the public, excluding Saturdays, Sundays, and County holidays.

10.2.4 *Survival*. The public record and non-disclosure provisions of this Agreement shall survive the termination or expiration of this Agreement. Client's duty to hold the RH Proprietary and Confidential Information in confidence shall remain in effect indefinitely.

#### ARTICLE 11 RISK MANAGEMENT AND INSURANCE

11.1 <u>Reserve Health Insurance</u>. Reserve Health will maintain during the Term of this Agreement the insurance coverage described below provided by an insurance company approved by the Client (not to be unreasonably withheld) and authorized to do business in the State of North Carolina. All insurance policies shall be written by insurers qualified to do business in the State of North Carolina and with a current AM Best's rating of A- / VII or better.

11.1.1 Commercial General Liability Insurance with a limit not less than \$2,000,000.00 per occurrence/aggregate including coverage for bodily injury, property damage, products and completed operations, personal/advertising injury liability and contractual liability. /Gaston County must be named as an additional insured.

11.1.2 Workers Compensation. To the extent required by law, Reserve Health shall purchase Workers Compensation Insurance meeting the statutory requirements of the State of North Carolina and any applicable Federal laws.

11.1.3 Employers' Liability Coverage with \$1,000,000 per accident limit, \$1,000,000 disease per policy limit, \$1,000,000 disease each employee limit, or such other amounts as may be required from time to time by applicable state and federal law.

11.1.4 Commercial Automobile Liability Insurance with limits of \$1,000,000 and a Combined Single Limit for Bodily injury and Property Damage for owned and non-owned vehicles. The Client will be named as an additional insured.

11.1.5 Professional Errors and Omissions Insurance with a limit of not less than \$3,000,000.00 per claim, \$3,000,000.00 aggregate as shall protect Reserve Health and its employees for negligent acts, errors, or omissions in performing the professional services under the Agreement. For any claims related to this Agreement, Reserve Health's insurance coverage shall be primary. If Claims Made Policies:

11.1.5.1 The Retroactive Date must be shown and must be before the Effective Date.

11.1.5.2 Insurance must be maintained, and evidence of insurance must be provided for at least five (5) years after the Term.

11.1.5.3 If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a Retroactive Date prior to the contract effective date, the Reserve Health must purchase "extended reporting" coverage for a minimum of five (5) years after the Term.

11.1.6 Cyber Security Insurance with a minimum \$2,000,000.00 aggregate limit, \$2,000,000.00 per incident, and no waiver of subrogation. This policy will be Claims Made and Reported and contain an automatic extended reporting period of not less than ninety (90) days beyond the expiration of the policy. Coverage will include invasion of privacy violations, information theft, damage to or destruction of electronic information, release of private information, alteration of electronic information, extortion, and network security. This policy will provide coverage for breach response costs as well as regulatory fines and penalties as well as credit monitoring expenses with limits sufficient to respond to these obligations.

11.2 <u>Subcontractors</u>. Reserve Health shall not allow any subcontractor to commence work under this Agreement until the subcontractor has obtained the same insurance coverages as described above.

#### ARTICLE 12 INDEMNIFICATIONS

12.1 <u>Indemnification by Reserve Health</u>. Reserve Health shall indemnify and hold harmless the County, the Sheriff, their respective officers, elected officials, agents, and employees against all claims, liability, damages, losses, costs and expenses, including without limitation for injury to or death of any persons or injury to any property arising out of or in any way connected with Reserve Health or Reserve Health's employees or agents (including subcontractors), alleged

acts or omissions in the performance of work by Reserve Health under this Agreement and all claims for damages arising out of bodily injury to persons (including death) or damage to property caused by or resulting from the Reserve Health's performance of this Agreement, unless such injury, death or damage is due to the negligence or willful acts of the County or Sheriff. Reserve Health shall defend all such demands, claims, and causes of action and shall pay all reasonable attorneys' fees and costs of resisting or defending against such demands, claims, or causes of action as they are incurred by the Client.

12.2 <u>Indemnifications by County and Sheriff</u>. Subject to North Carolina law and government immunity afforded government entities, the County and Sheriff each agree to jointly and severally indemnify and hold harmless Reserve Health, its owners, directors, officers, agents, employees, representatives, and contractors from and against any and all actions, losses, damages, claims, liabilities, costs, or expenses (including, without limitation, court costs and reasonable legal and professional fees) when caused by (a) any act, conduct, misconduct, or omission of the County and / or Sheriff, and / or their respective agents, representatives, employees, or contractors, or (b) any breach of this Agreement by the County and / or Sheriff.

## 12.3 <u>Indemnification Process</u>.

12.3.1 Each Party entitled to indemnification under this Article 12 (each an "Indemnified Party") agrees that within five (5) days of it becoming aware of any facts giving rise to a claim by it for indemnification, such Indemnified Party shall assert its claim for indemnification (each a "Claim") by providing a written notice (a "Claim Notice") to the Party required to provide indemnification protection (each, an "Indemnifying Party"). The Claim Notice shall specify, in reasonable detail, the nature and basis for such Claim. Notwithstanding the foregoing, no Indemnified Party's failure to send or delay in sending a Claim Notice will relieve the Indemnifying Party from liability hereunder with respect to such Claim, except to the extent that the Indemnifying Party is materially prejudiced by such failure or delay.

12.3.2 The Indemnifying Party shall have the right to defend the Indemnified Party against any claim, demand, action, suit, proceeding, complaint, charge, hearing, inquiry, or investigation (collectively, an "Indemnification Action") at its sole cost and expense. Except as otherwise provided in this Section, the Indemnifying Party shall have the right to (a) control and conduct any such Indemnification Action, (b) take all other reasonable steps to defend against any such third-party claim and (c) employ counsel designated by the Indemnifying Party. Notwithstanding the above, the Indemnifying Party shall not have the right to control or defend any Indemnification Action if (d) the Indemnifying Party is also a party to such Indemnification Action and the Indemnified Party determines in good faith that joint representation would be inappropriate, (e) the claim for indemnification relates to or arises in connection with any criminal proceeding, or (f) the claim seeks an injunction or equitable relief. The Indemnifying Party shall, within fifteen (15) days after receipt of a Claim Notice, give written notice to the Indemnified Party of its intention to assume the defense of such third-party claim. The Indemnified Party shall have the right, but not the obligation, to participate at its own expense in the defense thereof by counsel of the Indemnified Party's choice and shall in any event cooperate with and assist the Indemnifying Party to the extent reasonably possible. If the Indemnifying Party fails to elect to defend against such Indemnification Action, then (g) the Indemnified Party shall have the right to

do so, provided that the Indemnified Party shall not make any compromise or settlement thereof without the Indemnifying Party's prior written consent (which shall not be unreasonably withheld, conditioned or delayed), (h) subject to the limitations set forth in this Article, the Indemnified Party shall be entitled to recover the liability thereof from the Indemnifying Party upon final determination the underlying Claim, including reasonable attorneys' fees, disbursements and amounts paid as the result of such Indemnification Action (except with respect to any compromise or settlement made without the prior written consent of the Indemnifying Party as described above), and (i) the Indemnified Party shall keep the Indemnifying Party reasonably informed as to all matters concerning such Indemnification Action. No compromise or settlement of a Claim may be effected by the Indemnifying Party without the Indemnified Party's consent (which shall not be unreasonably withheld, conditioned, or delayed).

12.3.3 Any claim for indemnification with respect to a breach of the representations and warranties pursuant to representations and warranties with an expiration date must be brought (by providing written notice of a claim for indemnification) prior to the expiration of the applicable representation and warranty.

12.3.4 No Party shall have any right to indemnification, reimbursement, nor other remedy based upon a breach under this Agreement if a non-breaching Party had knowledge of such breach as of the Effective Date.

12.4 <u>Limitation</u>. In no event shall Reserve Health's obligations in this Article apply or extend to: (a) any claim, liability, cost or expenses arising or incurred at any time in connection with treatment of any inmate's injury if such treatment was not within the responsibility of Reserve Health's care pursuant to this Agreement; or (b) any claim, liability or cost arising out of the acts or omissions of the County and / or Sheriff, or their respective officers, agents, representatives, contractors, or employees which prevent an inmate from receiving medical care as directed by Reserve Health and / or to obtain prompt medical review or examination by Reserve Health's employees or contractors.

12.5 <u>Survival</u>. The terms and conditions of this Article shall survive termination of this Agreement.

#### ARTICLE 13 REPRESENTATIONS AND WARRANTIES OF RESERVE HEALTH

13.1 <u>Authority</u>. Reserve Health has the requisite authority, ability, and experience to enter into this Agreement and perform hereunder.

13.2 <u>Contingent Fees</u>. Reserve Health warrants that no person or selling agency has been employed or retained to solicit this Agreement for a commission, percentage, brokerage, or contingency, except bona fide employees or selling agents maintained by Reserve Health for the purpose of securing business.

13.3 <u>Performance</u>. Reserve Health will perform under this Agreement in good faith and to the best of its ability, all in an effort towards the common goal of providing proper healthcare services to the inmates.

#### ARTICLE 14 REPRESENTATIONS AND WARRANTIES OF COUNTY AND SHERIFF

14.1 <u>Authority</u>. The County and the Sheriff each have the requisite authority to enter into this Agreement with Reserve Health.

14.2 <u>Performance</u>. The County and the Sheriff each will perform under this Agreement in good faith and to best of their respective abilities, all in an effort towards the common goal of providing proper healthcare services to the inmates.

#### ARTICLE 15 COMPLIANCE MATTERS

15.1 <u>General</u>. The Parties shall perform and operate under this Agreement in compliance with applicable federal, state, and local laws, rules and regulations, the policies, rules, and professional standards of care, Reserve Health bylaws, applicable standards of NCCHC, and all currently accepted and approved methods and practices of each area of service. Notwithstanding any unanticipated effect of any provision of the Agreement, no Party will intentionally conduct itself in such a manner in violation of Medicare and Medicaid programs (42 USC § 1-395 (b) and § 1396 (b)) or any subsequent revisions or amendments.

15.2 <u>Accreditation; Permits</u>. Reserve Health's Healthcare Services shall, at a minimum, meet the standards promulgated by all applicable federal, state, and local laws, rules, regulations, and guidelines and the standards required by the NCCHC, PREA and the ACA. This obligation includes without limitation the provision and administration of healthcare, written reports, on-site reviews, preparation of forms and applications, and attendance at meetings as required by the Client. All permits and licenses required by federal, state, or local laws, rules, and regulations necessary for the implementation of the work undertaken by Reserve Health hereunder shall be secured, always paid for, and maintained current by Reserve Health. Reserve Health will obtain and maintain the appropriate certificate(s), licenses, and registrations for work to be performed by all Healthcare Providers and Staff for whom a certificate, license, or registration is required.

15.3 <u>Compliance with NCCHC Standards, ACA, Performance Based Standards for</u> <u>Adult Local Detention Facilities, and PREA</u>. Reserve Health will provide healthcare services which meet or exceed NCCHC Standards and must maintain medical accreditation by the NCCHC, ACA, PREA, and any other entity recognized for medical care accreditation for detention facilities that is selected by the Client. 15.4 <u>Compliance with State Minimum jail Standards</u>. Reserve Health will comply with the rules of NCAC § 10A and § 14J, and the North Carolina Rules for jails and Detention Units (https://info.ncdhhs.gov/dhsr/jail/index.html).

15.5 <u>Equal Employment Opportunity</u>. Reserve Health will comply with all provisions of federal, state, and local laws and regulations to ensure that no employee or applicant for employment is discriminated against because of any protected categories including without limitation, race, color, religion, ethnicity, gender, ancestry, national origin, genetic information, pregnancy, place of birth, marital status, gender identity, sexual orientation, age (40 or older). or handicap unrelated to a bona fide occupational qualification of the position or because of status as a disabled veteran.

15.6 <u>Health Insurance Portability and Accountability Act</u>. The Parties agree to comply with HIPAA requirements in performing under this Agreement, including adopting such practices and executing necessary contracts to maintain compliance.

15.7 <u>Sheriff Policies and Procedures</u>. Reserve Health, its Healthcare Providers, Staff, employees, representatives, agents, contractors and/or subcontractors shall operate within the requirements of the Sheriff's posted security policies and procedures. This includes the Sheriff's rules and regulations regarding the Facility. As examples, there is no recording of any kind (audio or video) or taking any photos of any kind in any secured area of the Facility for any reason without the prior express written permission of the Sheriff. In addition, Reserve Health will not disclose to any third parties information regarding layout of or security measures used within the Facility, including without limitation, location of cameras. If any of the Sheriff's policies and procedures specifically relate to the delivery of healthcare services, the Sheriff and Reserve Health will review the policies and procedures and Reserve Health will provide input.

## ARTICLE 16 RELATIONSHIP OF THE PARTIES

16.1 <u>Independent Contractor Status</u>. The Parties understand, agree, and specifically intend for an independent contractor relationship to be established under the terms and conditions of this Agreement. Nothing in this Agreement shall be construed to create an agency relationship, partnership, trust, an employer / employee relationship, a joint venture relationship, or any other relationship allowing the County or the Sheriff to exercise control or direction over the manner or methods by which Reserve Health, its owners, employees, agents, contractors, or subcontractors perform hereunder, or Reserve Health to exercise control or direction over the manner or methods by which the County or the Sheriff and their respective employees, agents, contractors, or subcontractors perform hereunder, other than as provided in this Agreement. In the event the Internal Revenue Service or other government agency should challenge the independent contractor status of the Parties, the Parties agrees that each Party shall have the right to participate in any discussions or negotiations associated therewith.

#### ARTICLE 17 MISCELLANEOUS

17.1 <u>Covenant of Cooperation and Good Faith; Best Efforts</u>. The Parties agree, warrant, and represent to each other that they will cooperate and act in good faith with each other under this Agreement, and that they will make commercially reasonable efforts to resolve disagreements and disputes prior to initiating any action or proceeding in court or other applicable tribunal. Further, the Parties shall use their respective best efforts to fulfill all obligations set forth in this Agreement over which that Party has control or influence and to perform the transactions contemplated herein.

17.2 <u>Notices</u>. All notices and communications provided in this Agreement shall be in writing and deemed received as follows: (a) when personally delivered; or (b) one business day after being deposited with a nationally recognized delivery service (e.g., Federal Express, UPS, etc.) for overnight delivery (postage prepaid). Notices and communications will be delivered to the following addresses:

Reserve Health:

Daniel Biondi, D.O., M.B.A. CEO 650 S Tryon Street, Suite 440 Charlotte, North Carolina, 28202 Phone No. (704) 626-6266

Sheriff:

Chad Hawkins 425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina 28052 Phone No. 704-869-6800

County:

Dr. Kim S. Eagle 128 West Main Avenue Gastonia, North Carolina 28052 Phone No. 704-866-3000

17.3 <u>Governing Law</u>. This Agreement shall be construed in accordance with and governed by the laws of the State of North Carolina, without regard to the conflicts of laws principles thereof.

17.4 Dispute Resolution.

17.4.1 *Mediation*. Subject to emergency relief described in Article 17.4.3 below, if a dispute arises from or relates to this Agreement or the breach thereof, and if the dispute cannot be resolved through direct negotiations, the Parties agree to endeavor first to settle the dispute by mediation. A Party may initiate mediation by serving written notice upon the other Parties setting forth the nature of the controversy or dispute at any time and requesting mediation. The Parties

shall attempt in good faith to agree upon a single mediator. If the Parties are unable to do so, then each Party shall select a mediator and the mediators so selected shall jointly agree upon a third mediator who shall attempt resolution of the dispute. The mediation shall be held no later than forty (40) days after the written notice initiating the mediation unless the schedule of the chosen mediator(s) causes the mediation to occur following the deadline. Any resolution from the mediation shall be documented and performed within twenty (20) days following the mediation. Each Party shall be responsible for their own costs during the mediation, except that the mediator(s)'s fees and costs shall be split evenly between the Parties.

17.4.2 *Judicial Relief; Jurisdiction*. In the event Mediation is unsuccessful (and Article 17.4.3 does not apply), any Party may proceed with litigation. The Parties consent and agree to the sole and exclusive jurisdiction of the state and federal courts located in and presiding over Gaston County, North Carolina.

17.4.3 *Emergency Relief.* Notwithstanding the requirement for mediation, a Party may pursue emergency interim relief in federal or state court located in and presiding over Gaston County, North Carolina, including without limitation to seek a temporary restraining order, preliminary injunction, or decree, as may be necessary, to protect a Party against, or on account of, any breach or violation of this Agreement. The Parties agree that action under this Article 17.4.3 is restricted solely to situations requiring emergency intervention by a court. A court is authorized to award reasonable attorneys' fees and costs to a Party based upon improper use of this Article 17.4.3.

17.4.4 *Prevailing Party*. If any legal action or other proceeding is brought in connection with this Agreement, the successful or prevailing Party, whether such Party has instituted the action, shall be entitled to recover from the non-prevailing Party(ies) reasonable attorneys' fees and other costs incurred in such action or proceeding, in addition to any other legal and equitable relief to which it may be entitled.

17.5 <u>Survival</u>. Generally, any provision of this Agreement which by its nature would require the survival of the ending of this Agreement, shall survive the Effective Date of this Agreement. Specifically, all indemnities and obligations of the Parties set forth in this Agreement shall survive termination of this Agreement in addition to any other provisions that are specifically noted as surviving termination of this Agreement.

17.6 <u>Severability</u>. If any part of this Agreement is declared by any court or other judicial or administrative body to be null, void, or unenforceable, said provision shall survive to the extent it is not so declared. The invalid or unenforceable provision shall be removed from the Agreement using the Blue Pencil Rule or similar remedy, and the remaining provisions of this Agreement shall be given full effect.

17.7 <u>Successors and Assigns</u>. Except as otherwise provided in this Agreement, no Party shall assign this Agreement or any rights or obligations hereunder without the prior written consent of the other Parties. This Agreement shall inure to the benefit of and shall be binding upon the Parties and their respective successors, permitted assigns, heirs, representatives, executors, and administrators. Notwithstanding the foregoing and anything in this Agreement to the contrary,

Reserve Health may assign its interest in this Agreement as a part of any ownership change, transfer of assets, or other similar transaction following thirty (30) days' written notice to the County and Sheriff.

17.8 <u>Amendments; Waivers</u>. This Agreement may be amended or modified, and any of the terms, covenants, representations, warranties, or conditions hereof may be waived, only by a written instrument executed by the Parties, or in the case of a waiver, by the Party(ies) waiving compliance. Any waiver by any Party of any condition, or of the breach of any provision, term, covenant, representation, or warranty contained in this Agreement, in any one or more instances, shall not be deemed to be nor construed as further or continuing waiver of any such condition, or of the breach of any other provision, term, covenant, representation or warranty of this Agreement.

17.9 <u>Titles</u>. The Article and paragraph titles in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of this Agreement.

17.10 <u>Counterparts</u>. This Agreement may be executed in one or more counterparts, each of which will be deemed to be an original copy of this Agreement and all of which, when taken together, will be deemed to constitute one and the same instrument. The exchange of copies of this Agreement and of signature pages by facsimile transmission or other electronic transmissions shall constitute effective execution and delivery of this Agreement as to the Parties and may be used in lieu of the original Agreement for all purposes. Signatures of the Parties transmitted by facsimile or other electronic transmission shall be deemed to be their original signatures for any purposes whatsoever.

17.11 <u>Entire Agreement</u>. This Agreement, the attached Exhibits, and other attached materials constitute the entire agreement between the Parties with respect to the subject matter hereof and supersedes all prior agreements, understandings, negotiations, and discussions, whether written or oral, between the Parties with respect thereto. The Exhibits are subject to the terms of this Agreement.

17.12 <u>Force Majeure</u>. Neither Party hereto shall be deemed in default with respect to this Agreement, if such Party fails to timely perform same and such failure is due in whole or in part to any strike, lockout, labor trouble (whether legal or illegal), civil disorder, inability to procure materials, failure of power, restrictive governmental laws and regulations, riots, insurrections, war, fuel shortages, accidents, casualties, Acts of God, epidemics, pandemics, acts caused directly or indirectly by the other Party (or such other Party's agents, employees or invitees) or any other cause beyond the commercially reasonable control of the non-performing Party. Notwithstanding the foregoing, this provision shall not apply to the County's financial obligations owed under Article 6.

17.13 <u>Execution Authority</u>. By their signature below, each signatory individual certifies that they are the properly authorized agent or officer of the applicable Party hereto and have the requisite authority necessary to execute this Agreement on behalf of such Party, and each Party hereby certifies to the other that any resolutions necessary to create such authority have been duly passed and are now in full force and effect. Any action, authorization or representation required under this Agreement by the Sheriff may be fulfilled by the Sheriff or his designee.

17.14 <u>No Third-Party Beneficiaries</u>. None of the provisions of this Agreement or any document contemplated hereby is intended to grant any right or benefit to any person or entity which is not a party to this Agreement.

17.15 <u>Construction</u>. In the event an ambiguity or question of intent or interpretation arises, this Agreement shall be construed as if drafted jointly by the Parties and no presumption or burden of proof shall arise favoring or disfavoring any Party by virtue of the authorship of any of the provisions of this Agreement. Any reference to any federal, state, local or foreign statute or law will be deemed also to refer to all rules and regulations promulgated thereunder, unless the context requires otherwise. The word "including" shall mean including without limitation. Any reference to the singular in this Agreement shall also include the plural and vice versa. All pronouns and any variations thereof used in this Agreement shall be deemed to refer to the masculine, feminine, neuter, singular or plural as the identity of the person or persons referred to may require.

**IN WITNESS WHEREOF**, the Parties hereto have caused this Agreement to be duly executed as of the date set forth above.

"Reserve Health"

**Reserve Health, P.C.,** a North Carolina professional corporation

By: \_\_\_\_\_\_ Name: Daniel Biondi, D.O. Title: CEO

"The Sheriff"

**Gaston County Sheriff's Office** 

By: \_\_\_\_\_ Name: Chad Hawkins Title: Sheriff

"The County"

**Gaston County** 

By: \_\_\_\_\_ Name: Dr. Kim S. Eagle Title: County Manager

# EXHIBIT A

## Definitions

ACA. The American Correctional Association.

AIDS. The acquired immunodeficiency syndrome.

AMA. The American Medical Association.

<u>Client</u>. The term "Client" refers to both the Sheriff and the County. In all such circumstances which requires performance by the Sheriff and / or the County, or which creates liability for the Sheriff and / or the County, each will be jointly and severally liable for the benefit of Reserve Health.

<u>CPI</u>. The United States Consumer Price Index published by the United States Bureau of Labor Statistics.

<u>CPI for Healthcare</u>. The United States Consumer Price Index for Medical Care, U.S. City Average, all Urban Consumers, not seasonally averaged (Base Period 1982-84=100), published by the Bureau of Labor Statistics of the U.S. Department of Labor.

<u>Emergency Services</u>. Medically necessary healthcare services needed to treat or screen for a medical condition manifesting itself by acute symptoms of sufficient severity such that, in the absence of immediate medical attention will result in any of the following: placing the health of an inmate or with respect to a pregnant woman, the health of the woman and her unborn child, in serious jeopardy; serious impairments to bodily functions; or serious dysfunction of any bodily organ or part.

Facility. The Facility refers to both the Gaston County jail and the Gaston County jail Annex.

FDA. The United States Food and Drug Administration.

<u>Fiscal Year</u>. The Fiscal Year of the Sheriff and County means the twelve months beginning July 1st and ending June 30th.

HCV. The Hepatitis C Virus.

<u>Health Records</u>. Paper and electronic information which document events and transactions between inmates and healthcare providers, including information on diagnoses, procedures, lab tests, and other services.

<u>HIPAA</u>. The Health Insurance Portability and Accountability Act of 1996, P.L. 104-91, as amended, and its implementing regulations.

HIV. The human immunodeficiency virus.

<u>Inmate or Inmates</u>. An individual under the physical custody and control of the Facility. The following individuals are not inmates for purposes of this Agreement: individuals who are for any reason not in the physical custody and control of the Facility including, but not limited to, any individuals who do not sleep at Facility at night, individuals assigned to work release, individuals who are escapees, individuals in the custody of any police or penal jurisdictions other than Facility. All determinations about an individual's status as an inmate shall be based on the actual clock time of release or custody, not the calendar day of release or custody. Reserve Health is not responsible for determining whether an individual meets the definition of an inmate. Further, Reserve Health is not responsible in any manner for any delay or error caused by the Client's failure to furnish accurate information about an individual's status as an inmate in a timely fashion.

NCAC. The North Carolina Administrative Code.

NCCHC. The National Commission on Correctional Health Care.

<u>NCGS</u>. The North Carolina General Statutes.

PREA. The Prison Rape Elimination Act.

<u>Specialty Services</u>. Medical services that require a physician to be board-certified in a specialty, including, but not limited to, cardiology, dermatology, obstetrics, gynecology, neurology, nephrology, etc.

# EXHIBIT B

#### Compensation

## 1. <u>Annual Fee</u>.

Subject to adjustments described in this Exhibit B (Compensation), Exhibit 1.1 H (Reserve Health Proposal for Jail Medical Services), and throughout this Agreement, the County agrees to pay Reserve Health an annual sum for Year 1 of the Term of Four Million Three Hundred Ninety-Nine Thousand Four Hundred Seventy-Six Dollars and Zero Cents (\$4,399,476.00) (the "Year 1 Annual Fee"), in accordance with the terms and conditions set forth in this Exhibit B (Compensation) and the Agreement. The Year 1 Annual Fee includes the Implementation Fee of One Hundred Thousand Dollars and Zero Cents (\$100,000.00) described in Exhibit H (Reserve Health Proposal for Jail Medical Services). No subsequent Annual Fees will include the Implementation Fee as it is a onetime occurrence. The Year 2 Annual Fee will be Four Million Two Hundred Ninety-Nine Thousand Four Hundred Seventy-Six Dollars and Zero Cents (\$4,299,476.00) (the "Year 2 Annual Fee"), in accordance with the terms and conditions set forth in this Exhibit B (Compensation) and the Agreement. The Year 2 Annual Fee is subject to the 3% increase as set forth in Section 1.2 below. This Annual Fee results from financial projections and modeling by Reserve Health based on data from the Client. In the event certain data changes during the Term, the Annual Fee will adjust accordingly (as examples, please see the below adjustments based on MADP and changes in the Standards of Care or Scope of Services).

1.2 The Annual Fee, as may be adjusted under this Agreement due to changes in Standard of Care or Scope of Services, shall automatically increase by three percent (3%) annually.

#### 2. <u>Payment Schedule</u>.

The Annual Fee of \$4,399,476.00 shall be divided evenly over twelve (12) months, with each monthly payment amounting to Three Hundred Sixty-Six Thousand Six Hundred Twenty-Three Dollars and Zero Cents (\$366,623.00), subject to any adjustments as provided in this Agreement.

#### 3. <u>MADP Adjustments to the Annual Fee</u>.

The Parties acknowledge and agree that the Annual Fee is based upon a certain Monthly Average Daily Population ("MADP") for the Facility, including reasonable estimates for fluctuations. In the event the MADP exceeds the anticipated capacity of 620 inmates by five percent (5%) or more in any given month, the Annual Fee payable to Reserve Health by the Client will be accordingly adjusted for that month. This adjustment is calculated based on the number of inmates exceeding the 620 threshold, with an additional cost incurred at a per diem rate of \$3.78 for each inmate above the threshold. In no event will the Annual Fee be reduced should the MADP decrease.

## 4. <u>Changes in Standard of Care or Scope of Services</u>.

The Parties acknowledge and agree that standards of care associated with the Healthcare Services may change during the Term. In addition, the Parties also acknowledge and agree that the Client may wish to change the scope of services provided by Reserve Health during the Term. In either event, if these potential changes result in an increase to Reserve Health's annual operating budget in excess of two percent (2%), the Parties agree to negotiate in good faith amendment(s) to this Agreement to reflect the changes, including adjustments to the overall compensation paid to Reserve Health under this Agreement (e.g., increasing the Annual Fee, providing for lump sum payments, etc.).

## 5. <u>Method of Payment</u>.

Payments shall be made via ACH transfer to the following bank account:

Fifth Third Bank, or any other method mutually agreed upon by both Parties in writing.

# EXHIBIT C

## **Healthcare Services**

1. <u>General Healthcare Services</u>.

1.1 *Primary Care*. Routine medical evaluations, chronic disease management, and preventive care.

1.2 *Nursing Care*. 24/7 nursing services for assessing and treating acute and chronic conditions.

1.3 *Specialty Care Referrals*. Access to specialty medical services either on-site or through external providers as needed (e.g., cardiology, orthopedics).

## 2. <u>Mental Health Services</u>.

2.1 *Psychiatric Evaluation and Treatment*. Comprehensive psychiatric assessments, medication management, and individual therapy.

2.2 *Counseling Services*. Group and individual counseling for substance abuse, trauma, and other mental health conditions.

2.3 *Crisis Intervention*. Immediate response and intervention for individuals experiencing acute mental health crises.

3. <u>Dental Services</u>.

3.1 *Routine Dental Care.* Examinations, cleanings, extractions, and basic restorative services.

3.2 *Emergency Dental Services*. Immediate dental emergency care includes pain management, infection management, and extractions.

4. <u>Vision Services</u>.

4.1 *Eye Examinations*. Routine screenings.

5. <u>Pharmacy Services</u>.<sup>1</sup>

5.1 *Medication Dispensing*. On-site pharmacy for dispensing prescribed medications, with protocols for controlled substances.

5.2 *Medication Administration*. Oversight of medication administration by qualified staff.

5.3 *Medication Management.* Regular reviews of medication regimens for efficacy and safety.

6. <u>Emergency Medical Services</u>.

6.1 *Emergency Response*. Immediate medical evaluation and treatment for acute medical emergencies within the facility.

6.2 *Hospital Transfers*. Coordination of transfers to hospital emergency departments for conditions that cannot be treated on-site.

7. <u>Infectious Disease Control</u>.

7.1 *Screening and Testing.* Routine screening for infectious diseases upon intake and as clinically indicated.

7.2 *Vaccinations*. Administration of vaccines as recommended by public health guidelines.

7.3 *Infection Control Measures*. Implement protocols to prevent infectious disease spread within the facility.

8. <u>Continuity of Care</u>.

8.1 *Intake Assessments*. Health screenings at intake.

8.2 *Ongoing Care.* Acute and chronic care while in the Facility.

<sup>&</sup>lt;sup>1</sup> The Parties acknowledge and agree that the Annual Fee is based upon a cap of \$25,000 per inmate per year for pharmaceuticals. If the cap must be increased, the Parties agree to negotiate in good faith a correlative adjustment to the Annual Fee. The Parties further acknowledge and agree that the Healthcare Services do not include coverage for over-the-counter medications that inmates may purchase independently from the Facility's commissary. These OTC items remain the financial responsibility of the inmates.

8.3 *Health Records Management*. Comprehensive documentation of medical history, treatment plans, and healthcare services provided during incarceration.

## 9. <u>Compliance and Quality Assurance</u>.

9.1 *Accreditation Standards*. Compliance with national healthcare standards for correctional facilities.

9.2 *Quality Improvement Programs*. Ongoing evaluation and improvement of healthcare services based on quality indicators and inmate feedback.

## 10. <u>Staff Training and Development</u>.

10.1 *Professional Training*. Regular training for Healthcare Providers and Staff on correctional health care, emergency response, and mental health interventions.

10.2 *Staff Credentialing*. Ensuring all Healthcare Providers are appropriately licensed and credentialed in North Carolina according to their professional standards.

<u>Note</u>. This <u>Exhibit C</u> (*Healthcare Services*) is intended to provide a comprehensive overview of the Healthcare Services available to inmates at the Facility. The Healthcare Services outlined herein are subject to change based on regulatory requirements, the healthcare needs of the inmate population, and advancements in medical practice.

## EXHIBIT D

#### Administrative Services

#### 1. <u>Patient Management System</u>.

1.1 Implement and maintain an electronic health records (EHR) system tailored to correctional health needs.

1.2 Secure management of inmate health records, ensuring confidentiality, integrity, and accessibility.

2. <u>Compliance and Regulatory Affairs</u>.

2.1 Ensuring healthcare services comply with state and federal regulations, including HIPAA, NCGS § 8-53, ACA, and NCCHC/ACA standards for healthcare services in jails.

2.2 Regular updates and training on relevant healthcare laws, regulations, and best practices.

3. <u>Staffing and Human Resources</u>.

3.1 Provision of qualified healthcare professionals, including recruitment, vetting, and continuous training.

3.2 Management of staff schedules to ensure 24/7 healthcare availability within the Facility.

4. <u>Quality Assurance and Performance Improvement.</u>

4.1 Continuous monitoring and evaluation of healthcare services to meet quality standards.

4.2 Implementation of corrective action plans for any non-compliance or performance issues identified.

5. <u>Financial Management and Billing</u>.

5.1 Efficient billing processes for healthcare services, including applicable insurance claims management and inmate co-pay programs.

5.2 Transparent reporting and auditing of healthcare-related expenditures.

## 6. <u>Supply Chain Management</u>.

6.1 Procure and manage medical supplies and pharmaceuticals, ensuring availability and compliance with regulations.

6.2 Inventory control systems to monitor and manage healthcare supplies efficiently.

7. <u>Healthcare Coordination and Continuity of Care</u>.

7.1 Coordination of care with external healthcare providers, including scheduling and transportation for off-site appointments.

7.2 Manage follow-up care and integrate external healthcare information into the Inmate's EHR.

8. <u>Risk Management</u>.

8.1 Implementation of risk management practices to minimize healthcarerelated liabilities.

8.2 Regularly review and update policies and procedures to mitigate risks.

9. <u>Reporting and Documentation</u>.

9.1 Report on healthcare service delivery, outcomes, and financials to facility administration.

9.2 Maintenance of documentation for audits, compliance checks, and quality improvement initiatives.

10. Information Technology Support.

10.1 IT support for healthcare technologies, including EHR systems, telehealth platforms, and data security measures.

10.2 Regular updates and maintenance of healthcare IT systems to ensure operational efficiency and security.

# 11. <u>Performance Metrics and Evaluation</u>.

11.1 Establishment of key performance indicators (KPIs) for administrative services.

11.2 Regular review meetings to assess performance, identify areas for improvement, and adjust services as necessary.

# EXHIBIT E

# Staffing and Schedule

Position	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	On-Call*
			1	st Shift				
Medical Director	Variable	$\checkmark$						
Physician	0800-1700		0800-1700					$\checkmark$
Nursing Director/HSA	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			$\checkmark$
RN	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
Administrative Assistant	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Case Mgmt/Referral Coord.	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Medical Records	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Medical APP (PA/NP)	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			<b>~</b>
Psychiatrist		0800-1700		0800-1700				<b>~</b>
PMHNP	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			Image: A start and a start
MHP/LCSW	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Dentist					0800-1600			<b>~</b>
Dental Assistant					0800-1600			
Booking RN	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
LPN 1	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
LPN 2	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
			2	nd Shift				
Booking RN	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
LPN 1	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
LPN 2	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
Charge RN	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
			3	rd Shift				
Booking RN	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	
	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	
LPN				2300-0700	2300-0700	2300-0700	2300-0700	

## EXHIBIT F

## **Health Records Services**

## 1. <u>Health Records Management</u>.

Reserve Health shall establish and maintain a comprehensive Health Records system for the Facility that supports delivering quality Healthcare Services, facilitates communication among healthcare providers, and ensures continuity of care to the inmates. The system will include, but not be limited to, the creation, documentation, maintenance, storage, and retrieval of paper and electronic Health Records.

## 2. <u>Confidentiality and Security</u>.

Reserve Health will implement policies and procedures to protect the confidentiality, integrity, and availability of the Health Records. This includes compliance with HIPAA, NCGS § 8-53, and other relevant privacy laws. Access to Health Records shall be restricted to authorized personnel only.

## 3. <u>Electronic Health Records (EHR) System</u>.

Reserve Health shall utilize a certified EHR system that complies with national standards. The EHR system will facilitate real-time, secure access to patient health information, enabling timely and informed decision-making by healthcare providers.

## 4. <u>Record Keeping and Documentation</u>.

Reserve Health shall ensure that all Health Records are accurately maintained and fully document patient health information, medical history, diagnoses, treatments, and care plans. Records will be kept up-to-date and completed promptly following any patient encounter or healthcare service provided.

## 5. <u>Transfer and Disposal of Records</u>.

In the event of inmate transfer, discharge, or release, Reserve Health will ensure the appropriate and secure transfer of Health Records to the receiving institution, healthcare provider, or the inmate, as applicable. Procedures for the secure disposal of Health Records will comply with legal and regulatory requirements.

## 6. <u>Audits and Compliance</u>.

Reserve Health shall conduct regular audits to ensure Health Records management policies and procedures compliance. Any deficiencies identified during audits will be addressed promptly to maintain the integrity of the Health Records system.

## 7. <u>Training and Education</u>.

Reserve Health will provide ongoing training and education to Healthcare Providers and Staff on the proper management of Health Records, including but not limited to confidentiality, documentation standards, and the use of the EHR system.

## EXHIBIT G

## Gaston County Sheriff's Office Request for Proposal and Sample Contract For Jail Medical Services

## GASTON COUNTY SHERIFF'S OFFICE

## Sheriff Chad Hawkins

# Request for Proposal and Sample CONTRACT for JAIL MEDICAL SERVICES

Due by: Monday, February 26, 2024, 4:00 pm EST

## Issued By:

Gaston County Sheriff's Office 425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina 28052 (704) 869-6800

## NOTICE TO VENDORS

## WHEN SUBMITTING A SEALED PROPOSAL, ALL PROPOSALS SHOULD BE CLEARLY MARKED AS A PROPOSAL DOCUMENT. THIS IDENTIFICATION SHOULD INCLUDE THE PROPOSAL TITLE AND DATE DUE ON THE OUTSIDE OF THE ENVELOPE.

## **GASTON COUNTY SHERIFF'S OFFICE**

## Sheriff Chad Hawkins

## PROPOSED TITLE:

## CONTRACT for JAIL MEDICAL SERVICES

#### INSTRUCTIONS TO VENDORS:

Included herein are <u>General Terms and Provisions</u> (Part A), the <u>Special Terms</u> <u>and Conditions</u> (Part B), the <u>Technical Specifications</u> (Part C), and the <u>Proposal</u> <u>Response</u> (Part D), which together with all attachments, constitute the entire "Proposal Package." The Proposal Package must be the basis upon which all proposals are offered and the same (the entire Proposal Package) must be kept together and returned, intact, by the time and at the place herein specified. The Vendor must manually sign the **General Terms and Provisions** (Part A) and **Proposal Response** (Part D). Any questions concerning this proposal package should be directed to the following:

#### **Gwen Danner, Business Services Administrator**

#### **Gaston County Sheriff's Office**

#### gdanner@gcps.org

#### (704) 869-6839

When awarded, this Proposal Package will become part of the "**Contract Document**." The Vendor's signature on the proposal constitutes the Vendor's agreement to the terms therein.

READ THE ENTIRE PROPOSAL CAREFULLY BEFORE SIGNING.

## REQUEST FOR PROPOSAL

## CONTRACT for JAIL MEDICAL SERVICES

#### GASTON COUNTY SHERIFF'S OFFICE

## LETTER OF INTENT

The undersigned acknowledges the General Terms and Provisions of the Proposal and intends to respond to the Proposal for the Gaston County Sheriff's Office (or herein referred to as "Sheriff's Office"). We understand that any changes, clarification, and addenda to the Proposal will be promptly communicated to the individual authorized below to receive this information.

Name

Company Name

Address

**Telephone Number** 

**Email Address** 

The following representatives of your organization will attend the Vendor conference (limited to two (2) representatives per organization):

NOTE: THIS FORM MUST BE RETURNED PRIOR TO ATTENDING THE MANDATORY VENDOR CONFERENCE. THIS FORM MAY BE SENT VIA EMAIL TO:

#### **Gwen Danner, Business Services Administrator**

#### gdanner@gcps.org

## Gaston County Sheriff's Office 425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina (704) 869-6800

January 8, 2024

## VENDOR:

#### (Include your company name and address here)

SUBJECT:

Request for Proposal

PROPOSAL TITLE: Contract for Jail Medical Services

CLOSING DATE & TIME: Monday, February 26, 2024, 4:00 pm EST

Please Note: The Gaston County Sheriff's Office is in the Eastern Time Zone

PLACE:

Office of the Business Manager

VIA US MAIL	VIA COURIER OR HAND-DELIVERY
Gaston County Sheriff's Office	Gaston County Sheriff's Office
Attn: Gwen Danner Business Services Administrator	Attn: Gwen Danner, Business Services Administrator
425 Dr. Martin Luther King Jr. Way	425 Dr. Martin Luther King Jr. Way
Gastonia, North Carolina 28502	Gastonia, North Carolina 28502

Proposals will be received before the time and date shown and will be read aloud immediately thereafter at the "Place" indicated above.

Vendors Conference: NOTE- MANDATORY VENDORS CONFERENCE

January 29, 2024, 10:00 am EST

Gaston County Jail 425 Dr. Martin Luther King Jr. Way Gastonia, NC 28052

For purposes of scheduling, it is anticipated that the Facility Tours and Vendors Conference may require 2-3 hours to complete. This is an estimated time.

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## PART A

## يسلفنى

## **GENERAL TERMS AND PROVISIONS**

## 1. Proposals

The Proposal Package must be contained in a SEALED envelope addressed to: Gaston County Sheriff's Office, Attn: Gwen Danner, Business Services Administrator, 425 Dr. Martin Luther King Jr. Way, Gastonia, NC 28052. <u>To prevent</u> <u>inadvertent opening, the Proposal Package must be marked as a PROPOSAL</u> <u>DOCUMENT on the outside of the envelope</u>.

If our specifications, when included in our Request for Proposal, are not returned with your proposal, and no specific reference is made to them in your proposal, it will be assumed that all specifications will be met. When material, sketches, cuts, descriptive literature, Vendor's, or manufacturer's specifications which accompany the proposal contain information that can be construed or is intended to be a deviation from our specifications, such deviations must be specifically referenced in your proposal response.

The responsibility for getting the proposal to the Sheriff's Office on or before the stated time and date will be solely the responsibility of the Vendor. The Gaston County Sheriff's Office will in no way be responsible for delays caused by the United States Postal Service or a delay caused by any other occurrence, or any other method of delivery. The Vendor shall be responsible for reading very carefully and understanding completely the requirements in the specifications. Proposals will not be accepted after the time specified for receipt. Such proposals shall be returned to the Vendor unopened with the notation "This proposal was received after the time designated for the receipt and opening of proposals."

## 2. Postponement of Date for Presentation and Opening of Proposals

The Sheriff's Office reserves the right to postpone the date for receipt and opening of proposals and will make a reasonable effort to give at least five (5) calendar days' notice of any such postponement to each prospective Vendor.

## 3. Time for Consideration

Vendors warrant by virtue of proposing that the prices quoted in their proposals will be good for an evaluation period of ninety (90) calendar days from the date of proposal opening unless otherwise stated. <u>Vendors will not be allowed to withdraw</u> <u>or modify their proposals after the opening time and date</u>.

The Gaston County Sheriff's Office requires that, at the conclusion of the selection process, the contents of all proposals be placed in the public domain and be open to inspection by interested parties.

#### 4. Prices

All proposals submitted must show the <u>net proposal price</u> after all discounts allowable have been deducted, if applicable.

The Vendor's attention is directed to the fact that the tax laws of the State of North Carolina apply to this proposal matter and that all applicable taxes and fees shall be deemed to have been included in the Vendor's proposal as part of the materials cost, when applicable.

## 5. Proposal Errors

When errors are found in the extension of the proposal prices, the unit price will govern. Proposals having erasures or corrections must be initialed in ink by the Vendor.

## 6. Proposal Obligation and Disposition

The contents of the proposal and any clarifications thereto submitted by the Vendor shall become part of the contractual obligation and incorporated by reference into the ensuing contracts. All proposals become the property of the Gaston County Sheriff's Office and will not be returned to the Vendor.

## 7. Laws, Statutes and Ordinances

The terms and conditions of the Request for Proposal and the resulting contract or activities based upon the Request for Proposal shall be construed in accordance with the laws, statutes, and ordinances applicable to Gaston County and the State of North Carolina. Where State Statutes and regulations are referenced, they shall apply to this Request for Proposal and to the resulting contract.

## 8. Information and Descriptive Literature

Vendors must furnish all information requested in the proposal. Proposals which do not comply with these requirements will be subject to rejection.

## 9. Proposal Submittal Costs

Submittal of a proposal is solely at the cost of the Vendor and the Gaston County Sheriff's Office in no way is liable or obligates itself for any cost associated therewith.

## 10.No Proposal

If the receipt of this Request for Proposal is not acknowledged, the Vendor's name

will be removed from the Vendors' mailing list.

## 11. Compliance with Occupational Safety and Health Act

Vendor certifies that all material, equipment, and any other aspect of its proposal subject to OSHA, meets all OSHA requirements.

## 12. Acceptance and Rejection

The Gaston County Sheriff's Office in its sole discretion reserves the right to reject any or all proposals, to waive irregularities, if any, in any proposal, and to accept the proposal which in the judgment of the Sheriff's Office is in the best interest of Gaston County and the Sheriff's Office. The Sheriff's Office reserves the right to select the Vendor that will best meet the needs of the Gaston County Sheriff's Office, and the selection will not necessarily be made solely on the cost as the proposal process utilized is not a competitive bid process. Vendors submitting proposals which do not meet the mandatory requirements will be considered in non-compliance and will be disqualified. After evaluation of proposals and approval by the Sheriff's Office, all Vendors will be notified of the selected Vendor.

## 13. Public Record

Any material submitted in response to this Request for Proposal will become a public document pursuant to the laws of North Carolina. This includes material which the Vendor might consider to be confidential or trade secret. Any claim of Confidentiality is waived upon submission, effective after opening pursuant to the laws of North Carolina.

## 14. Specifications are attached.

Chad Hawkins, Sheriff Gaston County, North Carolina

## 15. General Terms and Provisions are acknowledged. Our Proposal is attached.

Date

Company Officer

Date

Company Officer

**NOTE**: EXHIBIT A MUST BE RETURNED WITH YOUR PROPOSAL AFTER COMPLETING PARAGRAPH 17. EACH VENDOR PROPOSAL, AND ANY CLARIFICATIONS TO THE PROPOSAL, MUST BE SIGNED BY AN OFFICER OF THE COMPANY OR A DESIGNATED AGENT EMPOWERED TO BIND THE FIRM IN CONTRACT. EXCEPTIONS TO THE SPECIFICIATIONS, IF ANY, MAY BE NOTED ON THE SPECIFICATION PAGE OR ON THE EXCEPTION FORM.

## SCHEDULE OF PROPOSAL PROCESS

The following is a schedule of events concerning the proposal process:

EVENT	DATE
RFP distribution - Available on Web Site:	
gastongov.com/bids.aspx	Monday, January 8, 2024
Questions due regarding RFP	Monday, January 22, 2024, by noon
Any submitted questions will be answered in writing at the Mandatory Vendor Conference	
Mandatory attendance of Vendor Conference and tour of detention facilities (following Vendor Conference), at the jail located at:	Monday, January 29, 2024, by 10:00 am
425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina 28052	
Proposal Closing	Monday, February 26, 2024, 4:00 pm EST
Vendor Presentations (if needed)	March 4-March 8, 2024
Award Notification	Wednesday, March 13, 2024
Contract Negotiation & Contract Executed	Friday, March 22, 2024
Commence Services	Monday, July 1, 2024, 12:00 am EST

## PART B

## SPECIAL TERMS AND CONDITIONS

## 1. In General

The purpose of these specifications is to solicit sealed proposals (including sample contract) for the provision of comprehensive medical services, health care personnel and program support services for the Gaston County Sheriff's Office in its' jails. The specifications set forth are for informational purposes and to provide a general description of the requirement. Vendors shall be responsible to submit technical proposal(s) based upon their design that will accomplish the intended purpose as set forth herein.

All questions about the meaning or intent of this Request for Proposal are to be directed, in writing only, to:

## Gaston County Sheriff's Office Attn: Gwen Danner, Business Services Administrator 425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina 28052 gdanner@gcps.org

Interpretations or clarifications considered necessary by the Gaston County Sheriff's Office in response to such questions will be issued by addenda mailed or delivered to all parties recorded by the Sheriff's Office as having attended the Mandatory Vendor's Conference on January 29, 2024. Questions must be received by noon on January 22, 2024, to ensure a response prior to the date of the opening of proposals. Oral or other interpretations or clarifications will be without legal effect.

A tour of the detention facilities will be scheduled following the Vendor conference on January 29, 2024, at 10:00 am EST. Vendors will meet at the Gaston County Jail, 425 Dr. Martin Luther King Jr. Way, Gastonia, NC 28052. The purpose of the conference will be to offer all interested parties an opportunity to discuss the proposal process, conditions of the Request for Proposal and to answer additional questions about the current health delivery needs. Attendance is mandatory at this conference for any firms wishing to be considered. All questions to be discussed at the conference shall be submitted in writing prior to the Vendor's Conference. The deadline for submitting such questions or comments is noon on January 22, 2024. Unofficial responses to verbal questions will be offered, however, any substantive questions will be addressed officially in written response.

Any changes made to this Request for Proposal will be shared with all registered Vendor's within five (5) working calendar days following the conference. All changes will be addressed officially in writing.

#### 2. Scope

The Gaston County Jail currently operates to 2 facilities, the main Jail contains approximately 488 beds, while the Annex facility contains approximately 176 beds, for a total of 664; however, the ADP of inmates potentially needing medical care is 620. There are currently 10 medical beds. In 2023, the average daily jail population for both facilities totaled 654.

Gaston County is a county in the U.S. state of North Carolina. As of the 2022 census, the population was **234,215**. The county seat is Gastonia. Dallas served

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as the original county seat from 1846 until 1911. Gaston County is included in the Charlotte-Concord-Gastonia, NC-SC Metropolitan Statistical Area. Of North Carolina's 100 counties, Gaston County ranks 74th in size, consisting of approximately 364.5 square miles and is tenth in population. The county has fifteen incorporated towns. In addition to fifteen incorporated towns and cities, there are several unincorporated communities such as Hardin, Lucia, Crowder's Mountain, Sunnyside, Alexis, Tryon, and North Belmont.

Gaston County Sheriff's Office employes 146 people assigned to the detention division. The Sheriff's Office has been National Commission on Correctional Health Care 2008.

The Gaston County Jail opened on November 1, 1999. The Jail has over 160,000 square feet and has a total bed capacity of 488 with an operating inmate capacity of 440. The main jail consists of eight (8) housing blocks and a medical unit. The facility houses male and female state pretrial detainees and convicted inmates sentenced to serve their time under the supervision of the Sheriff. The Jail is also contracted with the United States Marshal's Office to house pretrial federal inmates at a per diem rate of \$73.00 per day.

There is an on-site Medical Unit which has medical staff available 24 hours a day to provide medical care to the inmates at the jail and jail annex. The medical area has ten (10) beds. The jail kitchen is operated by a contract food service provider, which provides three (3) meals a day to all inmates housed in the jail and the jail annex. The menus are prepared in consultation with a registered dietitian including any special or modified diets meeting the state requirements of 2100-2500 calories per day.

State Work Release inmates pay a daily rate based on their yearly income with the minimum being \$18.00 per day and the maximum being \$36.00 per day until their sentence is completed. The Jail Annex is also responsible for inmates sentenced to serve weekends in jail, by processing the inmates in and out of the facility each weekend and ensuring their sentence requirements are fulfilled.

The Detention Facility offers numerous programs for the inmate's benefit. These programs are partnerships through various agencies.

- Career Readiness Program (Gaston College)
- GED Program (Gaston College)
- Domestic Violence Awareness (The Shelter)
- Substance Abuse (Drug) Program (Gaston County)
- AA Program (Volunteers)
- HIV Awareness Program (Gaston Co. Health & Human Services Department)
- Darkness to Light Child Abuse Awareness Program (Hope United)
- Making Proud Choices Program (Gaston Co. Health & Human Services Dept.)

- Birds and Bees Program (Crisis Pregnancy Ministry)
- Pregnancy Prevention Educational Program (Gaston Co. Health & Human Serv.)
- Send Home Stories Program (Gaston County Library)
- Federal Pre-Incarceration Orientation Program (Federal Probation)

The Gaston County Jail Annex was initially constructed to provide additional housing for inmates and opened on May 3, 1996. The Annex has 24,740 square feet and a total bed capacity of 176 with an operating inmate capacity of 159. The Annex facility is used to house male pre-trial, convicted inmates and weekenders sentenced to serve their time under the supervision of the Sheriff. The annex eight dorms with twenty (20) beds each and sixteen (16) single cells that are used for special watches and mental health issues.

The Jail Annex also houses sentenced inmates with court ordered work release. The Jail Annex has a contract with the Federal Bureau of Prisons to house sentenced federal inmates on Federal Work Release program also at a per diem rate of \$80.00 per day. The Jail Annex staff is responsible for verifying and approving the employment status of each inmate prior to starting the program for the daily monitoring and surveillance of each inmate on the program keeping track of their employment status, hours they are out of the facility and recording their job site locations. Inmates on the Federal Work Release program pay a subsistence payment, which is 25% of their gross wages for each paycheck they draw, off-setting what the Federal Bureau of Prisons pays monthly.

State Work Release inmates pay a daily rate based on their yearly income with the minimum being \$18.00 per day and the maximum being \$36.00 per day until their sentence is completed. The Jail Annex is also responsible for inmates sentenced to serve weekends in jail, by processing the inmates in and out of the facility each weekend and ensuring their sentence requirements are fulfilled.

## 3. Preparation and Submittal of Proposals

- A. All proposals must be signed in **blue** ink by the authorized principals of the firm.
- B. All attachments to the Request for Proposal (RFP) requiring execution by the Vendor are to be returned with the proposal, including the sample contract.
- C. Proposals are to be in a sealed container. The face of the container shall indicate the RFP name, time, and date of public opening.
- D. Proposals must be received by the Gaston County Sheriff's Office no later than the time and date shown on the Schedule of Proposal Process. Requests for extensions to this time and date will not be granted. Firms mailing their proposals should allow for normal mail time to ensure receipt Page | 14

of their proposals prior to the time and date fixed for the acceptance of the proposals. Proposals or unsolicited amendment(s) to proposals received by the Sheriff's Office after the acceptance date will not be considered. Proposals will be opened publicly at the time and date specified.

E. All proposals must be submitted in six (6) copies on the forms provided in this document and assembled, in page number order, to ensure each proposal is reviewed and evaluated properly. The original copy must be marked as such on the front of the document. If additional pages are required for further description, 8-1/2" x 11" sheets must be used. If a cover letter is provided, it cannot be longer than two (2) pages in length and shall serve as an introduction to and summary of the proposal. DO NOT DEVIATE FROM THIS FORMAT. Proposals should be as concise as possible without omitting any necessary details.

#### 4. Evaluation of Proposals

An Award Committee will evaluate all proposals and make a recommendation to the Sheriff of Gaston County based upon the following criteria:

A. All proposals submitted will initially be evaluated for the following:

- i. Evidence the appropriate licenses, permits, or other documents required to operate in the State of North Carolina and Gaston County have been obtained by the Vendor or evidence that such documents can be obtained in enough time to commence operations on July 1, 2024.
- ii. Financial statements and evidence satisfactory to the Gaston County Sheriff's Office that the Vendor has enough financial resources to execute the contract, should it be awarded.
- B. Proposals which the Committee judges to be deficient in either of the above may be rejected without further evaluation.
- C. Proposals which the committee judges to have satisfactorily complied with the above minimum requirements will then be evaluated based on:
  - i. Program Capability
    - a. Vendor Qualifications
    - b. Prior experience in delivering health care services in an Page | 15

institutional, large detention or correctional setting of similar size, including documentation from each site confirming service delivery.

- c. Documentation of institutional accreditation by appropriate accrediting bodies, to include National Commission on Correctional Health Care (NCCHC), American Correctional Association (ACA) and the Prison Rape Elimination Act (PREA).
- ii. Detailed Plan
  - a. Outline of services to be provided, to include infirmary operation.
  - b. Intake Screening.
  - c. History and physical examination.
  - d. Physician services.
  - e. Nursing services.
  - f. Dental services.
  - g. Eye care services.
  - h. Sick call (automated process).
  - i. Mental health services.
  - j. Medication administration.
  - k. Medication support services laboratory, X-ray, EKG & pharmaceutical needs & staffing.
  - I. Records maintenance, including electronic records management.
  - m. Data collection procedures, processing, and reporting, as well as third-party billing support services for all outside medical services.
  - n. Quality assurance and utilization reviews procedures.

iii. Organizational Capability

- a. Job descriptions
- b. Staff orientation program
- c. Market rates by position
- d. Retention rate by position by facility
- iv. Proposed Contract Price and Composition

#### 5. Method of Award

The Gaston County Sheriff's Office reserves the right to award this contract to the Vendor submitting the proposal which, in the opinion of the Sheriff's Office, best serves the requirements of the Sheriff's Office. The successful proposal will be determined utilizing both price and evaluation criteria outlined in Paragraph 4 above. Once each member of the Awards Committee has independently read and rated each proposal to determine compliance with technical and administrative requirements, a proposal evaluation matrix will be completed. A composite evaluation will then be prepared which indicates the committee's collective ranking of the highest rated proposals in descending order. At this point, the Awards Committee may conduct interviews with the top ranked firms they have determined are technically and administratively compliant with our requirements. The Sheriff's Office intends to make an announcement approximately fourteen (14) working days after the closing date for proposals. Upon selection, the Sheriff's Office will issue a Letter of Intent to the Selected Vendor. Contract negotiations must be completed no later than the date specified in the Schedule of Proposal Process or the Sheriff's Office may elect to cancel the Letter of Intent and award the contract to the next most successful Vendor.

Please note the Gaston County Sheriff's Office is requesting pricing in various forms for current level of service as well as separate pricing for medical health services and mental health services. The Sheriff's Office reserves the right, in its sole discretion, to:

- Award a separate contract for Medical; and
- Award a separate contract for Mental Health; and
- Award a combined contract for Medical and Mental Health.

#### 6. Terms of Contract

A. The initial contract shall cover a twelve (12) month period. Upon mutual agreement, the contract may be renewed for two (2) additional two-year

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extensions based upon negotiations of service delivery and costs <u>pending appropriation of funds</u> by the County to the Gaston County Sheriff's Office for such purpose. The fiscal year for the Sheriff's Office is July 1 to June 30. Notwithstanding the above, the validity of this Agreement beyond the end of the first fiscal year of its intended term or for any portion of the fiscal year therein or thereafter is contingent upon an annual appropriation of funds by the Gaston County Board of Commissioners specific to this Agreement. Changes in the contractual provisions or services to be furnished under the contract may be made only in writing and must be approved by the Sheriff's Office and the agent of the Vendor. Should a decision be made to increase the scope of the contract, the Sheriff's Office and the Vendor will mutually agree, in writing, to an adjusted contract price.

- B. Indemnification. The Vendor shall indemnify and hold harmless Gaston County, the Sheriff's Office, their respective officers, agents, and employees against all claims, liability, damages, losses, costs and expenses, including without limitation for injury to or death of any persons or injury to any property arising out of or in any way connected with Vendor or Vendor's employees or agents, alleged acts or omissions in the performance of work by Vendor under this Agreement and all claims for damages arising out of bodily injury to persons (including death) or damage to property caused by or resulting from the Vendor's performance of this Agreement, unless such injury, death or damage is due solely and exclusively to the gross negligence or willful acts of the Sheriff's Office. The Vendor shall defend promptly all such demands, claims, and causes of action and shall pay all attorneys' fees and costs of resisting or defending against such demands, claims, or causes of action as they are incurred by the Sheriff's Office. In the event the Sheriff's Office files suit against the Vendor to enforce this paragraph and the Sheriff's Office prevails, in addition to any other awards or remedies the Sheriff's Office may be entitled to, the Vendor shall pay the attorneys' and other fees and expenses as well as any court or other costs incurred by the Sheriff's Office in the suit and on appeal. In any action hereunder, the Sheriff's Office shall be entitled to select counsel of its own choosing to defend the Sheriff's Office or prosecute on its behalf. The terms and conditions of this paragraph shall survive termination of this or any other agreement between the Vendor and the Sheriff's Office.
- C. **Insurance**. Throughout the term of this contract, the Vendor and any of its subcontractors must comply with the insurance requirements described in this section. The Vendor must also provide any other insurance specifically recommended in writing by Gaston County Risk Management. If the Vendor fails to maintain required insurance, Gaston

County shall be entitled to terminate or suspend the contract immediately.

**Vendor** further agrees to purchase and maintain during the life of this Agreement with an insurance company acceptable to Sheriff, authorized to do business in the State of North Carolina, the following insurance:

- i. Commercial General Liability: Insurance with a limit not less than \$2,000,000.00 per occurrence/aggregate including Coverage for bodily injury, property damage, products and completed operations, personal/advertising injury liability and contractual liability. /Gaston County must be named as an additional insured.
- ii. Workers Compensation: To the extent required by law, Vendor shall purchase Workers Compensation Insurance meeting the statutory requirements of the State of North Carolina and any applicable Federal laws; Coverage A and \$500,000/\$500,000/\$500,000 for Employer Liability. Vendor acknowledges Vendor is not an employee of Gaston County or the Gaston County Sheriff's Office and therefore, is not entitled to workers' compensation coverage through either of the above-named entities.
- iii. Commercial Automobile Liability: Limits of \$1,000,000 and a Combined Single Limit for Bodily injury and Property Damage for owned and non-owned vehicles. Gaston County must be named as an additional insured.
- iv. Professional Errors and Omissions: Insurance with a limit of not less than \$3,000,000.00 per claim, \$3,000,000.00 aggregate as shall protect the Vendor and the Vendor's employees for negligent acts, errors, or omissions in performing the professional services under the contract. For any claims related to this contract, the Vendor's insurance coverage shall be primary. If Claims Made Policies:
  - 1. The Retroactive Date must be shown and must be before the date of the contract or the beginning of contract work.
  - 2. Insurance must be maintained, and evidence of insurance must be provided for at least five (5) years after completion of the contract of work.
  - If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a Retroactive Date prior to the contract effective date, the Vendor must

purchase "extended reporting" coverage for a minimum of five (5) years after completion of contract work.

- v. Health Insurance Portability and Accountability Act: Service Provider agrees that, if the County determines that some or all of the activities within the scope of this Contract are subject to the <u>Health Insurance</u> <u>Portability and Accountability Act of 1996, P.L. 104-91</u>, as amended ("HIPAA"), and its implementing regulations, it will comply with the HIPAA requirements and will execute such contracts and practices as the County may require to ensure compliance.
- Cyber Security: Vendor will be required to secure a cyber security vi. insurance policy that includes at a minimum \$ 2,000,000.00 aggregate limit, \$2,000,000.00 per incident, no waiver of subrogation. This policy must be Claims Made and Reported and contain an automatic extended reporting period of not less than 90 days beyond the expiration of the policy. Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by Vendor in this agreement and shall include, but not be limited to, claims involving infringement of intellectual property, including but not limited to infringement of copyright, trademark, trade dress, invasion of privacy violations, information theft, damage to or destruction of electronic information, release of private information, alteration of electronic information, extortion and network security. The policy shall provide coverage for breach response costs as well as regulatory fines and penalties as well as credit monitoring expenses with limits sufficient to respond to these obligations.

In addition, the Vendor will be required to comply with "Outside Organization IT Checklist for Stability & Security", marked as Exhibit A, attached, and incorporated herein.

The County is required to notify individuals if any electronically stored information or any written document that contains personal information has been subject to a security breach. Any Vendor of the County who becomes aware of any potential breach of a document or electronic file containing personal information of the client of the County must immediately notify the Contract Representative and must work with County Counsel. The Vendor is responsible for notifying the affected persons, as required by law. A breach is deemed to have occurred when any unauthorized individual or entity gains access to personal information or when unintended disclosure of personal information is made. No Vendor of the County may print a full Social Security Number on any document which will be sent through the mail, without a written request from the person whose SSN will be printed on the document, except as required by law. The Vendor must only use the last 4 digits of a SSN on all documents unless there is a compelling business reason to use the entire SSN. If a document contains a full SSN, the Vendor must take steps to protect the document from unauthorized disclosure. The Vendor may not provide copies of a document containing a full SSN to anyone other than the person whose SSN is listed on the document, except as allowed by state or federal law. The Vendor may provide a copy of a document to a third party with the SSN redacted if the document is otherwise allowed to be released. No Vendor may publicly post or display a document containing a full SSN.

The parties acknowledge state and federal laws relating to data security and privacy are rapidly evolving and amendment of the Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the Privacy Rule and other applicable laws relating to the security or confidentiality of PHI. Upon request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to the Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the Privacy Rule or other applicable laws. Covered Entity may terminate the Agreement upon thirty (30) days written notice in the event (i) Business Associate does not promptly enter into negotiations to amend the Agreement when requested by Covered Entity or (ii) Business Associate does not enter into an amendment to the Agreement providing assurances, regarding the safeguarding of PHI sufficient to satisfy the standards and requirements of HIPAA and the Privacy Rule.

The Vendor shall not commence any work in connection with the resulting contract until it has obtained all the types of insurance set forth in this section and furnished the Sheriff's Office with proof of insurance coverage by certificates of insurance accompanying the contract. The Vendor shall be responsible for notifying the Sheriff's Office of any material changes (including renewals) to, or cancellation of, the insurance overages required above. Notice to the Sheriff's Office must be completed in writing within 30 days of the changes.

The Vendor shall not allow any subcontractor to commence work until all such subcontractors have obtained the same insurance coverage, as described above.

All insurance policies shall be written by insurers qualified to do business in the State of North Carolina and with a current A.M. Best's rating of A-VII or better. (A carrier with a lesser rating may be acceptable with the approval of Risk Management). If any of the coverage conditions are met by a program of self-insurance, the Vendor must submit evidence of the right to self-insure as provided by the Vendor's domiciled State.

Gaston County and the Sheriff's Office shall be exempt from, and in no way liable for, any sums of money that may represent a deductible of self-insured retention in any insurance policy. The payment of the deductible/retention shall be the sole responsibility of the Vendor and/or subcontractor.

The Vendor's (including subcontractors of every tier) insurance shall be primary of any self-funding and /or insurance otherwise carried by Gaston County or the Sheriff's Office for all loss or damages arising from the Vendor's operations under this agreement. The Vendor and each of its subcontractors shall and does waive all rights of subrogation against Gaston County and the Sheriff's Office for each of the indemnities.

- D. Equal Employment Opportunity. The Vendor shall comply with all provisions of Federal, State, and local regulations to ensure that no employee or applicant for employment is discriminated against because of any protected categories including, without limitation, race, religion, ethnicity, color, sex (including pregnancy, gender identity, and sexual orientation), age (40 or older), disability, genetic information, or national origin.
- E. Warranty Against Contingent Fees. The Vendor will agree to warrant that no person or selling agency has been employed or retained to solicit this contract upon an agreement of understanding for commission, percentage, brokerage, or contingency, except bona fide employees or selling agents maintained by the Vendor for the purpose of securing business.
- F. **Subcontracts.** The Gaston County Sheriff's Office must approve, in advance, all subcontracts entered into with the Vendor for the purpose of completing the provisions of this contract. The Vendor will not sell, assign, transfer, nor convey any of its rights or obligations except with the prior written consent of the Sheriff or his designee.
- G. Security of Patient Health Care Records. Medical and psychiatric records are of a confidential nature. The Vendor must agree to establish

those procedures necessary to maintain the confidentiality of health care records (paper and electronic) as required by law. The medical records must always be maintained by the Vendor in an up-to-date status and are to remain with the Sheriff's Office at the end of the contract and any extension period.

- H. Vendor Personnel. The Gaston County Sheriff's Office may request replacement of any Vendor personnel believed by the Sheriff's Office to be unable to carry out the responsibilities of the contract and the Sheriff's Office shall pre-approve all appointments to the positions of administrator, medical director, supervising nurses, and other Vendor personnel. All Vendor personnel are subject to a security/background check by the Sheriff's Office, in addition to the Vendor's established background check process. Vendor must require all its employees assigned to the Jail to immediately report to Vendor who shall immediately report to Gaston County Sheriff's Office of being charged, arrested, or convicted of any crime. The Sheriff's Office has sole discretion in determining whether an employee charged with a crime can continue to work in the Jail. At least annually, the Sheriff's Office may conduct criminal background checks on any Vendor employee.
- I. Vendor Cooperation. The Vendor shall always observe and comply with all Federal, State, local and municipal laws, ordinances, rules, and regulations in any way affecting the contract. The Vendor shall maintain regular communications with the Gaston County Sheriff's Office designee of the Detention Division and shall promptly and actively cooperate in all matters pertaining to this contract.
- J. Termination. The Gaston County Sheriff's Office may terminate the contract resulting from this Request for Proposal at any time the Vendor fails to carry out its provisions. The Sheriff's Office shall give the Vendor notice of such termination with stated reasons for the termination. If, after such notice, the Vendor fails to cure the conditions in the opinion of the Sheriff within the specified period contained in the notice, it shall be at the discretion of the Sheriff's Office to order the Vendor to stop work immediately and leave the premises or to reinstate the contract based upon corrective action. Either party may terminate the agreement, without cause, upon giving the other party not less than one hundred twenty (120) calendar days written notice of termination. Said notice shall be deemed given to the Sheriff's Office if hand delivered to the Business Manager, and to Vendor if hand delivered or sent by certified mail, return receipt requested, at the address provided in contract.
- K. Failure to Perform. The services rendered under this contract are critical to the mandated responsibilities of the Gaston County Sheriff's

Office and Gaston County (the "County"). Therefore, the Vendor will reimburse the Sheriff and/or the County for all costs and expenses incurred by the Sheriff's Office and/or the County in providing services which are the responsibility of the Vendor. Such expenses shall be reduced from the monthly payment due the Vendor. In the event the agreement is terminated prior to its expiration, all finished or unfinished documents, studies, correspondence, reports, and other products prepared by or for the Vendor under this agreement shall become the exclusive property of the Sheriff's Office. Notwithstanding the above, the Vendor shall not be relieved of liability to the Sheriff and/or the County for damage sustained by the Sheriff's Office and/or the County by virtue of any breach of the agreement by the Vendor. Vendor agrees that in the event either party takes legal action to enforce any provision of the contract or to obtain a remedy for any breach of this contract, and in the event Sheriff's Office and/or the County prevails in such action, Vendor shall, in addition to any other right or remedy the Sheriff's Office and/or the County is entitled to under applicable law, promptly pay all costs and expenses of such action incurred by the Sheriff's Office and/or the County at any and all stages of such action, including without limitation reasonable attorneys' fees for the County and/or the Sheriff's Office. The terms and conditions of this paragraph shall survive termination of this or any other agreement between the Sheriff's Office and Vendor.

- L. **Payment for Services.** The Gaston County Sheriff's Office shall pay the Vendor for the Vendor's undisputed provision of designated services during the term of the contract, in the amount of the proposal or other sum agreed to in writing, which shall be payable in equal monthly payments.
- M. Third Party Reimbursement. Where possible Vendor will diligently seek third party or insurance reimbursement for patient medical services performed by the Vendor. The Vendor will share all documentation received on insurance with the Sheriff's Office. The Vendor shall ensure that all medical providers will routinely pursue all insurance and other applicable claims, and other means of subrogation, for medical treatment provided to the Inmates. This includes, but is not limited to, establishing a process for billing the North Carolina Department of Public Safety for any medical services provided to sentenced Inmates as provided for in the North Carolina General Statutes, as may be amended from time to time.
- N. Obligations of the Sheriff of Gaston County. The Gaston County Sheriff's Office shall provide space, limited housekeeping, linens, laundering, facility fixtures, office furniture, utilities, telephone service (excluding long distance charges), and security. The disposal of all

contaminated medical waste shall be the responsibility of the Vendor. Disposal of this waste must be in accordance with all Federal, State, and local laws.

- O. **Public Information.** Neither the Vendor nor the Sheriff shall publish any findings based on data obtained from the operation of a contract agreement without the prior consent of the other party, whose written consent shall not be unreasonably withheld.
- P. **Research.** No medical research projects involving inmates, other than projects limited to the use of information from records compiled in the ordinary delivery of patient care activities, shall be conducted without prior written consent of the Sheriff or his designee. The conditions under which research shall be conducted shall be agreed to by the Vendor and the Sheriff or his designee and shall be governed by written guidelines. Any research must have been approved by the institution IRB. In every case, written full disclosure of the terms and conditions of the research, and the written informed consent of each patient who is a subject of a research project shall be obtained prior to the participation of a patient as a subject.
- Q. Compliance with National Commission on Correctional Health Care (NCCHC) Standards, American Correctional Association (ACA) most current edition Performance Based Standards for Adult Local Detention Facilities and Prison Rape Elimination Act (PREA). Vendor will provide health care services which meet or exceed NCCHC Standards and must maintain medical accreditation by the NCCHC, ACA, PREA or any other entity recognized for medical care accreditation for Detention Facilities that is selected by the Sheriff. Failure to meet or maintain medical accreditation shall constitute a material breach for contract termination. Should any of the referenced standards change, Vendor is required to comply with all new standards put in place by the various compliance entities.
- R. Compliance with State Minimum Jail Standards The Vendor will provide services which comply with the rules of the North Carolina Administrative Code 10A NCAC 14J, State Rules for Jails and Detention Units (<u>https://info.ncdhhs.gov/dhsr/jail/index.html</u>).
- S. Access to Management Information. The Gaston County Sheriff's Office shall have the complete and unlimited right to access all information maintained by Vendor which may be needed to ensure compliance with the contract terms and conditions, and to monitor contractual compliance. The Vendor shall make available all records or data requested.

- T. **Permits and Licenses** All permits and licenses required by Federal, State, or local laws, rules, and regulations necessary for the implementation of the work undertaken by the Vendor pursuant to the contract shall be secured, paid for, and maintained by the Vendor in upto-date status. It is the responsibility of the Vendor to have and maintain the appropriate certificate(s) valid for work to be performed and valid for the jurisdiction in which the work is to be performed for all persons working on the job for whom a certificate is required.
- U. Compliance with Sheriff's Office Rules and Regulations/Confidentiality. Vendor and its employees, agents and subcontractors are required to comply with all Gaston County Sheriff's Office rules and regulations with regard to any facility managed by the Sheriff's Office, including without limitation, no recording (audio or video) or taking photos in any secured area of the detention facilities, no disclosure to any third party of any information regarding layout of or security measures used within the detention facilities (including without limitation, location of cameras), nor will Vendor disclose any information of any kind obtained within the detention facilities without the prior written permission of the Sheriff or his designees.

## 7. Exceptions to Proposal

All proposals must clearly and with specificity detail all deviations to the exact requirements imposed upon the Vendor by the <u>General Terms and Provisions</u> (Part A), the <u>Special Terms and Conditions</u> (Part B), and the <u>Technical Specifications</u> (Part C). Such deviations should be stated upon the <u>Proposal</u> (Part D) or appended thereto. Vendors are hereby advised that the Gaston County Sheriff's Office will only consider proposals that meet the specifications and other requirements imposed upon them by this package. In instances where an exception is stated upon the <u>Proposal</u> (Part D), said proposal will be subject to rejection by the Sheriff's Office in recognition of the fact that said proposal does not meet the exact requirements imposed upon Vendor by the <u>General Terms and Provisions</u> (Part A), the <u>Special Terms and Conditions</u> (Part B) and the <u>Technical Specifications</u> (Part C).

## PART C

## TECHNICAL SPECIFICATIONS

## 1. Required Medical Staffing

Vendor(s) should be aware of and will be made responsible for medical staffing

that is appropriate and required to maintain the present Medical Unit(s) of the Detention Facilities and provide all patient medical, dental, and mental health services at all Gaston County Detention locations. This responsibility shall also include providing qualified medical staff to testify in court regarding medications, treatment and care provided to inmates, as may be requested, or required by a judge or pursuant to a subpoena or court order, as the need for this assistance arises from time to time.

- A. Background Information
  - i. Health appraisals (required within fourteen days) are performed at all facilities. Inmates with medical complaints are initially evaluated and treated by nursing personnel during sick calls (requests are made via kiosk in housing unit). Pursuant to treatment protocol, minor treatment or over-the-counter medication may be recommended for the patient by the nursing personnel during this time. More problematic cases are referred for physical evaluation or follow-up.
  - ii. Equipment is provided by the Gaston County Sheriff's Office. Any additional equipment that prospective Vendors feel is required will be the responsibility of the Vendor. Henceforth, annual request for capital equipment must be received in writing no later than December 31 to be considered in the Sheriff's Office annual budget request. At the end of the contract and any extension, the Vendor must remove any property and equipment that does not belong to the Sheriff's Office within 20 calendar days and solely at Vendor's expense. After 20 days, any remaining property or equipment shall become the property of the Sheriff's Office to do with as it deems appropriate.
  - iii. The Gaston County Sheriff's Office has a medical co-pay procedure in accordance with North Carolina General Statutes. The Vendor should list by name and address all facilities where the Vendor is currently providing medical care that has a medical co-pay system and describe how the medical co-pay system is administered and managed by the facility and the Vendor.

## 2. Continuity of Service

Continuity of service is a must with this contract. If a new company is awarded the contract, the Sheriff's Office would expect complete, prompt coordination between the incoming and outgoing Vendors to facilitate a smooth transition.

## 3. Responsibilities of the Sheriff

The Gaston County Sheriff's Office owns the existing clinic equipment. If additional equipment is required during the term of the Contract, a written list of equipment, with justification, should be included in your proposal for consideration and review.

The Sheriff's Office will provide a reasonable amount of office furniture to include desks, chairs and filing cabinets for the Vendor's use. A written list of additional furniture, with justification, should be included in your response to the RFP.

The selected Vendor agrees to perform a physical inventory jointly with the Gaston County Sheriff's Office of the medical facilities on both the date of the implementation of this contract and at the completion of the contract and any extensions. Any unaccounted-for items or items that are not in working order at the conclusion of Vendor's performance will be replaced by the Vendor within 30 days.

The Gaston County Sheriff's Office will provide basic in-house phones and local telephone service. The vendor will be responsible for providing its own long-distance service.

#### 4. Price

To assist with the determination of proposed contract price, assume the average daily inmate population for the contract year starting July 1, 2024, through June 20, 2025, is 620. The Vendors will be expected to include, in the proposal, any per diem cost for monthly average inmate populations that exceed the inmate annual population projections.

The price is to include the furnishing of all professional services (including but not limited to provision of inmate medical records to third parties who have valid HIPPA releases, including without limitation, family members or counsel of record for the inmate), labor, materials, equipment, insurances, licenses, and applicable taxes necessary or proper for the completion of the work. The methodology used in determining these prices should be included in the proposal. Any recommended modifications/enhancements to the current level of staffing must be identified separately from the current level of staffing provided.

All off-site medical service providers bill the Gaston County Sheriff's Office current medical directly for services rendered and they process payment after bill review and subsequently bill the Gaston County Sheriff's Office. It is the responsibility of the medical Vendor to coordinate, facilitate and review the medical services provided to the inmates in the custody of the Sheriff's Office in accordance with the North Carolina General Statutes. These costs are not to be included in the proposals as these dollars are funded separately.

Any request by the Vendor to transfer a patient to the North Carolina Department

of Public Safety (DPS) under a Safekeeping Order for medical and/or mental health concerns will constitute the Vendor's acceptance to pay all invoices relative to the delivery of medical and/or mental health services provided by the DPS for internal or external services billed while that patient is in a safekeeping status at any DPS facility.

## 5. Objectives of the Request for Proposal (RFP)

- A. To provide prospective Vendors data necessary for preparation of proposals.
- B. To provide a fair method for objectively analyzing submitted proposals.
- C. To result in a contract between the Vendor and the Gaston County Sheriff's Office that will provide generally for the following:
  - i. Quality health services for inmates in Gaston County Sheriff's Office facilities.
  - ii. Development and implementation of a health care plan with clear objectives, policies and procedures that is compatible with those of the Gaston County Sheriff's Office and with a process for documenting ongoing achievement of contract obligations.
  - iii. Utilization of appropriate personnel in accordance with their scope of practice who are certified and licensed by the appropriate bodies as required in the State of North Carolina.
  - iv. Administration leadership provides for both cost accountability and responsiveness to the contract administrator (Sheriff or his designee).
  - v. Assurance that Federal, State, and local requirements and standards of care are met or exceeded.
  - vi. Continuing education for staff.
  - vii. A comprehensive medical system operated in such a way that is respectful of patient rights to basic health care.
- D. Indemnification and insurance.

## 6. Vendor Qualification

Proposals shall be considered only from firms who can clearly demonstrate to the Gaston County Sheriff's Office a professional ability to perform the type of work specified within the Request for Proposal. Vendors with a minimum of three (3) years' experience as an organization must be able to demonstrate adequate organization, facilities, equipment, and qualified personnel to ensure prompt and efficient service to the Sheriff's Office. In the determination of the evidence of responsibility and ability to perform the contract by the Vendor, the Sheriff's Office reserves the right to investigate the reputation, financial condition, experience record, personnel, equipment, facilities, and organization of the Vendor. The Sheriff's Office shall determine whether the evidence of responsibility and ability to perform a will make awards only when such evidence is deemed satisfactory. The Sheriff's Office reserves the right to reject a proposal when evidence indicates to the Sheriff's Office, in the sole opinion of the Sheriff's Office, the inability to perform the contract by a Vendor.

The Gaston County Sheriff's Office requires a copy of Vendor's audited financial statements for the three (3) most recent fiscal years. The Vendor must indicate by what state(s) it is licensed.

Vendor must indicate whether Vendor is named in any lawsuits pending and the nature of same. The Vendor must describe all claims against it which have been adjudicated in favor of the plaintiff or have been otherwise settled in the past five (5) years. Vendor must describe all claims pending or any claims Vendor has reason to believe will be made.

## 7. Specifications and Program Requirements

The Vendor will be expected to meet the following specifications and program requirements. This listing is not intended to be all inclusive but serves as a guideline with recommendation for the development of a health care program for the inmate population in the custody of the Gaston County Sheriff's Office. This includes the responsibility for providing primary medical, dental, and mental health services. This responsibility provides for medical screening, admission evaluation, sick call, infirmary care, pharmacy services, medical clearances for intra- and interagency transfers, food handling and work clearances, the continuing care of identified health problems, detoxification, and emergency services. The Vendor will be responsible for identification and care coordination/management of individuals who require continuous care and who are booked into the custody of the Gaston County Sheriff's Office with preexisting illnesses and/or injuries.

Individuals who are provided care while in the custody of the Gaston County Sheriff's Office, will not be the responsibility of the Vendor for payment of medical services as it relates to injuries/illness the individual has before the time of arrest or suffered during arrest by any law enforcement agency and who are subsequently remanded to the custody of the Sheriff's Office. The law enforcement agency responsible for arrest will be responsible for payment of those services.

Inmate Medical Off-Site Care Cost -Various healthcare providers provide offpremises patient health care services and bill the Gaston County Sheriff's Office directly for services rendered. It is the responsibility of the medical Vendor to coordinate, facilitate and review the medical services provided to the inmates in the custody of the Sheriff's Office. In accordance with NCGS Chapter 153A-225.2(c) the Vendor shall distribute inmates among all hospitals and healthcare facilities located within Gaston County. The Vendor will provide semiannual reports for posting on the County website detailing compliance with NCGS Chapter 153A-225.2(c).

The Vendor will be expected to provide comprehensive services that are legally defensible, and which meet or exceed the NCAC, NCCHC Standards for Health Services in Detention facilities, ACA, PREA and Federal, State (including Health and Rehabilitative Services), local laws, statutes, and ordinances governing health care service delivery. Vendors are encouraged to elaborate on their specific plan for providing services.

## 8. Administrative Requirements

- A. A singular designated physician (medical doctor) with responsibility for assuring the appropriateness and adequacy of inmate health care.
- B. A full-time health RN administrator with the authority to oversee the administrative requirements of health care programs such as recruitment, staffing, data gathering, financial monitoring, policy and procedure development and review, contracts, medical record keeping, and other management services.
- C. Copies of clearly defined written agreements or understanding for twentyfour (24) hour service with physicians and others involved in providing care to inmates will be provided to and approved by the Gaston County Sheriff's Office. All subcontracts of every nature are subject to the approval of the Sheriff's Office.
- D. Well defined operational policies and procedures to include, at a minimum, those required by the ACA, NCAC, PREA and NCCHC standards, and in concert with Gaston County Sheriff's Office policies and procedures for service delivery. The Sheriff's Office shall develop the policies and procedures necessary to specify the role of medical services in a detention setting and to provide a liaison between the medical and security staff.

- E. A comprehensive annual statistical report will be forwarded to the Gaston County Sheriff's Office in accordance with ACA, NCAC, PREA and NCCHC standards. In addition, monthly and daily statistics will be required by site and in total.
  - i. **Monthly Statistics.** Narrative reports shall be submitted by the tenth (10<sup>th</sup>) calendar day of each month to the Jail Administrator, the Chief Deputy Jail Administrator and the Sheriff's Office Business Services Administrator with data reflecting the previous month's activity by facility to include:
    - a. Inmates' requests for services; and
    - b. Inmates seen at sick call; and
    - c. Inmates seen by physician; and
    - d. Inmates seen by dentist; and
    - e. Inmates seen by psychiatrist; and
    - f. Inmates seen by psychologist; and
    - g. Infirmary admission, patient days, average length of stay; and
    - h. Mental Health admissions; and
    - i. Off-site hospital admissions to include ER and general physician referrals; and
    - j. Compile semi-annual reports to comply with NCGS 153A-225.2(c); and
    - k. Medical specialty consultation referrals; and
    - I. Intake medical screening; and
    - m. Fourteen (14) day history and physical assessments; and
    - n. Psychiatric evaluations; and
    - o. Diagnostic studies; and
    - p. Report of third-party reimbursement, pursuit, and recovery; and
    - q. Pharmacy report of inmate population dispensed medication; and
    - r. Inmates testing positive for venereal disease; and
    - s. Inmates testing positive for AIDS or AIDS Antibodies; and
    - t. Inmates testing positive for TB; and
    - u. Inmate mortality; and
    - v. Number of hours worked by entire medical staff, specifying each post or shift; and
    - w. Monthly off-site visits; and
    - x. Other data deemed appropriate from time to time by the

Gaston County Sheriff's Office staff.

## ii. Daily Statistics

- a. Transfers to off-site hospital emergency departments; and
- b. Communicable disease reporting; and
- c. Suicide data (i.e., attempts and precautions taken); and
- d. Report of status of inmates in local hospitals and infirmaries; and
- e. Staffing; and
- f. Submit completed medical incident report copies; and
- g. Submit completed medical grievance report copies; and
- h. A list of lost medical files.
- F. On a scheduled basis, the administrative staff shall have documented monthly meetings with the Jail Administrator and the designated detention administrators to evaluate statistics, program needs, problems and coordination between custody and medical personnel.
- G. Documentation of health care staff roles in the detention disaster plan. The contract provider for medical services shall, in times of emergency or threat thereof, whether accidental, natural, or caused by man, provide medical assistance to the Gaston County Sheriff's Office to the extent or degree required by Sheriff's Office policy and procedure.

## 9. Level of Service

These are set as a guide for minimum requirements to perform this service. However, final staffing for the delivery of medical services will be as mutually agreed upon by written contract between the Vendor and the Gaston County Sheriff's Office. In any event, adequate and qualified health care personnel are required for twenty-four (24) hours per day patient health care services. Include here an overview of your company indicating the background and professional credentials of your general management and staff. Provide insight as to how you propose to initiate your service to our facilities. We would expect to see references to prior experience in this field along with documentation of staffing and personnel turnover.

A. Physician Services must be enough to provide the required needs of each day and assure medical evaluation/follow up within twenty-four (24) hours of post nursing triage referral (including weekends and holidays). In addition, twenty- four (24) hour physician on-call services with availability for consultation and on- site needs system-wide are required.

- B. Nursing services must be available to provide for the following:
  - i. Infirmary coverage always; and
  - ii. Intake screening on all inmates at time of admission; and
  - iii. Histories and physical examinations on inmates completed within fourteen (14) days of admission; and
  - iv. Medications as prescribed, not to exceed eight (8) hours from the time of prescription; and
  - v. Sick call triage and daily follow-up; and
  - vi. Appropriate and timely responses to medical needs and emergencies; and
  - vii. Physician support services.
- C. Enough clerical support staff must be available to support the medical contract.
- D. Written job descriptions to define specific duties and responsibilities for all assignments at each facility must be available at each site.
- E. Copies of staffing schedules encompassing all health care staff are to be posted in designated areas and submitted to the Medical Services Contract Monitor / Facility Commanders monthly, with updates regarding changes to include vacancies.
- F. The Vendor will be required to provide in the proposal staffing plans for all contracted staff and an hourly wage per position plus benefits schedule. The schedule will be used for calculation of credits to the Sheriff's Office for any position not filled as agreed to in the final contract staffing schedule. Any staff vacancy that exceeds 30 days will require a reimbursement of 130% of the staff's salary for every day beyond 30 days. This reimbursement will also apply to staffing vacancies occupied by agency personnel greater than ten percent of the staffing matrix for more than 30 days.
- G. The Vendor shall provide the name, date of birth, local address, previous employment, social security number and copy of driver's license for all employment applicants. Applicants must agree to adhere to all Gaston County Sheriff's Office Policies and Procedures. Prior to Gaston County

Sheriff's Office approval for employment, an applicant screening shall be conducted, coordinated with the Sheriff's Office, to include fingerprints and background check. Applicable licenses and/or certificates for all professional staff must be on file with the Sheriff's Office prior to employment. In addition, malpractice insurance must be on file for all Physicians and Nurse Practitioners, and other professional or paraprofessional employees, if applicable.

- H. The Vendor shall provide a written plan for orientation and staff development/training appropriate to their health care delivery activity for all health care personnel. This plan must outline the frequency of continued training for each staff position. All employees of the Vendor will be required to attend all Employee Orientations and Fundamentals Class required by the Sheriff's Office for all employees. These sessions will be provided free to the Vendor by the Sheriff's Office training staff. The Vendor will not be entitled to reimbursement for staff and employees are not allowed access to inmates prior to completion of training.
- I. Provisions for pharmaceutical services to assure the availability of prescribed medications within eight (8) hours of the order of issue being written. Pharmacy services, and emergency pharmacy services, consistent with State and Federal laws and/or regulations, monitored by a licensed, qualified pharmacist must be maintained. NOTE: The Vendor shall be required to pass-on to the Gaston County Sheriff's Office any pharmacy manufacturers and or drug wholesaler's rebates, coupons and or discounts that apply to the medications that are provided to the pharmacy servicing the Gaston County Jail patient's prescriptions. Each month any applicable pharmacy manufacturers and or drug wholesaler rebates, coupons and or discounts shall be noted by the Vendor to the Sheriff's Office and adjusted from the Vendors monthly invoice for services to the Sheriff's Office.
- J. Recording the administration of medications in a manner and on a form approved by the health care authority to include documentation of the fact that inmates are receiving and ingesting their prescribed medications. Documentation will also be required when a patient's ordered medication was not administered, and the reason given. A very active and successful self-medication / Keep on Person (KOP) program is in place. It is the request of the Gaston County Sheriff's Office to maintain this program.
- K. Dental services sufficient to provide for emergency and medically required dental care for inmates at detention facilities within a reasonable period must be available.

- L. The Gaston County Sheriff's Office may prohibit entry to any secure facility or remove therefrom a contract employee who does not perform his/her duties in a professional manner.
- M. The Gaston County Sheriff's Office reserves the right to conduct a search of any person, property, or article entering or leaving its facilities.
- N. The Gaston County Sheriff's Office may request the Vendor provide detailed information on individual inmate health care cases specific to the care provided, date of care, and who provided the care.

#### **10. Care and Treatment Requirements**

- A. Vendor will provide twenty-four (24) hours a day emergency or immediate medical services. Service will include emergency transportation and acute hospital services with one or more health care providers or physicians.
- B. In addition to twenty-four (24) hour a day emergency service coverage, the hours for routine nurse sick call shall be at levels which allow for all inmates needing medical services to be seen on the same day that they request such services, should the need arise outside the scheduled sick call rounds done in the housing units.
- C. Written manual of standardized policies and defined procedures approved by the health care authority and the Gaston County Sheriff's Office must be reviewed at least annually and revised as necessary under direction of the health care authority with approval of the Sheriff's Office.
- D. Provision for necessary laboratory, EKG and X-ray services. All abnormal laboratory and X-ray results shall be reviewed and signed by the reviewing physician or mid-level provider. A follow-up plan of care shall be furnished.
- E. Development of a mental health program for evaluation, treatment and/or referral to include but not be limited to the following:
  - i. When isolated for psychiatric purposes, inmates shall be examined by a physician or mid-level provider within twelve (12) hours after confinement.
  - ii. Medical evaluation must support medical confinement of inmates based on risk of physical danger to self or others.
  - iii. All inmates who are segregated from the general population must be seen by qualified health personnel a minimum of three (3) times per week. Mental health inmates must be seen daily.

- iv. A physician is responsible for determining when a patient should be sent or returned to the general population, with documentation in the medical record regarding these decisions.
- v. All inmates referred for mental health evaluation must receive a comprehensive diagnostic examination including a psycho-social history and mental status evaluation. This examination must include an assessment of suicidal risk, potential for violence, and special housing needs.
- vi. Psychotropic medication must be used where appropriate. To maximize the effectiveness of pharmacotherapy and to reduce the toxicity and side effects of medication, an intensive program of drug monitoring shall exist. All inmates placed on drug therapy must be seen within a time not to exceed one (1) week by the physician or mid-level provider. Precautions to be followed must include, but are not limited to:
  - a. The psychiatrist must review the patient's medical record to determine which medications the patient has been receiving prior to prescription of psychotropic medication.
  - b. Prior to the prescription of psychotropic medication, inmates must be informed by a member of the mental health staff about the risks of taking such medication, in accordance with applicable standards of care. All female inmates will be so informed by a member of the mental health staff about the risks of taking such medication while pregnant or breast feeding (upon release). A pregnancy test will be provided prior to the prescription of psychotropic medication to female inmates wishing such a test, if such a test has not already been provided upon intake.

All inmates placed on medication must be evaluated for signs of toxicity. Blood pressure must be regularly checked, and drug levels monitored where appropriate with documentation of this information to be placed routinely in the patient's medical record.

- vii. When isolated for psychiatric purposes, inmates must be examined by a physician or mid-level provider within twelve (12) hours after confinement.
- F. Substance abuse services must be offered to those inmates who are referred to the program for health problems and who also have alcohol and

other substance abuse related problems. These services must be provided by medical and mental health professionals and should include case findings, referrals, liaison work and post release planning.

- G. Development of a special medical program which exists for inmates requiring close medical supervision, including chronic and convalescent care needs. This section must include specific guidelines for housing standards of these inmates. Each patient assigned this classification must have a written individualized treatment plan approved by a physician. Additional requirements include:
  - i. Inmates who are intoxicated, or otherwise impaired to the extent additional medical intervention is appropriate, must be separated from the general population and kept under close observation for an appropriate period of time to ensure their safety.
  - ii. Inmates with suicidal tendencies and those with a history of having seizures, as determined by medical authority, must be assigned to quarters that have close observation.
  - iii. Pharmacological support must be determined by a physician.
  - iv. Gaston County Sheriff's Office and medical and mental health staff shall share relevant information including, but not limited to communicable disease and behavior problems/disorders.
  - v. Define a program for meeting the special needs of the female population, e.g., pregnancy.
  - vi. A written plan with specifics for the provision of specialty health care services shall be followed.
  - vii. Provision for timely examinations and medical clearance for all inmate workers (inmates assigned to work programs inside the detention facilities) prior to placement in the assignment. Inmate worker medical clearances must include:
    - a. Relevant past medical history, including communicable disease, heart problems, respiratory problems, allergies, back problems.
    - b. Questions for current signs and symptoms of illness.
    - c. Current vital signs, including blood pressure, pulse, temperature.

- d. General examination for overall physical and mental health, with specific reference to (1) examination for evidence of communicable disease to include, but not be limited to, skin problems such as staph infections, rash, wounds, sores, boils, etc. and, (2) heart and lung examinations.
- e. Current test for tuberculosis.
- f. Confirmation of inmates' vaccination against Hepatitis B.
- H. Documented inmate health screening by medical staff upon arrival at the facility must be based on structured inquiry and observation, performed by qualified health care personnel, twenty-four (24) hours a day, seven (7) days a week.
- I. No unconscious, extremely intoxicated person (drugs or alcohol), those in mental health crisis and persons who appear to be seriously injured shall be admitted to the detention system. Those persons must be referred immediately for emergency medical attention without delay, and their admission or return to the detention system is predicated upon written medical clearance. The arresting agency is solely responsible for all charges related to this referral prior to admission to the detention facility.
- J. Receiving screening findings should be recorded on a printed form approved by the health authority and the Detention Administration and shall be provided by the Vendor.
- K. At a minimum, the screening must include inquiry into:
  - i. Current illness and health problems including mental, dental, and communicable diseases.
  - ii. Medications taken and special health requirements.
  - iii. Use of alcohol and drugs, including types, methods, amounts, frequency, date/time of last use and history of problems related to stoppage.
  - iv. For females, a history of gynecological problems and pregnancies.
- L. At a minimum, the screening must include the observation of:
  - i. Behavior, including state of consciousness, mental status, appearance, conduct, tremors, sweating.

- ii. Notation of body deformities, trauma, markings, ease of movement.
- iii. Condition of skin and body orifices, including rashes, staphylococcus infections and infestations, needle marks, or other indication of drug abuse.
- iv. TB testing.
- v. Recording of Vital Signs.
- M. Inmates must be medically cleared before they are sent to the general population.
- N. DNA and Alcohol testing as required by North Carolina General Statutes.
- O. Each inmate shall be given a health appraisal, including a physical examination by qualified health care personnel, completed after admission to the detention system, based on the criteria listed in the North Carolina Administrative Code 10 NCAC 4J, ACA and the NCCHC. Anytime a patient has been out of the custody of the Gaston County Sheriff's Office, a History and Physical (H&P) will be required.
- P. The extent of the health appraisal, including the physical examination, is defined by the responsible health authority, however, it will include at a minimum:
  - i. Review of intake screening forms.
  - ii. Collection of additional data regarding complete medical, dental, psychiatric and immunization histories.
  - iii. Appropriate follow-up laboratory and diagnostic tests to detect communicable disease (Venereal Disease and Tuberculosis).
  - iv. Recording vital signs (height, weight pulse, blood pressure, temperature).
  - v. Physical examination with comments about mental and dental status. A gynecological assessment must be included for females.
  - vi. Review of physical examination and test results by a physician for problem identification.
  - vii. Initiation of therapy when appropriate.

- viii. Other tests and examinations as appropriate.
- Q. The form used for the health appraisal must be approved by the facility physician and the Detention Administrator or designee and shall be provided by the Vendor.
- R. The Detention policy and procedure requiring a health appraisal must be contained in the standard operating procedures of the medical section.
- S. Inmates referred for treatment due to the health appraisal must be seen the following day unless the provider making the referral orders them to physician sick call on another day.
- T. Medical staff shall be responsible for all housekeeping duties in the infirmary apart from the floors, bathrooms, showers, and vents.
- U. Medical staff shall respond to acute medical needs of Gaston County Sheriff's Office staff on duty or visitors to detention facilities and document services provided.
- V. Inmates will not be allowed to provide any health care services, including record keeping.
- W. Copies of all inspection reports shall be provided to the designated Detention Administrative staff and the Medical Services Contract Monitor.
- X. All outside medical consultations/treatment shall be coordinated in advance with the Detention Transport division.
- Y. Vendor is responsible for the disposal of all contaminated waste. This material must be removed from within the facility to a secured area and disposed of as required.
- Z. Vendor is responsible for the purchase of all medical supplies and medical equipment.
- AA. Vendor is responsible for evaluating inmates placed in a safety chair/cell to prevent them from harming themselves by a qualified Mental Health professional before removal.

#### 11. Medical Record Requirements

A. HIPPA.

**Definitions**. The following terms shall have the meaning indicated when capitalized and used in this Contract:

- i. Vendor for Gaston County Sheriff's Office means a company or person outside of Gaston County's workforce, who, on behalf of the Sheriff's Office, provides a service or function that involves knowledge, use, and/or disclosure of individually identifiable health information to perform the service or function. Some examples may include, but are not limited to transportation companies, shredding companies, medical billing, and collection companies, etc.
- ii. **Federal Privacy Regulations** means the regulations contained in 45 CFR parts 160 and 164, as amended.
- iii. **Federal Security Regulations** means the regulations contained in 45 CFR parts 160, 162 and 164 as amended.
- iv. HIPPA means the administrative simplification section of the Health Insurance Portability and Accountability Act of 1996, as codified at 425 USC Chapter 1320d through d-8, as amended.
- v. **Protected Health Information or PHI** means any protected health information, as defined in 45 CFR 164.501, as amended and NCGS 8-53.
- Required by Law means a mandate contained in law that compels vi. a covered entity to make use or disclosure of protected health information and that is enforceable in a court of law. Required by law, includes, but is not limited to, court orders and court ordered warrants, subpoenas or summonses issued by a court, grand jury, a governmental or tribal inspector, or an administrative body authorized to require the production of information; a civil or an authorized investigative demand, Medicare conditions of participation with respect to health care providers participating in the program; statutes or regulations that require such information if payment is sought under a government program providing public benefits.
- B. Individual health care records will be initiated and maintained for every patient regarding medical, dental, or mental health services as part of the inmate screening process, or for services rendered following assignment to a housing area.

- i. Inmates returning from outside hospital stay or clinic visits are to be seen promptly by the physician or mid-level provider. A note regarding this review with reference to follow up in-house must be documented in the patient medical record.
- ii. The results of tuberculin tests shall be read and documented daily.
- iii. Medical staff shall perform reviews, medical examinations, medical summaries, or certifications as are necessary for intra-system or inter- system transfers, food handling and work clearances. Medical summaries must accompany inmates.
- iv. Medical summaries shall be prepared and sent with inmates being transferred to other than intra-system facilities.
- v. Vendor shall be responsible for promptly complying with all subpoenas and court orders as well as verifying all subpoenas, to comply with federal and state law before providing medical records.
- C. The inmate health record shall include, but not be limited to:
  - i. Intake screening form
  - ii. Health appraisal form
  - iii. Physician order/treatment plans
  - iv. Prescribed medications administered or not administered, date, time and by whom.
  - v. Complaints of illness or injury
  - vi. Findings, diagnoses, treatments, and dispositions
  - vii. Health service reports
  - viii. Consent and refusal forms
  - ix. Release of information forms
  - x. Inmate medical request forms

- xi. Medical grievance forms
- xii. Laboratory, radiology, and diagnostic studies
- xiii. Consultation, emergency room and hospital reports and discharge summaries
- xiv. Each documentation shall include the date, time, signature, and title of each person documenting the information.
- xv. Medications and/or future medical referrals/appointments for the inmate provided to the inmate at time of release from Sheriff's Office.
- xvi. Any disclosed allergens, including food allergies.
- D. Confidentiality of medical records and medical information must be assured. The medical and psychiatric records must be kept separate from the custody record. Data necessary for the classification, security, and control of inmates must be provided to the appropriate Gaston County Sheriff's Office personnel. Medical records must be made available to Sheriff's Office personnel when required to defend any cause of action by any inmate against the Sheriff's Office.

Records and documentation remain the property of the County. All medical and other records and documentation developed for or used in the operation of the health care program under the contract, shall be the property of the County and at the termination of the contract shall remain the property of the County and must be in a format easily permit a subsequent vendor to have immediate access to all such records. Medical records are of a confidential nature.

The Vendor is responsible for front end programming of current and/or updated versions of the EMR with implementation for reporting, statistics, and output. The Vendor must assume the cost of any additions or changes to the EMR that is not deemed necessary or not approved by the Gaston County IT Director. The electronic medical records system must be able to interface with other systems (such as the Jail Management System, Laboratory and Pharmacy Systems). Records must be accurate, comprehensive, legible, and ensure current medical information is maintained on each inmate. The Vendor must ensure specific compliance with standards regarding patient confidentiality is instituted for the receipt and filing of all outside consultations, emergency room visits and inpatient hospitalizations. All medical records are the property of the Gaston County Sheriff's Office. A hard copy of medical records must be scanned in the EMR and then filed and boxed, to be sent to the Gaston County Sheriff's Office Archives. All medical records shall be kept secure as required by applicable law, NCCHC Standards, and Gaston County Sheriff's Office policy and procedure. The Vendor shall be the official custodian of medical records during the performance of the services under the Agreement. The Gaston County Sheriff's Office Contract Monitor shall have access to all medical records and documents on demand during the term of the Agreement solely for the purpose of ensuring compliance with the Agreement. Any destruction of medical records must be approved by the Gaston County Sheriff's Office Contract Monitor prior to destruction and must be in accordance with the retention schedules as outlined by State and Federal law. The Vendor will be responsible for all medical records requests to the Gaston County Sheriff's Office from attorneys, inmate requests, and doctor's offices.

- E. Adherence to applicable informed consent regulations and the standards of the local jurisdiction must be maintained.
- F. Inactive medical records must be maintained in accordance with the laws of the State of North Carolina and NCCHC.
- G. Information concerning any court or legal documents affecting inmates and the medical contract provider must be provided in writing to the designated Gaston County Sheriff's Office representative prior to the close of the shift of service/receipt.
- H. If a patient's medical record cannot be located within eight (8) hours of the discovered loss, the Vendor's Administrator, and the Gaston County Sheriff's Office Contract Monitor shall be verbally notified, and a duplicate record shall be immediately generated. Any clearance information that cannot be determined shall be repeated. Upon location of the missing record and after a duplicate file has been created, the two files shall be joined to form one file.
- I. Upon termination of the contract, for any reason, all inmates' medical records shall remain in the jail for the subsequent medical provider.
- J. Vendor is responsible for all costs associated with transferring all inmate Electronic Medical Record (EMR) from previous Vendor.

#### **12. Quality Assurance Requirements**

A quality assurance program will be on-going consisting of regularly scheduled audits of patient health care services with documentation of deficiencies and plans for correction of deficiencies. The quality assurance plan shall include a provision Page | 45

for program and peer review by an "outside" correctional health care professional (chosen by the Gaston County Sheriff's Office) on an annual basis, the results of which shall be made available to the Sheriff, the Detention Administrator, and the Medical Services Contract Monitor. The cost will be paid by the Vendor.

#### **13. Financial Requirements**

The Vendor is responsible for all costs related to patient health care services at each location including the following:

- A. Pharmaceutical / medical supplies and medical equipment. Medical equipment includes any such equipment which costs \$500.00 or less per item; and
- B. Office equipment and supplies, to include forms, books, etc.; and
- C. Personnel; and
- D. Prosthesis and necessary eyewear; and
- E. Sufficient copying equipment to support the contract; and
- F. Reimbursement for all long-distance telephone charges incurred using Gaston County Sheriff's Office telephone extensions; and
- G. Contaminated waste disposal.

#### SPECIFICATIONS AND PROGRAM REQUIREMENTS

#### 1. Health Care Contract

The Vendor must submit a sample contract and agree to enter a contract with the Gaston County Sheriff's Office, the terms and conditions of which must be acceptable to the Sheriff's Office, whether addressed in this Request for Proposal or not. A tentatively selected Health Care Vendor that fails to meet the contractual terms of the separate needed contract shall be rejected.

#### 2. Agreement and Amendments

The Agreement will represent the entire agreement between the parties and supersede and prior agreements. All prior negotiations will be merged into the Agreement, and there are no understandings, representations, or agreements, oral or written, express or implied, other than those set forth within the Agreement. Obligations of the parties set forth in the Agreement arising out of events occurring during the life of the Agreement shall survive the termination of the Agreement. The terms of the Agreement may not be changed, modified, or amended except by a writing signed by both parties.

## 3. Waiver

The failure of the Vendor or Gaston County Sheriff's Office to exercise any right or remedy available under this Agreement upon the other party's breach of the terms, representations, covenants or conditions of this Agreement of the failure to demand the prompt performance of any obligation under this Agreement shall not be deemed a waiver of (i) such right or remedy; (ii) the requirement of punctual performance; or (iii) any right or remedy in connection with any subsequent breach or default on the part of the other party.

#### 4. Designee

Any action, authorization or representation required under this Agreement by the Gaston County Sheriff's Office may be fulfilled by the Sheriff or his designee.

#### 5. Severability

In the event any provision of this Agreement is held to be unenforceable for any reason, the unenforceability thereof shall not affect the remainder of the Agreement, which shall remain in full force and effect and enforceable in accordance with its terms.

#### 6. North Carolina Laws Govern

This Agreement shall be governed by and construed and enforced in accordance with the laws of North Carolina unless specifically clearly provided otherwise herein.

#### 7. Venue

This Agreement shall be deemed to have been made and performed in Gaston County, North Carolina. For the purposes of venue, all suits or causes of action arising out of this Agreement shall be brought in the general courts of justice in Gaston County, North Carolina without application of any conflicts of the laws or provisions of any jurisdiction.

## ADDITIONAL POPULATION INFORMATION

Fiscal Year	Projected ADP
2020	528
2021	565
2022	600
2023	642
2024	687
2025	735
2026	786
2027	841
2028	900
2029	963
2030	1,030
2031	1,102
2032	1,179

## PART D

#### PROPOSAL FOR JAIL MEDICAL SERVICES and PROPOSAL RESPONSE FORMS

The undersigned understands that this Proposal **must be signed** in **blue** ink and that an **unsigned** Proposal will be considered incomplete and subject to rejection by the Gaston County Sheriff's Office.

SUBJECT TO DEVIATIONS STATED BELOW, THE UNDERSIGNED, BY THE SIGNATURE EVIDENCED, REPRESENTS THAT THE VENDOR ACCEPTS THE TERMS, CONDITIONS, MANDATES, AND OTHER PROVISIIONS OF THE FOREGOIGN GENERAL TERMS AND CONDITIONS (PART A), THE SPECIAL TERMS AND CONDITIONS (PART B) AND THE TECHNICAL SPECIFICATIONS (PART C), SAID DOCUMENTS BEING THE STRICT BASIS UPON WHICH THE SAID VENDOR MAKES THIS PROPOSAL.

\* \* \* USE INK ONLY \* \* \*

#### ALL THE FOLLOWING INFORMATION MUST BE HEREUPON GIVEN FOR THIS PROPOSAL TO BE CONSIDERED BY THE GASTON COUNTY SHERIFF'S OFFICE

# EXCEPTIONS TO PROPOSAL: NOTES - ANY REPRESENTATION (BELOW) OR EXCEPTION(S) MAY CAUSE THIS PROPOSAL TO BE REJECTED BY THE GASTON COUNTY SHERIFF'S OFFICE. ALL VENDORS SHOULD CAREFULLY READ PARAGRAPH 8 OF THE SPECIAL TERMS AND CONDITIONS (PART B).

The following represents every deviation (itemized by number) to the foregoing **General Terms and Provisions** (Part A), the **Special Terms and Conditions** (Part B) and the **Technical Specifications** (Part C), upon which this Proposal is based, to wit:

PROPOSAL FOR JAIL MEDICAL SERVICES

#### (Insert your company name and address here)

V E N

D O R

The undersigned has carefully examined the proposal package and all conditions affecting the cost of the service required by the Gaston County Sheriff's Office.

The undersigned certifies that any exceptions to the proposal specifications are noted on the attached exceptions form. All specifications not noted thereon are as requested. The undersigned also understands that any exceptions presented after the Award of the Contract may be cause for cancellation of award.

We hereby propose to furnish the services described herein in accordance with the proposal package, except as noted on attached Exceptions Form:

#### IMPORTANT NOTE TO VENDORS PLEASE USE EACH OF THE ABOVE DESIGNATED FORMS FOR EACH OPTION RELATING TO EACH CONTRACT YEAR PROJECTION.

## REFERENCES

Provide business references on this form. References shall be facilities of <u>comparable</u> size currently or previously under contract where same or similar services have been provided. These should be facilities where certification by NCCHC, PREA and ACA Accreditation has been attained.

1.	Facility Name	 
Facilit	y ADP	
Conta	ict .	
Title		
Mailin	g Address	

-	Phone		
L.	Email		
	2. Facility Name	)	
	Facility ADP		
	Contact		
	Title		
	Mailing Address		
	Phone		
$\sum$	Email		
	<b>3.</b> Facility Name		
	Facility ADP		
	Contact		
	Title		
	Mailing Address		
	Phone		
	Email		

	4. Facility Name	<u> </u>
~- <u>120</u>	Facility ADP	
	Contact	
	Title	
	Mailing Address	
	Phone	

# **ACCREDITATIONS**

List all facilities at which your program has been accredited by NCCHC, PREA and ACA. Provide copies of the accreditation certificate(s).

# PROPOSED TITLE:

# CONTRACT for JAIL MEDICAL SERVICES

CONTRACT IOI JAIL MEDICAL SER	KVICES
VENDOR:	<b>Check One:()</b> Individual ()Partnership
(Insert your company name and address here)	
Corporate Federal Taxpayer Identification Number: _	
Corporate Address, if different from above:	
Telephone Number:	
Email Address:	
Contact Person:	

Our Company has been in business under its present name since:

At the present time we understand all requirements and state that as a serious Vendor we will comply with all the stipulations included in the proposal package.

The above-named Vendor affirms and declares:

- 1. That the Vendor is of lawful age and that no other person, firm or corporation has any interest in this proposal or in the contract proposed to be entered.
- 2. That this proposal is made without any understanding, agreement, or connection with any other person, firm or corporation making a proposal for the same purpose and is in all respects fair and without collusion or fraud.
- 3. That the Vendor is not in arrears to Gaston County or the Gaston County Sheriff's Office upon debt or contract and is not a defaulter, as surety or otherwise, upon any obligation to the Sheriff.
- 4. That no officer or employee or person whose salary is payable in whole or in part from Gaston County is, shall be or become interested, directly, or indirectly, surety or otherwise in this proposal, in the performance of the contract, in the supplies, materials, equipment, and work or labor to which they relate, or in any portion of the profits thereof.

The undersigned also agrees that this proposal shall remain open for an evaluation period of ninety (90) calendar days following the opening of the proposals.

Respectfully submitted,

PLEASE PRINT:

By

Title

Date

Signature

#### STATEMENT OF NO PROPOSAL

# NOTE: If you do not intend to respond to this requirement, please return this form immediately to:

Gaston County Sheriff's Office 425 Dr. Martin Luther King Jr. Way Gastonia, North Carolina 28052

#### Attn: Gwen Danner, Business Services Administrator

#### gdanner@gcps.org

We, the undersigned, have declined to respond to your Proposal for Jail Medical Services for the following reasons:

\_\_\_\_Specifications too "tight", i.e., geared toward one provider or vendor (explain below).

\_\_\_\_Insufficient time to respond to the Request for Proposal.

\_\_\_\_\_We do not offer this service.

Our work schedule would not permit us to perform.

\_\_\_\_Unable to meet specifications.

\_\_\_\_\_Specifications unclear (explain below).

\_\_\_\_\_Remove our company from your Vendor list.

\_\_\_\_Other (specify below)

We understand that if the "no proposal" letter is not executed and returned, our name may be deleted from the list of qualified Vendors for the Gaston County Sheriff's Office. Please print.

COMPANY NAME\_\_\_\_\_

COMPANY OFFICER\_\_\_\_\_

TELEPHONE NUMBER\_\_\_\_\_

DATE\_\_\_\_\_

SIGNATURE

# PROPOSAL EVALUATION MATRIX RECOMMENDED

Firm Name

1) Program Capability (30 points cumulative)

- a) Vendor's qualifications
- b) Prior experience in delivering health care services in an institutional or correctional setting, including documentation from each site confirming service delivery.
- c) Documentation of institutional accreditation by appropriate accrediting bodies, i.e., ACA, PREA, NCCHC.

2) Detailed Plan (50 points cumulative)

- a) Outline of services to be provided
- a) Intake screening
- c) History and physical examination
- d) Physician services
- e) Nursing services
- f) Dental services
- g) Sick call
- h) Mental health services
- i) Medication administration
- j) Records maintenance
- k) Quality assurance and utilization review procedures
- I) Data collection procedures, processing, and reporting

- 3) Organizational Capability (20 points cumulative)
  - a) Rationale for number and types of staff
  - b) Job descriptions
  - c) Staff orientation program

4) Proposed Contract Price & Composition What are the strongest points of this firm?

What are the weakest points of this firm?

General comments/clarifications/questions

Name of Evaluator:

Date: \_\_\_\_\_

# EXHIBIT A

## OUTSIDE ORGANIZATIONS IT CHECKLIST FOR STABILITY & SECURITY

Vendors in County Buildings using their own systems:

Examples:

- Carolina's Correctional Health (Sheriff's Office)
- Alternative Community Penalties Program Pre-Trial (ACPP)
- Kentegra (Health Department)
- ✓ Establish Outside IT Support for computers and hardware.
- ✓ A backup system that will allow recovery of data on a periodic basis, to be identified by you and your institution.
- ✓ Suitable anti-virus solution with automated updates (must not be on the State's "Do Not Use" list).
- ✓ Ensure that all patches are current.
- ✓ Have periodic updates of the systems ensuring they are on supported versions.
- ✓ No unsecured Remote Desktop (RDP) allowed. Consider VPN and other options.
- ✓ Business Class Network, Firewall, and Router (if applicable).
- ✓ If storing sensitive data (PHI, PII, etc.) it must be encrypted both live and at rest, including any backups.
- ✓ Ensure all default admin passwords have been changed and acceptable password complexity is being used.
- ✓ Cyber Insurance (if applicable).
- ✓ Have a breach notification plan requiring notification to the County as soon as a breach is detected.
- ✓ Agree to an annual audit by Gaston County IT or their designee.
- ✓ If storing sensitive data agree to an annual security scan or penetration test facilitated by Gaston County IT.
- ✓ When storing HIPAA data, ensure all Business Associate Agreements are in place.
- ✓ Ensure PCI compliance if vendor or vendor tool takes credit cards.
- ✓ If vendor shares information externally, ensure methods are secure (Secure Email, Secure FTP, etc.).

# EXHIBIT H

**Reserve Health Proposal for Jail Medical Services** 



# Proposal for Jail Medical Services

Submitted By:

**Reserve Health, PC** 650 S Tryon St, Suite 440 Charlotte, NC 28202

Contact: Rob Patterson, Vice President 704-960-0249 rpatterson@reservehealth.com Submitted By:

**Reserve Health, PC** 650 S Tryon St, Suite 440 Charlotte, NC 28202

Contact: Rob Patterson, Vice President 704-960-0249 rpatterson@reservehealth.com

February 15, 2024



#### 650 S Tryon St, Suite 440 Charlotte, NC 28202

704.626.6266 🕾 leadership@reservehealth.co

www.reservehealth.com ⊗

Dear Sheriff Hawkins and Staff,

February 9, 2024

I am pleased to present the proposal for inmate healthcare services by Reserve Health for Gaston County Jail. This executive summary highlights key aspects of our proposed services, emphasizing our commitment to enhancing healthcare quality, efficiency, and compliance within your facility.

Reserve Health specializes in comprehensive healthcare services and has experience tailoring these services for correctional facilities. Our approach integrates advanced medical practices with the latest technology to deliver exceptional care to inmates while ensuring compliance with legal and ethical standards.

From primary care to specialized treatments, our services cover a wide range of healthcare needs. Recognizing the importance of mental health, we offer specialized programs for substance abuse and psychological care. Because inmates rely on us for all their healthcare while in Gaston County Jail, our team is equipped to handle both emergencies and routine medical care, ensuring prompt and effective treatment.

We set ourselves apart from our competitors in a variety of ways. First and most important is our commitment to the highest quality healthcare. We say that we seek patients so they won't need to seek us. This means that we ensure all inmates are receiving timely care and attention to anticipate any potential problems before they arise. Examples are identifying patients requiring prevention or follow-up care and scrutinizing medication pass data to identify those patients who may not be taking their medication as prescribed so that we can intervene. Our state-of-the-art reporting tools provide real-time data and insights, and our commitment to transparency allows sharing this data with you and your staff. We employ data analytics to improve healthcare delivery, predict future needs, and manage resources efficiently.

Our systematic utilization review ensures that all services are necessary, effective, and aligned with the latest medical standards. Services are designed to meet and exceed the National Commission on Correctional Health Care standards, American Correctional Association criteria, and Prison Rape Elimination Act measures. We are committed to ongoing improvement and adaptation to evolving healthcare best practices. Our focus is on cost-effectively delivering high-quality care, ensuring the best use of resources. Efficiency is key in our operations, reducing unnecessary expenditures and optimizing staff deployment.

We believe in working closely with your staff and administration to ensure seamless healthcare delivery. Our team provides comprehensive training and ongoing support to ensure smooth operation and integration with your facility's existing systems.

We are excited about the possibility of partnering with Gaston County Jail and are confident that our services will significantly enhance the quality of inmate healthcare at your facility. We look forward to discussing this proposal in more detail and answering any questions you may have.

Sincerely,

Dariel Biordi, DO. MBA

Daniel Biondi, DO, MBA PHYSICIAN/CEO

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# Licensure



NORTH CAROLINA MEDICAL BOARD P.C. 2

#### CERTIFICATION BY THE NORTH CAROLINA MEDICAL BOARD

The incorporators of **Reserve Health**, **P.C.** have certified to the North Carolina Medical Board the names and addresses of all persons who will be original owners of its shares, or that one hundred percent (100%) of its capital stock will be issued to another professional corporation in accordance with the North Carolina General Statute, §55B-6(b).

Based upon my examination of the records of this office, I hereby certify that the ownership of the shares of stock is in compliance with the requirement of North Carolina General Statute §55B-4(2) and 55B-6.

This certificate is executed under the authority of the North Carolina Medical Board on 03/02/2016.

R Davil Hunderson

R. David Henderson Chief Executive Officer



1203 Front Street Raleigh, North Carolina 27609-7533

Mailing: P.O. Box 20007 Raleigh, North Carolina 27619-0007

Telephone: (919) 326-1100 Fax: (919) 326-1131 Email: info@ncmedboard.org Web: www.ncmedboard.org





#### State of North Carolina Department of the Secretary of State ARTICLES OF INCORPORATION (PROFESSIONAL CORPORATION)

SOSID: 1506662 Date Filed: 3/24/2016 11:30:00 AM Elaine F. Marshall North Carolina Secretary of State C2016 075 00594

Pursuant to Chapter 55B and § 55-2-02 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Incorporation for the purpose of forming a professional corporation:

1. The name of the corporation is: Reserve Health, P.C.

2. The number of shares the corporation is authorized to issue is: 100,000

These shares shall be: (check either a or b)

a. X all of one class, designated as common stock; or b. divided into classes or series within a class as provided in the attached schedule, with the information required by N.C.G.S. § 55-6-01.

3. The street address and county of the initial registered office of the corporation is:

Number and Street 2826 Lake Shore Road South

City, State, Zip Code Denver, NC 28037-8228 County Lincoln

- 4. The mailing address if different from the street address of the initial registered office is:
- 5. The name of the initial registered agent is: Daniel T. Biondi
- 6. Any other provisions, which the corporation elects to include, are attached.
- 7. The specific purpose for which the corporation is being formed: practice of family medicine
- 8. The name and address of each incorporator is as follows: (Attach additional sheets if necessary.)

#### Dr. Daniel T. Biondi 2826 Lake Shore Road South Denver, NC 28037-8228

9. With respect to each professional service to be practiced through the corporation, the name of at least one of the corporation's incorporators who is a licensee of the licensing board which regulates such profession in this State is:

#### Daniel T. Biondi

10. A certification by the appropriate licensing board that the shareholder interests of the corporation are in compliance with the requirements of N.C.G.S. Sections 55B-4(2) and 55B-6 is attached.

Revised January 2000		
CORPORATIONS DIVISION	P. O. BOX 29622	

Form PC-05

RALEIGH, NC 27626-0622

This the	day of February,	2016.	134		
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<ol> <li>Only a "professional concessary to examine the second secon</li></ol>	orporation" may use this fo	orm. To determine whethe S. § 55B-2(5). If the corp	r a particular corporation is	such a "professional corporation," it i requirements, it must use the standard	is d
Revised January 2000				Form PC-05	8
					2

STATE	<b>OF NORTI</b>	H CAROLINA
Departme	ent of the Se	cretary of State

SOSID: 1506662 Date Filed: 7/17/2020 5:15:00 PM Elaine F. Marshall North Carolina Secretary of State C2020 184 00076

#### AGENT'S STATEMENT OF CHANGE OF REGISTERED OFFICE ADDRESS

Pursuant to §55D-31 of the General Statutes of North Carolina, the undersigned submits the following for the purpose of changing the address of the registered office in the State of North Carolina of the entity named below:

	The name of the current Registe			
Cu	rrent Entity Information			
3.	The street address and county on Number and Street: 2826		e en en en el el de l'esta de la febre de la recenta de la compara de la compara de la compara de la compara d	
	<sub>City:</sub> Denver	State: NC	Zip Code: 28037	County: Lincoln
	The mailing address if different	t from the street add	fress of the current Registered	Office of the entity is:
	Number and Street:			
	City:	State: NC	Zip Code:	County:
Ne	w Entity Information			
4.	The street address and county of Number and Street: 135 V			tà
				<b>N A A A A A A A A A A</b>
	City: Charlotte	State: NC	Zin Code: 28202	County: Mecklenburg
	The mailing address if different	t from the street add	dress of the New Registered O	ffice of the entity is:
		t from the street add	dress of the New Registered O	ffice of the entity is:
5.	The mailing address if different Number and Street: City:	t from the street add	dress of the New Registered O	ffice of the entity is:
6.	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that t office.	t from the street add State: <u>NC</u> stered office and th he entity has been t	dress of the New Registered O Zip Code: e address of the business offic notified in writing of the chang	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business
6.	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that t	t from the street add State: <u>NC</u> stered office and th he entity has been n e upon filing, unles	dress of the New Registered O Z Zip Code: e address of the business offic notified in writing of the chang s a date and./or time is specifi	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business ed: ve Health, PC
6.	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that to office. This statement will be effective	t from the street add State: <u>NC</u> stered office and th he entity has been n e upon filing, unles	dress of the New Registered O Z Zip Code: e address of the business offic notified in writing of the chang s a date and./or time is specifi	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business ed: <b>ve Health, PC</b> (Name of Entity)
6.	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that to office. This statement will be effective	t from the street add State: <u>NC</u> stered office and th he entity has been n e upon filing, unles	dress of the New Registered O	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business ed: <b>ve Health, PC</b> (Name of Entity) (Signature)
6.	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that to office. This statement will be effective	t from the street add State: <u>NC</u> stered office and th he entity has been n e upon filing, unles	dress of the New Registered O 2 Zip Code: e address of the business offic notified in writing of the chang s a date and./or time is specifi , 2020. Reser  Danie	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business ed: <b>ve Health, PC</b> (Name of Entity)
	The mailing address if different Number and Street: City: The address of the entity's regi- identical. The undersigned certifies that to office. This statement will be effective	t from the street add State: <u>NC</u> stered office and th he entity has been n to upon filing, unles JUNE	dress of the New Registered O	ffice of the entity is: County: e of its registered agent, as changed, will be ge of address of the registered agent's business ed: <b>ve Health, PC</b> (Name of Entity) (Signature) <b>Biondi, President</b> (Type or Print Name and Title)



# **RH Proprietary and Confidential Information Removed**

# Insurances

Reserve Health hereby confirms that our organization maintains comprehensive insurance coverage across all required domains, including commercial general liability, workers' compensation, and commercial automobile liability. Our current insurance policies meet or exceed the specifications outlined in the Request for Proposal (RFP) requirements. Additionally, our existing malpractice coverage encompasses overlapping policies, with limits of \$1,000,000.00 per occurrence and \$3,000,000.00 in aggregate annually. We are fully prepared to increase these coverage limits upon the award of the contract, ensuring that our insurance provisions align with the contractual obligations and the client's needs.

			RE	SER-2		OP ID: LH
CERTIFICATE	OF LIABIL	ITY INS	SURANG	CE		(MM/DD/YYYY) /13/2024
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMAT CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT C REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE H	ONSTITUTE A C	D OR ALT	ER THE CO	VERAGE AFFORDED E	Y THE	E POLICIES
IMPORTANT: If the certificate holder is an ADDITIONAL INSU If SUBROGATION IS WAIVED, subject to the terms and condit this certificate does not confer rights to the certificate holder in PROPURE 704-664-3973	tions of the polic I lieu of such end	y, certain p	olicies may ı			
Central Carolina Ins. Agency	NAME: PHONE	, Ext): 704-66	54-3973	FAX	704-6	64-2416
283 N. Church Street P O Box 706	E-MAIL ADDRES	; EXI): SS: Certs@c	entralcarol			
Mooresville, NC 28115 Rock Pickard		INS	SURER(S) AFFOR	NDING COVERAGE		NAIC #
	INSUREI	RA: Selectiv	ve Ins. Co./	Southeast		39926
INSURED Reserve Health, P.C.	INSUREI	RB: Employ	ers Preterr	ed Insurance		10346 37540
135 W 10th Street Charlotte, NC 28202			/ Insurance	Co. Inc.		37 340
	INSUREI					
	INSUREI					
COVERAGES CERTIFICATE NUMBER:	internet			REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED I	BELOW HAVE BEEN	N ISSUED TO	THE INSURE	D NAMED ABOVE FOR T	HE POL	ICY PERIOD
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR C CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANC						
EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN	MAY HAVE BEEN R					
	/ NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	s	4 000 000
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			02/00/2020	MED EXP (Any one person)	\$	15,00
				PERSONAL & ADV INJURY	\$	1,000,00
GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$	3,000,00
X POLICY PRO- JECT LOC				PRODUCTS - COMP/OP AGG	\$	3,000,000
A AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	1,000,000
ANY AUTO S 2644247		02/05/2024	02/05/2025	(Ea accident) BODILY INJURY (Per person)	\$ \$	,,
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B WORKERS COMPENSATION				X PER OTH- STATUTE ER	\$	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE		01/02/2024	01/02/2025	E.L. EACH ACCIDENT	¢	500,000
OFFICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$	500,000
If yes, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$	500,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Rer	narks Schedule. mav be	attached if mor	e space is require			
	narks schedule, may be	attached if mor	e space is require	su)		
CERTIFICATE HOLDER	CANC	ELLATION				
RE	SER-2					
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Reserve Health, PC				Y PROVISIONS.		
135 W 10th Street Charlotte, NC 28202						
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ACORD 25 (2016/03) The ACORD name and	l logo are registe			ORD CORPORATION.	All rigi	nts reserved.

CERTIFICATE	OF INS	URANCE	Issue Date: 06/15/23			
NAMED INSURED: Daniel Biondi, DO 135 W 10th Street Charlotte, NC 28202		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICY DESCRIBED BELOW.				
PRODUCING AGENC Professional Liability Solutions Age 8022 Providence Road Suite 500-220 Charlotte, NC 28277 (980)245-7297	ncy, LLC 6	COVERAGE PRO James River Insurance 7730 Glen Forest Dr, St Richmond, VA 23226	Company			
	COV	ERAGES				
This is to certify that the policy of insurance indicated. Notwithstanding any requirement certificate may be issued or may pertain, the exclusions, and conditions of such policy. L Your professional liability insurance provide services rendered or which should have been on <b>CLAIMS-MADE</b> basis, coverage is pro- services rendered or which should have been form, no coverage exists for claims first made extended reporting endorsement is obtained.	term, or condition of insurance afforded b imits shown may hav es coverage for claims n rendered during the vided for claims made n rendered on or after de against you after th	f any contract or other document w y the policy described herein is sub e been reduced by paid claims. s made during the effective period, effective period of this policy. If y e during the effective period, based the retroactive date. Also, if, your	ith respect to which this oject to all the terms, based on professional our policy is written on professional policy is a claims-made			
POLICY COVERAGE: POLICY TYPE: POLICY NUMBER: RETROACTIVE DATE: POLICY EFFECTIVE DATE: POLICY EXPIRATION DATE: PER CLAIM LIABILITY: ANNUAL AGGREGATE: DEDUCTIBLE: SPECIALTY: Th	Claims-Made 00117626-2 06/01/20 06/01/23 06/01/24 \$1,000,000 \$3,000,000 \$10000 Per Clai Internal Medici	X Named Insured Additional				
CERTIFICATE HOLDER:		CANCELLATION:				
CERTIFICATE HOLDER:		Should the above described pol expiration date thereof, the issu	-			
Photocopies of the certificate of insurance deemed as valid as the original.	e are	AUTHORIZED REPRESENTA O. Wagner, Pres., Agent	ATIVE:			



#### CERTIFICATE OF INSURANCE

THE COVERAGE AFFORDED BY THIS POLICY IS WRITTEN ON A CLAIMS-MADE BASIS

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the policies listed below.

**INSURED:** 

Daniel Thomas Biondi, DO 135 W 10th St Charlotte, NC 28202

#### COMPANY AFFORDING COVERAGE:

Medical Mutual Insurance Company of North Carolina 700 Spring Forest Road 4th Floor Raleigh, NC 27609

TYPE OF INSURANCE: Medical Professional Liability - Claims Made

POLICY NUMBER: PS119307

POLICY PERIOD:

FROM: April 15, 2023;12:01 A.M.

LIMITS OF LIABILITY:

EACH CLAIM 1,000,000 RETROACTIVE DATE: April 15, 2016

.

TO: April 15, 2024;12:01 A.M.

ANNUAL AGGREGATE 3,000,000

Authorized Representative

Date: February 28, 2023

Certificate Holder:

# Vendor's Qualifications

Reserve Health is committed to delivering exceptional healthcare services to the inmates at Gaston County jail, emphasizing patient-centric care, technological innovation, and seamless integration with state and local health information systems. Our dedication to improving health outcomes, reducing care delays, and cutting unnecessary costs positions us as the premier choice for healthcare service provision within correctional facilities.

## Reserve Health Mission

Reserve Health is committed to leading individuals and communities to better health through empathy, innovation, partnership, and expertise.

## Reserve Health Vision

To fill our communities with healthy, happy people.

## Reserve Health Values

*Respect:* In our thoughts, words, and actions, we honor others for their abilities, qualities, and achievements and regard their feelings, wishes, rights, and traditions, including those with which we may disagree.

*Belonging:* We embrace diversity, and we honor this value not just in our makeup but in our practices as we proactively work to include people of different backgrounds and viewpoints and cultivate a sense of welcome to all.

*Compassion:* We exercise empathy, sensitivity, warmth, and caring toward the concerns, fears, pain, and privacy of others.

*Integrity:* We instill trust by exercising personal responsibility for truth and honesty when we are being watched, but most importantly when we are not.

*Healing:* We nurture the physical, emotional, and spiritual needs of patients through repairing, restoring, curing, and caring.

*Teamwork:* Our common purpose serves to unify the contributions of individuals, blending skills and unique talents for success.

*Excellence:* We will work tirelessly to deliver the highest quality outcomes and experience and judge ourselves not against our peers but rather against the greatest possible performance we could envision.

*Innovation:* Capitalizing on creative solutions and the spirit of originality we give ourselves permission to do things not done before, say things not spoken before, and think things not yet envisioned.

*Stewardship:* Through energy, discipline, and determination, we will handle our resources wisely, understanding that our practice is fueled by other people's time, money, relationships, and reputations.



February 6, 2024 Daniel Biondi, CEO Physician, Reserve Health 650 S Tryon St., Suite 440 Charlotte, NC 28202

Delivered via email to dbiondi@reservehealth.com

Dear Dr. Biondi:

Thank you for the opportunity to provide a reference to you and Reserve Health in response to an upcoming proposal you are responding to for Reserve Health. During this contract period that started March 1, 2020, you and the staff at Reserve Health have been a catalyst for implementing necessary changes during and post-pandemic. Prior to this contract period, your dedication and support of several changes in the detention operations at the Gaston County Sheriff's Office have been positive and impactful to the agency and the detention inmates.

Your advocation during the pandemic for both staff and inmates is without question one of the reasons our facilities were able to navigate the unpreceded impact to the community. Your contribution to our response and the processes and procedures you implemented are a model to successfully survive a pandemic. Your partnership with the Gaston County Health Department ensured we had adequate vaccines for inmates and staff alike.

The fact we managed to come through is a testament to your commitment to public health. Furthermore, your contributions to our accreditations during and since the pandemic are without question a tremendous contribution Reserve Health has made to our overall success during a challenging period. The accreditations for the Prison Rape Elimination Act (PREA), the American Correctional Association (ACA) and the National Commission on Correctional Health Care (NCCHC) all received outstanding results and the ACA and NCCHC occurred in the same year which makes it that much more impressive.

Your attention to detail and patient care sets you and Reserve Health apart in this industry and any facility would be fortunate to partner with you for the delivery of patient care. I applaud your dedication to inmate patient care and wish you much success. Should you or the agency you are responding to need additional information, please let me know.

Sincerely,

Rouhigelanher

Rachel J. Vanhoy, MCSO Director of Business Operations



February 7, 2024

Dear Sheriff Hawkins,

I am writing on behalf of RAO Community Health to express our enthusiastic support for Reserve Health's proposal to provide healthcare services to Gaston County jail inmates. We have had the privilege of working closely with Dr. Biondi and his dedicated staff, and we are confident in their services' positive impact on the health and well-being of the individuals within the jail.

At RAO Community Health, we share a commitment to serving underserved populations, the Uninsured, underinsured, and those facing barriers to quality healthcare. Dr. Biondi and his team at Reserve Health have demonstrated an unwavering dedication to improving healthcare outcomes for vulnerable individuals, and their expertise in providing comprehensive medical care aligns perfectly with our mission and values.

Dr. Biondi's compassionate and patient-centered approach to healthcare has consistently impressed us. His commitment to addressing the unique needs of each patient, even in challenging environments, has been a source of inspiration for our organization. Reserve Health's presence at Gaston County jail will significantly benefit the inmates and contribute to the overall well-being of our community.

We recognize that correctional healthcare presents challenges, but we are confident that the experienced and compassionate team at Reserve Health is well-equipped to address them effectively. Your dedication to delivering high-quality care, even to those facing difficult circumstances, is commendable.

Please do not hesitate to reach out if you require any further information or assistance from RAO Community Health. We are eager to see the positive changes that Reserve Health will bring to your facility and our community and are here to assist in any way we can.

Thank you for your dedication to providing healthcare to those most in need. Sincerely,

A.Bernard Davis 3A CEO RAO Community Health

321 W. 11<sup>th</sup> Street, Charlotte, NC 28202 • (P) 704-237-8793 • (F) 704-237-8797

## **CHARLOTTE FIRE DEPARTMENT**



The Charlotte Fire Department is called to serve all people by minimizing the risk to life and property through professional response, mitigation, prevention, education, planning, and community partnerships.

02/08/2024

To Whom it May Concern:

My name is Jeff Matthews and I currently serve as a Division Chief with the Charlotte Fire Department. This letter serves as a letter of support for Reserve Health.

While serving Charlotte Fire in the role of Health and Safety Chief, Reserve Health was the contracted provider, and remains the contracted provider, for occupational fit for duty exams and physicals to include chest x-ray, cardiac stress testing, and respiratory fit testing. In addition, Reserve Health also provides physical therapy, wellness and nutrition education, behavioral health services and exercise management to our sworn and many of our non-sworn employees. During my three years of working closely with Dr. Biondi and the Reserve Health team I experienced a team that:

- was accurate and responsive in communication
- listened to our challenges and rose to the occasion to meet them with innovative solutions
- capable of flexing with demand, this was key to keeping firefighters healthy and on shift during the COVID-19 pandemic
- above all, they have welcoming and friendly staff that treats our employees with respect

In closing, I have found Reserve Health to be a highly focused and customer driven organization. They have the capability to provide service and support at its highest level and most definitely should be highly considered as a provider option.

Sincerely,

MMan S

Jeff Matthews, Division Chief Charlotte Fire Department

Charlotte Fire Department | 500 Dalton Avenue| Charlotte, NC 28206

## Commitment to Patients

At Reserve Health, our foremost commitment is to the health and well-being of our patients. We understand the unique challenges the inmate population faces and are dedicated to providing compassionate, comprehensive healthcare services that address both immediate health concerns and long-term wellness goals. Our approach is holistic, treating each patient with the dignity and respect they deserve, and ensuring equitable access to high-quality healthcare for all inmates.

## Innovative Use of Technology

Our healthcare delivery model leverages cutting-edge technology to enhance care quality, efficiency, and accessibility. Key aspects include

Advanced Electronic Health Record (EHR) System: Our state-of-the-art EHR system is specifically designed for correctional healthcare settings, enabling real-time access to inmate health records, streamlined documentation, and improved coordination among healthcare providers. This ensures that every patient receives timely, personalized care based on their unique health profile.

*Virtual Care and Consultations:* To expand access to specialized medical services and overcome logistical barriers, we utilize telehealth solutions for virtual care and consultations. This approach allows inmates to receive prompt attention from specialists, reducing the need for external hospital visits and minimizing potential security risks.

## Participation in Health Information Exchanges

Reserve Health actively participates in several key health information exchanges to enhance care delivery:

State PMHP Controlled Substance Dashboard: By accessing the state's Prescription Monitoring Health Program (PMHP) dashboard, we can effectively monitor and manage the prescription of controlled substances, ensuring safe and appropriate use within the inmate population.

North Carolina Immunization Registry: Our integration with the North Carolina Immunization Registry enables us to access and update inmate immunization records in real-time, facilitating effective vaccine management and outbreak prevention within the facility.

Local Health Information Exchanges: We collaborate with local health information exchanges to access comprehensive health data on inmates, ensuring continuity of care and reducing the risk of medical errors. This connectivity allows for the most accurate health records to be at the fingertips of our healthcare providers, enhancing decision-making and patient outcomes.

Integrating advanced technology and participation in state and local health information systems enables Reserve Health to reduce delays in care, improve health outcomes, and lower costs associated with duplicative services and health complications. Our approach not only enhances the efficiency of healthcare delivery within Gaston County jail but also contributes to the overall safety and well-being of the inmate population.

## Success at Gaston County jail

Additionally, Reserve Health brings a wealth of experience and proven expertise in managing high volume, high acuity patient populations, as demonstrated by our successful healthcare delivery model at Gaston County jail. Our team is adept at navigating the complexities of treating patients with diverse medical needs under the pressures of a high-demand environment. This experience has honed our ability to implement efficient triage processes, prioritize urgent care, and manage chronic conditions effectively, ensuring that all patients receive the level of care they require. Our track record at Gaston County jail showcases our capacity to adapt to and address the healthcare challenges within correctional facilities, further validating our readiness to serve the Gaston County jail with the same level of commitment and excellence.

## Familiarity with the unique demands of law enforcement and detainment Personnel

Our collaboration extends beyond healthcare delivery, as evidenced by our occupational contracts with key law enforcement and emergency service providers, including the Gaston County Sheriff's Office, Charlotte-Gaston Police Department, Federal Bureau of Investigations, and the fire departments of Charlotte, Pineville, Davidson, Huntersville, Cornelius, Mount Mourne, and Stanley. These partnerships have deepened our understanding of the challenges faced by law enforcement and detainment personnel, allowing us to tailor our healthcare services to meet the dynamic needs of the detainee population. This experience has been instrumental in forging strong relationships with custody staff, fostering an environment of mutual respect and cooperation. Our comprehensive management of inmates' physical health, mental health, and dental needs not only contributes to the overall well-being of the detainee population but also supports the safety and efficiency of the facilities' operations. By addressing the health concerns of inmates proactively, we alleviate some of the pressures on law enforcement and detention officers, enabling them to perform their duties more effectively and with greater focus on security and safety.

## Regional Operations

By its embedded presence within the local medical community, Reserve Health occupies a unique position that enables it to offer the most comprehensive and efficient care to inmates, in stark contrast to potential providers based in other regions or states. This local integration fosters a deep understanding of the specific health challenges within the community, allowing Reserve Health to tailor its services in a way that is both highly relevant and immediately accessible to the inmate population.

One of the primary advantages of Reserve Health's local base is its ability to leverage existing relationships with healthcare professionals, hospitals, and clinics. These connections ensure that inmates have access to a wide network of specialized medical care and support services, ranging from mental health to chronic disease management, which might be less accessible or slower to coordinate through providers operating from a distance. Such proximity also facilitates more seamless transitions for inmates requiring hospitalization or specialist consultations, reducing potential delays in care that can exacerbate health issues.

Furthermore, Reserve Health's familiarity with the local healthcare infrastructure and its challenges enables it to navigate and mitigate systemic barriers to care more effectively than external providers. This understanding helps efficiently coordinate care, manage follow-ups, and ensure continuity of treatment, which are critical for addressing the complex health needs often seen in the inmate population. The organization's ability to act swiftly and agility in responding to health crises or emergencies within the facility is enhanced by its local presence, ensuring that inmates receive prompt and appropriate medical attention.

Additionally, being based within the community allows Reserve Health to contribute to and benefit from local public health initiatives and training programs, which can improve overall care quality and outcomes for inmates. This symbiotic relationship strengthens the local healthcare system and fosters a sense of community responsibility and involvement in supporting inmate health, further distinguishing Reserve Health from its non-local counterparts.

Reserve Health's connection to the local medical community is a foundational asset, uniquely positioning it to provide inmates with comprehensive, efficient, and tailored healthcare services. This local advantage facilitates better access to specialized services, enhances coordination and continuity of care, and enables a more responsive and integrated approach to inmate health needs compared to providers operating from a distance.

## Pandemic Response

The COVID-19 pandemic posed an unprecedented challenge to correctional facilities worldwide, where the close quarters and limited resources made inmates and staff particularly vulnerable. However, one example of a successful pandemic response emerged at Gaston County jail,

where the unwavering commitment, agility, and collaboration between the medical providers from Reserve Health and custody personnel turned adversity into triumph.

From the onset of the pandemic, Reserve Health exhibited an extraordinary commitment to the health and well-being of the inmates. Our dedication went beyond mere professional duty; it was a moral imperative.

The ability to adapt swiftly to changing circumstances was another cornerstone of the successful pandemic response. In close collaboration with custody personnel, the medical providers recognized the need for a flexible approach to containment and prevention.

Perhaps the most critical element of success was the extraordinary partnership between medical providers and custody personnel. These two groups worked hand-in-hand to ensure a comprehensive and integrated approach to pandemic management.

Reserve Health's successful pandemic response at Gaston County jail is a remarkable example of how a medical team committed to inmate welfare and a strong partnership with custody personnel sets a standard for what can be achieved through effective healthcare management within a correctional environment.

## **Electronic Health Record**

Sapphire is our cutting-edge Electronic Health Record (EHR) system, specifically designed for use within correctional environments. Sapphire revolutionizes inmate healthcare management by providing a seamless, secure, and efficient platform for recording, tracking, and analyzing health data. Engineered to meet the unique challenges of the correctional setting, it offers robust features that facilitate comprehensive care planning, coordination between medical and correctional staff, and compliance with legal and ethical standards. Sapphire's intuitive interface and advanced security measures ensure that sensitive health information is managed with the utmost confidentiality and accuracy, empowering healthcare providers to deliver the highest standard of care to the inmate population.

## Proactive Compliance Management

Sapphire provides several proactive features in our system and reporting to identify approaching deadlines. In the task and appointment lists, we flag a task/appointment not only when it is overdue but also when it is due today so users can easily identify the items that need to be addressed. Additionally, users can pull reports to highlight this information.

We can also create reporting to automatically send to administrators and other designated personnel that can identify when due dates or other dates are approaching.

We also offer medication and vital/lab renewal queues to monitor expiration dates easily. Users can monitor this queue so medication and/or vital renewals are never missed.

RENEWAL QUEU	E								4 F	nge_1	_ of 1 →
KTENT A	PATIENT ID	LOCATION	MEDICATION	DIRECTIONS	HESCHIER	START	80	LAST FILL	COMPLIANCE		
HEEKS, SANDY	2134320		VITAMIN B-1 100MG TABLET (THIAMINE)	TAKE 1 TABLET(5) ORALLY TWICE DAILY	ALI, MOHAMAD	2/6/2024	2/9/2024		0%	0	E. OB
BRATTON, CREED	417852	A .	VITAMIN 8-1 100MG TABLET (THIAMINE)	TAKE 1 TABLET(S) ORALLY TWICE DAILY	ALL MOHAMAD	2/6/2024	2/9/2024		0%	D	2,68
HEEKS, SANDY	2134320		PROCHLORPERAZINE SMG TAB (COMPAZINE)	TAKE 1 TABLET(S) ORALLY TWICE DAILY	ALL MOHAMAD	2/6/2024	2/9/2024		2%	0	2.03
RATTON, CREED	417852	A .	PROCHLORPERAZINE SMG TA8 (COMPAZINE)	TAKE 1 TABLET(S) ORALLY TWICE DAILY	AUL MOHAMAD	2/6/2024	2/9/2024		0%	0	B. 🖨 🔅
HEEKS, SANDY	2134920		ANTI-DIARRHEAL 2MD CAPLET (IMODIUM)	TAKE 1 TABLET(S) ORALLY TWICE DAILY	ALI, MOHAMAD	2/6/2024	2/9/2024		0%	D	B. 🖨 🔞
IRATTON, CREED	417052	A	ANTI-DIARRHEAL 2MG CAPLET (IMODIUM)	TAKE 1 TABLET(S) GRALLY TWICE DAILY	ALL MOHAMAD	2/6/2024	2/9/2024		0%	0	0.08
CHEEKS, SANDY	2134320		HYDROXYZINE PAM SOMG CAP (VISTARIL)	TAKE 1 CAPSULE(S) ORALLY TWICE DAILY	ALI, MOHAMAD	2/6/2024	2/9/2024		0%	0	
RATTON, CREED	417852	A	HYDROXYZINE PAM SOMG CAP (VISTARIL)	TAKE 1 CAPSULE(S) ORALLY TWICE DAILY	ALL MOHAMAD	2/6/2024	2/9/2024		0%		B. 🗢 B
LABE, SEBASTIAN XX	AM8587	UNIT-POD-CELL-BED	IBUPROFEN 200MG TABLET (ADVIL)	TAKE 2 TABLET(S) ORALLY THREE TIMES DAILY	ALI: MOHAMAD	1/16/2024	2/15/2024	1/16/2024	7.2%		2,018
ABE SEBASTIAN XX	AM8587	UNIT-POD-CELL-BED	BUPRENEX 6 3MG/ML INJ (BUPRENORPHINE HCL)	INJ. 6.5ML (100MG) SUB-0 EVERY 28 DAYS IN ABDOMEN AVOID BELTLINE/ROTATE INJ. SITE *NOT IM OR IV*	ALI, MOHAMAD	9/13/2023	3/10/2024	9/13/2028	3.4%	0	200
THEROBOT JINX	PAO-7070		FUROSEMIDE 20MG TABLET (LASIX)	TAKE 1 TABLET(S) ORALLY TWICE DAILY	ALI, MOHAMAD	12/19/2023	3/17/2024		2%	0	2.03
NICK DAISY	147258	D	LISINOPRIL 20MG TABLET (PRINIVIL)	TAKE 1 TABLET(S) ORALLY IN THE MORNING	ALI, MOHAMAD	10/5/2023	4/1/2024		6.4%	0	D. 🗢 TR
									4.6	ege_1	of 1 +

Users can sort by end date to identify which medications are due to expire first and select the renew icon directly from within the queue to renew the medication. Users can also print the information within the queue, remove it from the queue, or utilize a quick renewal. The quick renewal features permit users to extend the due date without any direction changes.

Days S	Supply 90 Prescribe	ALI, MOHAMAD ARIF	[MEDICAL DOCTOR]	~	
Medication	Directions	Start Date	End Date	Last Fill Date	Init Fill Qty
ANTI-DIARRHEAL 2MG CAPLET (IMODIUM) - 02/06/24 - 02/09/24	TAKE 1 TABLET(S) ORALLY TWICE DAILY	2/8/2024	5/7/2024		0 Tablet(s)
HYDROXYZINE PAM 50M0 CAP (VISTARIL) - 02/06/24 - 02/09/24	G TAKE 1 CAPSULE(S) ORALLY TWICE DAILY	2/8/2024	5/7/2024		0 Capsule(s)
PROCHLORPERAZINE 5M TAB (COMPAZINE) - 02/06/24 - 02/09/24	G TAKE 1 TABLET(S) ORALLY TWICE DAILY	2/8/2024	5/7/2024		0 Tablet(s)
VITAMIN B-1 100MG TABLET (THIAMINE) - 02/06/24 - 02/09/24	TAKE 1 TABLET(S) ORALLY TWICE DAILY	2/8/2024	5/7/2024		0 Tablet(s)

We also offer an Intake Processing queue to help manage tasks and compliance related to intake. The Intake Processing Queue provides our users with a convenient and efficient way to monitor all patients recently booked into the facility while supporting the standards of various auditing authorities, including **NCCHC** and **ACA**.

INTAKE/SCRE													
	EENING IN	FORMAT	TION								•	PAGE 4 OF 21	•
PAT NAME F	PAT ID	LOCATION	last Booked	MEDICAL INTAKE	PHYSICAL ASSESSMENT	MENTAL HEALTH EVAL	ORAL SCREENING	LAST TB PLANT	LAST TB READ	LAST Symptom Review	LAST X-RAY TAKEN	LAST X-RAY READ	ACTION
STEVENS, AMANDA	ABC64432	7 - 5 - 514 - M	1/04/2024 03:09	1/04/2024 00:51	1/04/2024 00:57	1/04/2024 00:5	1 1/04/2024 00:51						C.
EVANS, CHRIS	ABC832	1 - 6 - 604 - B	1/04/2024 03:07	1/04/2024 04:12	1/04/2024 04:20	1/04/2024 04:1	2 1/04/2024 04:12						C.
JONES, DAN	ABC643	7 - 5 - 508 - T	1/04/2024 01:43	1/04/2024 01:36	1/04/2024 01:47	1/04/2024 01:3	6 1/04/2024 01:36	i.					C.
BRIDGES, DIANE	ABC2353	M - 3 - 16 -	1/04/2024 01:40	1/04/2024 03:26	1/04/2024 03:44	1/04/2024 03:2	6 1/04/2024 03:26						C.
DAVIS, BRITTANY	ABC734	1 - 2 - 202 - B	1/04/2024 00:02	1/04/2024 04:55	1/04/2024 05:05	1/04/2024 04:5	5 1/04/2024 04:55	8/05/2023 00:00	8/07/2023 00:00	1			C.
STAHL, COREY	ABC453	7 - 1 - 115 - M	1/03/2024 23:51	1/04/2024 01:17	1/04/2024 01:20	1/04/2024 01:1	7 1/04/2024 01:17						[].
DELGADO, MANNY	ABC3443	7 - <b>1</b> - 108 - B	1/03/2024 23:17	1/03/2024 23:58	1/04/2024 00:02	1/03/2024 23:5	8 1/03/2024 23:58	1/03/2024 00:00					C.
BRENNER, STACY	ABC535	7 - <b>1</b> - 102 - M	1/03/2024 23:05	1/03/2024 23:13	1/03/2024 23:17	1/03/2024 23:1	3 1/03/2024 23:13						C.
ADAMS, STEPHANIE	ABC12565	7 - <b>1</b> - 102 - B	1/03/2024 22:56	1/03/2024 22:24	1/03/2024 22:30	1/03/2024 22:2	4 1/03/2024 22:24	1/03/2024 00:00					C.
LANGMORE, RUTH	724389	D - 4 - 403 -	1/03/2024 20:32	1/03/2024 21:55	1/03/2024 21:58	1/03/2024 21:5	5 1/03/2024 21:55	1/03/2024 00:00					C.

The Intake Processing Queue columns will be customized to Gaston County jail. Users will have color-coded visual cues to determine if corresponding forms have been completed in the appropriate facility-dictated timeframe or if they have fallen out of compliance. The queue also includes the patient's historical information to identify when previous assessments were completed quickly. Also, it will be easy to identify the time from booking to intake screening within the queue. Should a user need to complete new paperwork, a link to the forms library is provided for seamless workflow.

## TB tracking

Managing tuberculosis (TB) plants and reads is easily done using the TB module in the patient chart. Any new plant/read, symptom review, refusal, and/or X-ray result can all be documented in the TB module. New plants will have built-in logic that prohibits the plant from being read until two days have passed. However, based on permissions, users can backdate plants for immediate readings. If completing the plant while filling out a form, automatic tasking can be created to alert staff to read the PPD plant in two days.

TEST/SYMPTOM RI	TEST/SYMPTOM REVIEW DETAIL									OF1 🕨
туре	REASON	TESTED BY	TEST DATE	INJECTION SITE	DATE READ	READ BY	RESULTS	SIZE(MM)	COMMENTS	ACTION
M - MANTOUX	ANNUAL	TEST, GS	07/29/2020	LEFT FOREARM						
										OF1 🕨

TST TEST DETAI	LS
Test Details	
Test Date	07/29/2020
Test Type	M - MANTOUX
Lot Number	Lot #HISTORICAL TB (Exp. 7/12/2020, ~ Doses Remaining: 498)
Reason Type	Annual
Test Reason	INITIAL (AS HISTORY)
Test Site	Left Forearm
Tested By	TEST, GS
Test Read Det	ails
Test Read Date	07/31/2020 🛗
Result	Negative 🔽
Size	1 mm
Comments	add comments here
	, · · · · · · · · · · · · · · · · · · ·
Read By	
CANCEL	ок

A 'TB Quick Processing' queue is also available using the TB module. Any patient that is due for a plant or read will appear. Any new plant or symptom review can be completed through this queue, as well as, any new read. When a patient is due for an annual test, their name will automatically appear in the queue based on the last time the TB test occurred.

TB QUICK TEST				♦ PAGE 1 OF 5 ▶	
PATIENT NAME	LOCATION	ACTION			
AARONS, JANE		7/19/2020	7/19/2011	NO	ADD TST ADD TB SYMPTOM REVIEW
ADAMS, JOE		7/20/2020	7/20/2011	NO	ADD TST ADD TB SYMPTOM REVIEW

Additionally, the Immunization management piece allows for tracking inventory, including NDC, lot and expiration data. Patient-specific immunizations are also marked as administered, refused, or exempt. We created a "quick form" option that prep-populates administration record fields, saving time for commonly used immunizations and/or detailed regimens. The vaccine types and manufacturers are collated from CDC data sources so the list is always accurate and up-to-date.

ADD IMMUNIZATION RECORD

RECORD DETA	ILS					
Use Quick Form		INFLUENZA VACCINE			~	
Vaccine Type		INFLUENZA, SEASONAL, I	NJECTABLE		~	
Vaccine Lot		Lot #93593-09-345 (Exp. 3	/1/2023, ~ Doses Ren	naining: 492)	~	
Admin Date/Time		07/30/2020	11:12AM	CURRENT TIME		
VIS Published Dat	te	07/09/2019	?			
Vaccine Informati (VIS) Given	on Sheet	M				
Temperature F°		98.7				
Dosage Amount		0.500				
Dosage Units		MILLILITER(S)		~		
Allergies Checked						
Administration Si	te	LEFT ARM (DELTOID)		~		
Administration C	comments	Shake the vial thoroughly b in the deltoid muscle; altern be used. To be given annua	natively, the anterolat	teral thigh also can	<	
ANCEL						SAVE
T IMMUNIZATIONS	Linescon and the second					
TEV	IMMUNIZATION		LOT NUMBER	ADMINISTERED BY	ACTIONS	

As with all areas of the system, Sapphire also provides reporting that aids in managing TB within the facility.

1. Med Pass compliance (refused meds/missed meds). There will be a high priority to track this and improve performance so that accuracy will be paramount.

Medication compliance is tracked within Sapphire. Any medication that is administered or documented as refused/missed will factor into the compliance for the medication once the medication pass is uploaded to us. We offer standard compliance and noncompliance reports that can be filtered by:

- Dates
- Therapeutic Classification
- Specific Medications

- Prescribers
- Medpass Times

Medication compliance is also visible within the patient chart under the Medication section. Each medication will display a percentage to indicate compliance. Every patient will have an administration history available for each medication and a MAR that will indicate the result (administered, refused, etc.) with any notes that may have been included.

## Time from booking to intake screening

The Intake Processing Queue provides our users with a convenient and efficient way to monitor all patients recently booked into the facility while supporting the standards of various auditing authorities, including **NCCHC** and **ACA**.

INTAKE/SCR	EENING IN	FORMAT	TION								• •	PAGE 4 OF 21	•
PATNAME	PATID	LOCATION	last Booked	MEDICAL INTAKE	PHYSICAL ASSESSMENT	MENTAL HEALTH EVAL	ORAL SCREENING	LAST TB PLANT	LAST TB READ	LAST Symptom Review	LAST X-RAY TAKEN	LAST X-RAY READ	ACTION
STEVENS, AMANDA	ABC64432	7 - 5 - 514 - M	1/04/2024 03:09	1/04/2024 00:51	1/04/2024 00:57	1/04/2024 00:51	1/04/2024 00:51						C.
EVANS, CHRIS	ABC832	1 - 6 - 604 - B	1/04/2024 03:07	1/04/2024 04:12	1/04/2024 04:20	1/04/2024 04:12	1/04/2024 04:12						C.
JONES, DAN	ABC643	7 - 5 - 508 - T	1/04/2024 01:43	1/04/2024 01:36	1/04/2024 01:47	1/04/2024 01:36	1/04/2024 01:36						Co.
BRIDGES, DIANE	ABC2353	M - 3 - 16 -	1/04/2024 01:40	1/04/2024 03:26	1/04/2024 03:44	1/04/2024 03:26	1/04/2024 03:26						C.
DAVIS, BRITTANY	ABC734	1 - 2 - 202 - B	1/04/2024 00:02	1/04/2024 04:55	1/04/2024 05:05	1/04/2024 04:55	1/04/2024 04:55	8/05/2023 00:00	8/07/2023 00:00				C.
STAHL, COREY	ABC453	7-1- 115-M	1/03/2024 23:51	1/04/2024 01:17	1/04/2024 01:20	1/04/2024 01:17	1/04/2024 01:17						C.
DELGADO, MANNY	ABC3443	7 - 1 - 108 - B	1/03/2024 23:17	1/03/2024 23:58	1/04/2024 00:02	1/03/2024 23:58	1/03/2024 23:58	1/03/2024 00:00					C.
BRENNER, STACY	ABC535	7 - 1 - 102 - M	1/03/2024 23:05	1/03/2024 23:13	1/03/2024 23:17	1/03/2024 23:13	1/03/2024 23:13						C.
ADAMS, STEPHANIE	ABC12565	7 - 1 - 102 - B	1/03/2024 22:56	1/03/2024 22:24	1/03/2024 22:30	1/03/2024 22:24	1/03/2024 22:24	1/03/2024 00:00					G
LANGMORE, RUTH	724389	D - 4 - 403 -	1/03/2024 20:32	1/03/2024 21:55	1/03/2024 21:58	1/03/2024 21:55	1/03/2024 21:55	1/03/2024 00:00					Co

The Intake Processing Queue columns will correspond with Gaston County jail's needs and timeframes. Users will have color-coded visual cues to determine if corresponding forms have been completed in the appropriate facility-dictated timeframe. It will be easy to identify the time from booking to intake screening. Should a user need to complete new paperwork, a link to the forms library is provided for seamless workflow.

## Infirmary Management

Admission and discharge of patients from the infirmary are done through customized forms. Whether admitting or discharging, the custom forms can automatically order medication, schedule follow-up appointments, create new tasks, send internal/external messages, create alerts, update demographics, and more. When a patient is admitted to the infirmary or other specialized housing unit, they can be placed automatically on a hotlist designated for the infirmary for easy access to review recent documentation and complete new assessments. Once placed on the hotlist, the facility can review recent assessments and access a rounds form created to monitor the infirmary patient. Any form utilized for the infirmary process can be created and added to the facility forms library.

Every user accessing the forms can favorite a form(s). Users can then easily access their most frequently used forms without searching within the forms library. A nurse that works with an infirmary can have the infirmary admission, rounds form, and infirmary discharge form on their favorite list for quick access.

When a patient is placed into the infirmary or other specialized housing units, the facility can set a documentation status (i.e., infirmary) so that all documentation completed during the patient's stay in the infirmary can be pulled as a separate record. Setting this status also makes generating reports capturing just information within this timeframe easy.

When a physician or nurse manager needs to review and audit inpatient records, they can easily select that documentation to pull out separately in the patient chart. These records can be reviewed separately using the form documentation viewer or by generating a clinical summary report and specifying a specific documentation status.

## Suicide Watch and Seclusion Assessments

The facility will utilize Hotlists to monitor patients on suicide watch or psychiatric evaluation. The facility can monitor these patients using the Hotlist dashboard, which provides an overview of the patient's medical information, including recent assessments. It also allows for new assessments to be accessed and completed.

AT NAME	PATID	CELL	UNIT	WING	STATUS	ADMIT	CURRENT CKS	VITALS	ALLERGIES	MEDICATIONS	TREATMENTS	NOTES	LAST ASSESSMENT	ACTIO
NOOR BETTY	1267988		A	2	SUICIDE WATCHLIST, MENITAL HEALTH - OUTPATIENT	8/26/2020 15:47	[714 0] - RHEUMATOID ARTHRITIS [E11.9] - TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS [R03] - ABNORMAL BLOOC-PRESSURE READING, WITHOUT DUGNOSIS [044 201] - TENSION- TYPE HEADCHE, UNSPECIFIED, WITRACTABLE	BP115/72 mmHg (17 Nev 2020 16 58) - 418 BP BPM (17 Nev 2020 16 58) R120 RPM - (17 Nev 2020 16 58) (17 Nev 2020 16 58) 1100 'F - (17 Nev 2020 16 58)	BANANAS, SEASONAL ALLERGIES, STRAWBERRIES	NOVOLOG 100/ML VIAL [INSULIN ASPART]- (2020-06- 19 TO: 2021-08- 18)	WEIGHT - (2020- 06-20 TO 2020- 12-17) GLUCOSE - (2020-08- 19 TO: 2021-08- 19) PERFORM CIWA PROTOCOL - (2020-11- 17 TO 2020-11- 27)			12

Sapphire provides a few ways to monitor those individuals on a special watch of observation status. When a patient gets admitted to the Special Watch Status, the facility can set a

documentation status within a patient chart – this allows us to place patients within the infirmary or other specialized housing units.s such as the Annex This does not have any visible effect on the patient record, but all documentation completed during the patient's stay in the unit can be pulled separately.

The facility has a thorough and customizable "Special Needs and Restrictions" setting for each patient. This allows the facility to state which statuses need to be tracked, add them into the system, and assign them to a patient record as needed.

Chronic Suicid Historic and Demog	le Risk Factors 🕦 🖨	
-	cide Risk Factors	3
Start Date:	End Date:	Ê
Restriction Change	Reason	
Current Chronic Sul Family history of S		
First prison term	$\otimes$	
Long or life senter	nce (2/10/2020 - 2/10/2022) 🛞	
Acute Suicide Within 3 months Select Acute Suicid	Risk Factors 🛈 🚔 de Risk Factors	
Start Date:	End Date:	
Restriction Change	Reason	
Current Acute Suicio	de Risk Factors	
Current/recent an	xiety or panic symptoms 🛛 🛞	

Suicide watch is a standard patient setting as well, providing the facility the ability to mark patient suicide status, which then becomes a permanent piece of their record.



A visual indicator will appear on the patient chart, displaying the patient's name in red and outlining the patient's photo in red on the MedPass. In the chart, there is also an area for patient alerts. The facility-approved alerts will be available for selection. They may also include a 'blocking alert', which would automatically display upon entering the patient's chart, ensuring staff is alerted of any special needs/status for the patient. The facility can also create a 'locking alert' that works similarly to the blocking alert but requires special permission to enter the chart.

## **Interpreter Services**

Interpreter services play a crucial role in ensuring equitable healthcare access for inmates in jails, particularly for those who are non-English speakers or have limited English proficiency. Effective communication between healthcare providers and inmates is essential for accurate diagnosis, treatment planning, and the provision of care. Without interpreter services, non-English speaking inmates may face significant barriers in understanding their health conditions, consenting to treatments, and following medical advice. This can lead to misdiagnoses, inadequate treatment, and increased health disparities within the incarcerated population. Therefore, interpreter services are not only a matter of linguistic assistance but also a fundamental aspect of delivering ethical, effective, and equitable healthcare in the correctional setting, ensuring that all inmates, regardless of language proficiency, receive the care they need.

We use CryaCom International Video and Phone Interpretatioin and Translation Services. This service is HIPAA and PCI Compliant and meets several international standards for quality processes and hold the following ISO accreditations:

ISO 27001:2013 - Information Security Management System

ISO 9001:2015: - Quality Management System

ISO 13485:2016 - Quality Management System for Medical Device Translation

ISO 17100:2015 - Translation Servvices

ISO 13611:2014 - Guildelines for Community Interpreting

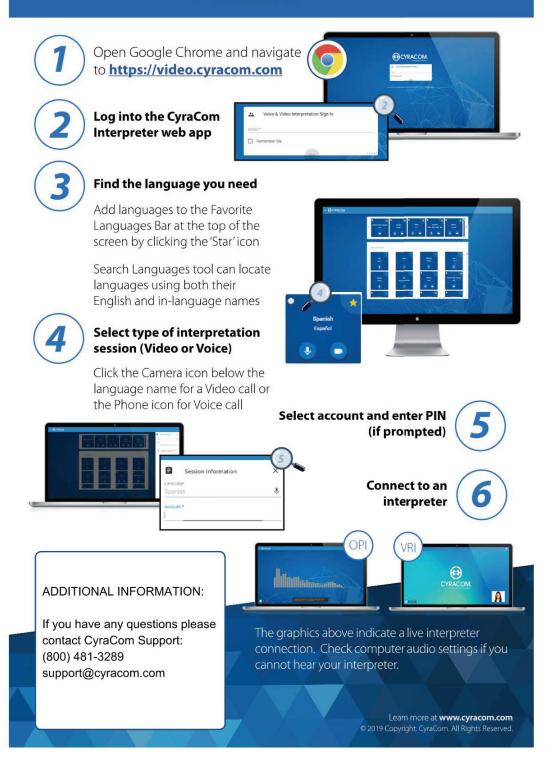


# How to Access Interpretation Services through the CyraCom Interpreter App

Make phone and video interpretation calls from our downloadable mobile app. You can access the app from a smart device with internet access, such as a cell phone or tablet.



# ACCESS CYRACOM INTERPRETATION VIA WEB VI



CYRACOM.



#### Accessing an Interpreter

#### **Using Any Phone**

1. Dial 1-800-481-3293 to access the interpretation services.

- 2. Enter Account#: 501037578
- 3. Enter your 4-digit PIN number: 3709
- 4. Say the language you need; confirm language

5. Add Another Person to the call, say Yes or Press 1 or say No or Press 2

6. The Interpreter will greet you with an ID#, we recommend you document in your charting notes or legal document

7. Greet Interpreter and begin dialogue

#### Working Effectively with an Interpreter

- · Allow the interpreter to greet you and the customer
- Write the interpreter ID number for documentation
- · Provide the interpreter with a brief explanation of the call
- · Speak in the first person
- · Use short but complete phrases
- · Avoid slang, jargon or metaphors
- Allow the interpreter to clarify linguistic and cultural issues

#### Submitting Feedback to CyraCom

 Did you have a really good experience, a call that could have gone better or general feedback you would like to submit to CyraCom?

## **Useful Phonetically Spelled Greetings**

Use this chart to phonetically say "One Moment, please" when you need to place a Limited English Proficient call on hold to access an interpreter.

English	Please Wait				
Arabic	you-shall in-pee-var				
Cantonese	Pang-da dahng				
French	Attond-hey, see-voo PLAY				
German	Bitt-uh var-ten				
Hebrew	na lei-amTEEN beva-KA-SHA				
Italian	See pray-gah dee ah-ten-deh-ray				
Korean	CHAHM-shee-mahhn, GHEE-dah- r'yuh-joo-seh-yo				
Mandarin	cheem shaow ho				
Polish	PROshea CHEkatch				
Portuguese	Es-pear-ray PORE-fah-voar				
Romanian	vaROOGam saw ash-teh-top law telephone				
Russian	Po-zha-loo-sta podo-zhdi-te				
Spanish	Un mo-men-to PORE-fah-voar				
Turkish	lute-fan beck-leen				
Vietnamese	sin doi yay lat				

# Accreditation

Reserve Health is dedicated to providing correctional healthcare services in strict compliance with the National Commission on Correctional Health Care (NCCHC) standards, ensuring the highest quality of care within correctional facilities. Our approach is rooted in a commitment to meet and exceed NCCHC guidelines, encompassing comprehensive medical, dental, and mental health services for inmates. We prioritize preventive care, timely interventions, and evidence-based practices to address the unique healthcare needs of individuals within the correctional system. Our healthcare professionals undergo specialized training to navigate the challenges of correctional settings while upholding the principles of confidentiality, dignity, and respect. By aligning our practices with NCCHC standards, Reserve Health aims to contribute to the overall well-being of inmates, foster a rehabilitative environment, and uphold the highest standards of correctional healthcare. Reserve Health is also well-positioned to partner with the Sheriff's Department on ACA and PREA Accreditations.

Our historical accreditation performance has been excellent, and our work at Gaston County jail has assisted them in maintaining unencumbered accreditation from NCCHC, ACA, and PREA throughout our tenure. Confirmation of these achievements has been included in Ms. Rachel Vanhoy's letter of support included in this proposal.

# Detailed Plan/Scope

## **Intake Screenings**

Conducting intake medical and mental health screenings at a jail is critical to ensure the inmates' and staff's health and safety. There are multiple components that Reserve Health considers critical components of an effective initial intake assessment.

Immediately upon an individual's arrival at the jail, a series of standardized screening questions and evaluations will be performed to ensure the individual is medically fit for confinement. This includes gathering basic personal information and vital signs and assessing for injuries or immediate health concerns that may preclude admission to the facility. We aim to permit entry for all individuals the facility's medical team can safely manage. We want to avoid unnecessary delays in admission or barriers to entry that cause burdens to our partners in arresting agencies.

At the same time, we need to ensure the safety of each patient and protect the jail, its staff, and all other inmates inside the facility. Occasionally, this may mean an arrestee needs to undergo outside evaluation or treatment before processing. This process will be automated in emergencies, with nurses empowered to initiate appropriate emergency services until care is transferred to emergency medical services. For circumstances that are not immediately lifethreatening, staff must consult with the medical director and obtain a recommendation.n This ensures the lead physician can guide decision-making and the most critical initial elements of care.

Once it has been determined that an arrestee will be remanded to custody, a qualified healthcare professional will conduct a more comprehensive intake assessment to identify any physical health issues. This includes checking for signs of injury, chronic conditions, infectious diseases, and the need for immediate medical care. A medication history is obtained, and allergies are identified.

This screening includes an initial mental health screening conducted to evaluate the individual's mental health status. The assessment involves assessing for mental health disorders, substance abuse, suicidal ideation, and any history of psychiatric treatment. We will utilize various standardized screening tools and questionnaires to ensure these evaluations are accurate. It is crucial for our staff to be specifically trained to conduct these evaluations, including for those who arrive impaired by substance or alcohol use or are uncooperative.

All information gathered during the intake process is documented thoroughly in the medical record since it is the foundation of the medical and medical care delivered throughout the

inmate's stay. Records are maintained confidentially but are immediately accessible to jail medical staff for ongoing care.

If the screenings indicate the need for further medical or mental health evaluation, including medication prescription, a provider will be consulted for further recommendations and orders. Urgent medical or mental health issues will be addressed immediately.

For individuals with existing health conditions, efforts will be made to ensure continuity of care. This might include obtaining previous medical records and continuing ongoing medication or treatment. Regular follow-ups are scheduled for individuals with identified health needs.

Procedures will be operationalized for prompt response to medical or mental health crises. Staff will be thouroughly trained in crisis intervention techniques and emergency response. It is important for this training to be frequently refreshed throughout the year.

Healthcare professionals coordinate with jail staff to ensure that health-related needs are considered in housing assignments, daily jail operations, and the need for any medical diet or allergy considerations.

This process is crucial not only for identifying and treating existing health issues but also for preventing new health problems from developing during an individual's incarceration. It is important that these screenings are conducted by trained professionals and in accordance with legal and ethical standards to ensure the well-being of the incarcerated population.

Our highly knowledgeable and skilled team of providers ensures 24/7 access to qualified medical decision-making. Providers can access staff through a published call schedule when not inside the building. This includes our medical, mental health, and dental providers.

Each provider is listed with contact information, and each on-call provider has a published backup if, for any reason, the scheduled provider cannot be reached.

Reserve Health can also use HIPAA-compliant, secure virtual technology, allowing our on-call providers to see, speak with, and assess patients remotely. This greatly enhances the care provided during off hours such as overnight, weekends, and holidays.

## **History and Physical**

## 1. Scheduling and PPDs

NCCHC standard XXX requires the completion of an initial history and physical examinations by the 14th day of incarceration. Reserve Health envisions a much more agressive approach. Our

plan is to plant all PPD (tuberculosis screening tests) NCCHC Standard XXX. This is the first step to expedited H&Ps. Subsequently, history and physical nurses will be assigned 7-days weekly to the orientation housing pods for those inmates within 48-72 hours of residency. This aligns with the appropriate interpretation schedule for the PPDs.

The only inmates who will have a placed but unread PPD will be those that leave the facility prior to the 48-72 mark. We will set our self-assessment benchmark at 100% of the 3-day incarceration rate.

The benefit of this aggressive schedule is multifactoral. inmates medical needs will be identified much sooner so that we can optimize their care. Additionally, barriers to assessments such as court appearances are much less likely to cause a inmate to go beyond the 14 day requirement because there will be such a substantial margin on time to makeup a scheduled assessment that was adversely impacted in the first 2-3 days.

## 2. Initial History Taking

A detailed medical history will be obtained upon inmates entering the correctional facility. This will include medical history, surgical history, medications, allergies, family history, and social history, including substance use and mental health history.

## 3. Physical Examination

Qualified healthcare professionals will conduct a complete physical examination. By NCCHC Standards this can be a Registered Nurse and that is the licensure we recommend for this assignment. The examination covers all major body systems, including cardiovascular, respiratory, neurological, gastrointestinal, musculoskeletal, dermatological, and others as indicated. RNs will leverage a standard operating procedure to identify those inmates requiring an examination by a higher licensed provider and the procedure will define the process to navigate the patient to that higher level of assessment.

## 4. Mental Health Assessment

Mental health screening is integral so the H&P will be assessing for psychiatric history, current mental status, risk of self-harm, or harm to others. This includes evaluating mood, thought processes, and cognitive function. Again, RNs will be trained and established protocols for referrals to higher mental health care will be well defined by standard operating procedures.

## 5. Infectious Disease Screening

Screenings for infectious diseases like tuberculosis, hepatitis, HIV, sexually transmitted infections, and infestation are performed. We spoke about an expeditied tuberculosis screening protocal in section 1 of this section. Other valuable infectious disease testing can be coordinated with the Gaston County Health Department for cost offsets.

Vaccinations and preventive measures will be provided as needed based of specific patient needs and risk factors.

## 6. Documentation

Standardized documentation templates custom built for our company and Gaston's specific facility will be used to guide personnel, ensuring standardization of evaluations. All findings from the history and physical examination will be carefully documented in the inmate's health record. Documentation will be clear, concise, and comprehensive to ensure continuity of care.

## 7. Identification and Management of Health Issues

Immediate health issues will be addressed promptly and a plan is developed for ongoing management of chronic conditions.

## 8. Follow-Up and Referrals

Referrals to medical specialists, mental health professionals, or other services will be made based on the initial assessment. Arrangements will be made for follow-up visits and continuous monitoring of health conditions.

This thorough approach ensures that all inmates receive a high standard of medical and mental health care from the outset of their incarceration, in line with NCCHC's commitment to quality and ethical healthcare in the correctional environment.

## **Providers**

## Medical Director:

The medical director oversees the healthcare and well-being of inmates within the correctional facility. They are responsible for managing the medical staff, ensuring inmates receive appropriate medical care, conducting health assessments, and coordinating with external healthcare providers when necessary. The medical director's role also involves addressing issues related to inmate health, such as infectious disease control, mental health care, and substance abuse treatment, to safeguard the inmates' health and the facility's security.

At Gaston County jail, Dr. Daniel Biondi would serve the role of medical director. His curriculum vitae is attached in Appendix B.

Advanced Practice Providers:

An advanced practice provider in a jail plays a vital role in delivering essential healthcare services to inmates. These nurse practitioners and/or physician assistants with advanced

training collaborate with the medical director and healthcare team to assess and diagnose inmates' medical conditions, prescribe medication, and administer treatments. These providers contribute to preventive care, manage chronic illnesses, and address acute medical needs within the correctional setting. Their expertise helps ensure inmates receive timely and appropriate medical attention, promoting individual well-being and institutional safety.

Our robust team of medical providers routinely rotates through each facility to ensure familiarity so we always have effective and well-prepared support and backup.

## Psychiatrist:

The psychiatrist addresses the complex mental health needs of inmates. Psychiatrists assess, diagnose, and treat mental health disorders among incarcerated individuals. They work closely with the medical and mental health teams to develop treatment plans, prescribe medications when necessary, and provide therapeutic interventions. One particular collaboration is their oversight of the psychiatric mental health nurse practitioners who provide direct care to inmates. Additionally, psychiatrists may evaluate inmates' competency to stand trial, assess the risk of self-harm or harm to others, and contribute to suicide prevention efforts within the correctional facility.

Psychiatric Mental Health Nurse Practitioners:

Psychiatric mental health nurse practitioners (PMHNPs) play a crucial role in the mental healthcare of inmates within a jail. With their advanced training in psychiatric and mental health, PMHNPs are uniquely equipped to assess, diagnose, and provide treatment for a range of mental health disorders among incarcerated individuals. They work closely with the jail's medical team to conduct psychiatric evaluations, develop treatment plans, and prescribe psychotropic medications when necessary. Additionally, PMHNPs often play a pivotal role in crisis intervention and suicide prevention within the correctional facility, offering much-needed mental health support to inmates.

## Mental Health Professionals:

Mental health professionals address the mental health needs of incarcerated individuals. This diverse group can include licensed clinical psychologists, psychiatric licensed clinical social workers, and licensed professional counselors. These professionals are responsible for conducting mental health assessments, providing counseling and therapy, diagnosing mental disorders, and developing treatment plans tailored to each inmate's needs. Their roles encompass crisis intervention, substance abuse treatment, and suicide prevention, aiming to promote mental well-being among inmates.

Dentist:

The dentist's responsibilities include conducting dental examinations, diagnosing oral health issues, and providing necessary treatments such as fillings, extractions, and dental cleanings. They also play a vital role in the correctional facility's pain management and infection control. In addition to addressing acute dental problems, they often focus on preventive care and oral hygiene education, promoting better overall health among inmates. Dental care in jails is essential for relieving pain and discomfort and upholding the well-being and dignity of incarcerated individuals.

## **Provider Services**

Medical provider services are a crucial component of the correctional healthcare system. They are designed to ensure the health and well-being of inmates. These services typically encompass a broad range of medical care qualified healthcare professionals provide, including physicians, nurse practitioners, and physician assistants. Key aspects of these services include:

1. Routine Health Assessments: Regular health evaluations are conducted to monitor the physical well-being of inmates, including initial intake assessments and periodic check-ups.

2. Emergency Medical Care: Our facilities are equipped to handle medical emergencies, providing immediate care for acute illnesses or injuries within the jail for medical, dental, and mental health emergencies.

3. Chronic Disease Management: Ongoing care and monitoring for inmates with chronic conditions such as diabetes, hypertension, asthma, HIV, and heart disease, ensuring continuity of treatment and medication management.

4. Mental Health Management: Diagnosing and appropriately managing medications and nonpharmacologic treatment plans ensures the appropriate care for patients with mental health diagnoses or simply having trouble adjusting to incarceration.

5. Substance Abuse Treatment: Offering detoxification services and mental health treatment for inmates with substance abuse issues. Our providers are equipped to provide MAT services if they are offered at the particular facility. This decision is made in conjunction with jail administration based on various factors.

6. Infectious Disease Control: Screening, prevention, and treatment for infectious diseases, including tuberculosis, HIV/AIDS, and hepatitis, along with vaccination programs.

7. Specialized Medical Services: Referrals to specialists for conditions that require specific medical expertise beyond the scope of the jail's in-house medical team. This includes a variety of innovative solutions, including virtual consultation, virtual visits, and off-site community referrals.

8. Collaborative Care: Collaboration between medical, dental, and mental health services is crucial for ensuring comprehensive care for inmates, who often present with complex, interrelated health issues. It enables the seamless exchange of vital health information, ensures continuity of care, and facilitates the development of integrated care plans that address the multifaceted health needs of the inmate population. By prioritizing clear, consistent, and timely communication, we can enhance patient outcomes, reduce the incidence of medical complications, and improve overall inmate well-being.

9. Health Education and Promotion: Educating inmates about various health topics, promoting healthy lifestyles, and providing guidance on managing health conditions.

10. Medication Management: Safe and accurate prescribing of medications, along with monitoring for side effects and interactions.

These services are tailored to the unique environment of the jail, focusing on both immediate healthcare needs and long-term health management, emphasizing maintaining the safety and well-being of the inmate population.

## **On-Call Services**

Our highly knowledgeable and skilled team of providers ensures 24/7 access to qualified medical decision-making. Staff can access providers through a published call schedule when they are not inside the building. This includes our medical, mental health, and dental providers.

Each provider is listed with contact information, and each on-call provider has a published backup if, for any reason, the scheduled provider cannot be reached.

Reserve Health can also use HIPAA-compliant, secure virtual technology, allowing our on-call providers to see, speak with, and assess patients remotely. This greatly enhances the care provided during off hours such as overnight, weekends, and holidays.

## **Off-Site Specialty Referrals**

Off-site specialty consultations for inmates serve a crucial role in ensuring that incarcerated individuals receive the specialized medical care they need. These consultations allow access to medical experts and services that may not be available within the jail's healthcare facility. They are necessary for procedurally-based medical needs that may not be amendable to telemedicine.

Some ways the Reserve Health's medical team reduces the need for off-site consultations while maintaining high-quality care include employing robust telemedicine and virtual consultation services, expanding the scope of on-site medical services by hiring skilled healthcare providers

who can manage a wider range of medical conditions, reducing the need for off-site referrals, and emphasizing preventive care and health screening which can help identify and address medical issues early.

## Telemedicine

Telemedicine specialist visits in a jail offer several significant benefits. Firstly, they allow inmates to access specialized medical care without needing physical transportation, reducing security risks and logistical challenges. This can lead to more timely and efficient healthcare delivery. Secondly, telemedicine visits facilitate consultations with specialists who may not be readily available within the jail's local area, ensuring that inmates receive expert medical opinions and treatments. Lastly, these visits can improve inmate health outcomes by providing access to specialized care for complex medical issues.

## E-Consults

E-consults play a valuable role in jail healthcare by enabling secure and efficient communication between healthcare providers within the jail and external specialists. This technology allows the jail's medical team to electronically consult with specialists, including physicians, psychiatrists, and other experts, without physically transferring inmates to off-site facilities. Reserve Health's collaboration with AristaMD allows on-site providers to access the expertise of a nationwide network of specialists within 24 hours or less. Reserve Health uses AristaMD, an e-consult service with significant familiarity with correctional medicine.

# Specialty care without the risk. Improve quality and access to care at lower costs with eConsults.

Provider-to-specialist consultations, or eConsults, are simple, fast, and fit seamlessly into the corrections environment.

AristaMD eConsults bring the expertise and support of hundreds of board-certified specialty physicians in over 70 specialty areas directly to jails and prisons across the country.

By collaborating with specialists on patient cases, on-site providers can offer high-quality diagnoses and treatment for a wider variety of conditions thereby lowering off-site treatment risks and associated costs.

## Dangerous and costly challenges

Medical care in a correctional facility is rife with challenges:

- Lack of local specialists
- · Risk of medical liability
- High-cost, risk of transport and supervision
- Difficulty prioritizing diagnostics or offering an interim specialty care plan
- Short-term or unknown time in custody
- Lack of care continuity upon release or transfer



# Provider to specialist consults via a web-based platform.

Connect to specialists in a matter of hours to:

Ensure those in custody receive appropriate care.

Protect the community, staff and providers by offering care in the facility.

Minimize the risk of violence and escape by treating >70% of routine clinical issues on-site.

Realize cost savings related to security, transport and hospital or specialist visits.

Reduce exposure to medical liability with expert guidance from qualified specialists.



Request a demo. Contact us at info@aristamd.com.



#### SPECIALIST CONSULT SOLTIONS FOR CORRECTIONS

## Simple quality and cost calculations

To ensure inmates receive the quality specialty care they deserve, AristaMD offers a simple way to enable on-site providers to communicate with remote specialists and receive advice in a matter of hours. This same platform can also control costs by reducing:

- Patient transports for non-procedural issues by up to 75%
- Legal liability by consulting with a specialist to determine whether a face-to-face visit is required.
- Emergency department usage
  - Address issues at less acute stages.
  - Offer interim care plans to support short-term custody situations.

# Costs add up Savings for a single referral

\$795 = Provider charges

3 specialist visits (evaluation, diagnostics, treatment)

\$450 = Transportation charges

\$150 per visit for 3 visits

\$330 = Security support

2 hours, 2 team members for each visit to the specialist

Example Cost Savings \$1,575

# eConsults: How corrections provides specialty care

### Objectives and advantages:

**Deliver faster specialist access** Realize immediate improvements in specialty care access times by eliminating coordination of custody and transportation.

#### Decrease the cost of care

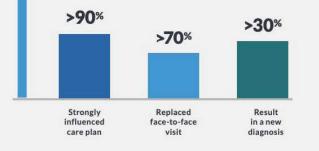
Lower staffing needs with fewer transports to specialists, workups, hospitalizations and ED visits.

#### Improve outcomes

0

Obtain expert advice to prioritize diagnostics, develop interim care and treatment plans and know when face-toface evaluation or urgent care is needed.

# Proven to add value for the facility, provider and patient:



Request a demo. Contact us at info@aristamd.com.



## **Nursing Services**

Nursing services in a jail setting are multifaceted and critical to the overall healthcare delivery within the correctional environment. These services must be tailored to address the unique healthcare needs of the inmate population.

- Intake Assessments
- History and Physicals
- Sick Calls and Triage
- Wound Care
- Bedside Infirmary Care
- Emergency Responses (BLS, CPR, and ACLS Certified)
- Collaboration with Providers
- Medication Management
- Coordination with Outside Facilities
- Health Education and Counseling
- Documentation and Record Keeping
- Infection Control

In the jail, nursing services require adaptability, strong clinical skills, and the ability to work in a challenging environment. Nurses must balance the facility's security demands with the inmate population's healthcare needs, providing compassionate and comprehensive care.

Training and supporting nurses to be effective in a correctional facility requires a multifaceted approach that encompasses specialized education, ongoing professional development, and robust support systems to address the unique challenges of the correctional setting. Firstly, initial training should include a comprehensive orientation program covering the legal and ethical aspects of correctional healthcare, safety and security procedures, managing communicable diseases, and identifying and treating mental health issues. This foundational training equips nurses with the knowledge and skills necessary to navigate the complex environment of a correctional facility, ensuring they can provide high-quality care while maintaining personal safety and adhering to legal and ethical standards.

Beyond initial training, continuous professional development opportunities are essential for nurses working in correctional facilities. This can include workshops, seminars, and courses focused on emerging healthcare trends, advances in prison healthcare, and strategies for managing challenging inmate behaviors. Access to professional counseling and peer support groups can also be critical in supporting nurses, helping them manage the stress and emotional challenges of working in a correctional environment. Establishing mentorship programs where experienced correctional nurses guide and support newer staff can enhance competency and confidence, fostering a learning and professional growth culture. Supporting nurses in correctional facilities also means providing them with the resources and tools necessary to perform their duties effectively. This includes access to up-to-date medical supplies and technology, comprehensive inmate health records, and effective communication channels with other healthcare professionals and correctional staff. Ensuring nurses have a clear understanding of their roles and responsibilities, along with the authority to make clinical decisions, empowers them to act in the best interests of their patients. By investing in the training and support of nurses, correctional facilities can improve the quality of healthcare provided to inmates, reduce healthcare disparities within the correctional system, and create a safer, more positive work environment for nursing staff.

## **Infirmary Services**

Sometimes, inmates require care and support that cannot be reasonably delivered within a general population housing unit. In these instances, the higher levels of care that can be delivered in an infirmary environment are imperative so inmates can receive a standard of care comparable to that in the outside community.

The infirmary will be staffed by registered nurses trained in the higher acuity medical needs treated in this environment. The infirmary operates 24/7, ensuring that medical care is always available.

Registered nurses working in a jail infirmary require a unique set of skills to navigate the challenges of this environment effectively. Strong clinical skills are essential, as they must be able to assess and treat a wide range of medical conditions, often with limited resources. They must be proficient in emergency care, as urgent medical situations can arise without warning. Equally important is the ability to handle mental health issues, given the high prevalence of psychological disorders in the inmate population. Exceptional communication skills are vital, enabling the nurse to interact effectively with inmates who may have diverse backgrounds and varied levels of health literacy. Cultural competency is also crucial, as it helps provide care that respects the diverse backgrounds of the inmate population.

Moreover, all jail nurses must possess strong critical thinking and decision-making skills to operate effectively in high-stress situations. However, this is especially true of those assigned to an infirmary assignment. They must be adaptable resourceful, and maintain professional boundaries while showing empathy and compassion.

## **Dental Services**

Upon intake, inmates typically undergo an initial dental assessment to identify any urgent or pre-existing dental issues. Emergency dental care is a priority, and addressing acute problems like toothaches, infections, abscesses, and broken teeth is essential for relieving immediate pain and discomfort. An oral screening is also completed during the initial history and physical examination. Routine dental procedures, such as cleanings, fillings, extractions, and periodontal treatments, are provided to maintain oral hygiene and prevent the progression of dental diseases. Additionally, oral health education is an integral part of these services, focusing on teaching inmates about proper brushing, flossing, and overall oral care to reduce future dental problems. For those with chronic dental conditions, ongoing management and care are crucial to prevent complications. In cases requiring specialized expertise, referrals are made to dental specialists for complex procedures.

Adherence to health and safety standards, including stringent infection control measures, is mandatory to maintain high-quality care. Providing dental services respectfully and dignifiedly underscores the commitment to treating inmates with the same level of care expected in the community, affirming their rights and dignity.

On-site dental services will be provided at least 40-hours weekly by a qualified, licensed dentist and appropriately trained dental assistant. On-call dental advice will be available to nursing staff 24/7.

# Eye Care Services

Vision and eye health screening

Reserve Health's eye care program begins with our first interactions with the patient. At initial intake, nurses take a history and visually inspect the eye for any signs of injury or infection that require immediate attention. Subsequently, a more comprehensive eye evaluation, including distance and near vision screening, is performed at the patient's initial history and physical and at least annually after that.

## **Corrective Lenses**

Our medical staff works to facilitate access to corrective lenses for patients with visual correction needs. We work to gain access to the patient's corrective lenses at home. Often, family members can bring glasses in, and once inspected and approved by custody, they can be supplied to the patient. We recommend that reading glasses be made available through the commissary and can guide patients to the appropriate magnification level. Otherwise, we can

provide reading glasses through a copayment program or work with the facility's commissary vendor to have them added.

## Specialty Care

In some instances, a patient may present with eye care needs that exceed the capacity of the facility providers. We use our virtual and in-person specialty resources to meet patients' needs in those circumstances.

## Sick Call

1. inmate Education:

- During the intake process, inmates will be Informed about the sick call process, including the \$20 copayment system.

- We will also explain how to request medical attention and the emergency procedure.

- We will clearly state the \$20 copayment policy for non-emergency medical services. Still, we will also include provisions for waiving the copayment for indigent inmates, urgent needs, or other special circumstances.

## 2. Sick Call Request Process:

- inmates will be provided a straightforward method for requesting a sick call utilizing the jail's established kiosk system. Alternate accommodations will be made available for those unable to use the kiosk for any reason, including but not limited to intellectual, physical, literacy, or language barriers.

## 3. Medical Evaluation:

- A registered nurse will conduct a medical evaluation of the inmate within 24 hours after receiving a sick call request.

.4. Nursing Interventions:

• Nurses will work from nursing pathways, providing standing orders to treat common, minor complaints.

5. Provider Interventions:

• Any need falling outside these nursing pathways or when an inmate requests evaluation for a complaint that did not previously respond to nursing interventions will be referred to a provider for evaluation and treatment.

8. Emergency and Urgent Care:

- There is a clear distinction between emergency/urgent care and routine sick calls.

- We DO NOT apply copayments for emergency or urgent medical situations.

9. inmate Grievance Procedure:

- inmates will be provided a clear grievance procedure to contest charges or express concerns about medical care. These grievances will be reviewed by the Health Service Administrator with the support of the Medical Director when needed. They will receive a response within 24 hours M-F and each Monday if the grievance was placed during the weekend.

10. Regular Review and Compliance:

- The Director of Nursing will regularly review and audit the sick call process to ensure compliance with NCCHC standards and ethical guidelines.

- We will modify the protocol based on feedback, audits, and legal or healthcare standards changes.

11. Staff Training and Education:

- Routine training for correctional and medical staff on the sick call protocol, emphasizing ethical and legal aspects of inmate healthcare, will be conducted

## Mental Health

At Reserve Health, we take pride in pioneering mental health services within the jail system, and understanding inmates' unique challenges. Our approach is rooted in compassion and professionalism, ensuring that each individual receives the utmost care and attention. We provide a comprehensive range of mental health services, including thorough psychological assessments, brief individualized counseling, and crisis intervention, all tailored to meet the specific needs of the incarcerated population.

Our team of experienced mental health professionals is trained in various therapeutic techniques, ensuring effective treatment and support for a variety of mental health conditions. We prioritize creating a safe and confidential environment where inmates can openly discuss their issues and receive support. Our commitment at Reserve Health is to maintain and improve

the mental well-being of those in our care, reflecting our dedication to the highest standards of mental health services in the correctional setting.

All inmates who have been identified with mental health needs or who have requested services are seen through a variety of mechanisms. Those with acute needs are prioritized and managed immediately. Crisis intervention services and suicide precautions are available 24/7.

inmates receive clinical assessments, individual counseling, and psychotropic medication management. inmates are counseled regarding the risks and benefits of psychotropic medications and sign a written consent before treatment.

A standard operating procedure is followed when commitment or transfer to an inpatient psychiatric facility is required. In instances when an involuntary commitment is required, a court order is requested by Reserve Health staff. All transfers are facilitated in a timely manner while ensuring the patient's safety until care is transferred outside of the jail.

Reserve Health's Mental Health Department routinely collaborates with medical, dental, and substance abuse services to ensure an integrated approach to care.

Reserve Health manages a suicide prevention program that aligns with NCCHC standards and industry best practices. Staff will work with custody partners to maintain safety for inmates who pose a risk to themselves or others. At-risk patients will be immediately placed on a suicide watch. People under suicide watch are put into an environment where it would be difficult for them to hurt themselves. Any dangerous items will need to be removed from the area. These inmates are stripped of anything with which they might hurt themselves or use as a noose. We rely on the support of our custody partners for staggered observations of these patients.

While we want to ensure patients remain safe, it is important to recognize that inmates need to be removed from suicide watch, given safe clothing and restrictions reasonably removed as soon as it is safe to do so. Being on a suicide watch can be uncomfortable and embarrassing to inmates and presents its own set of problems if employed indiscriminately or in excess. It also has the potential to pull needed resources away from other inmates when custody, mental health, and medical staff are occupied with an excessive volume of suicide watches. For these reasons, it is critical that a thorough assessment of each patient is conducted by highly trained mental health staff to ensure appropriate decisions regarding the continuation of watches. Our staff conducts face-to-face assessments within 24 hours of the suicide watch initiation and daily until the patient is safely removed from observation.

## **Pharmacy Services**



Reserve Health Dr. Daniel Biondi 650 S Tryon ST Suite 440 Charlotte, NC 28202

Dear Dr. Biondi:

Diamond Pharmacy Services understands that Reserve Health is submitting a response for Gaston County's Contract for Jail Medical Services. This letter serves as confirmation of our mutual intent regarding the provision of medical and pharmaceutical services.

Diamond is currently serving the medication dispensing and pharmacy program management needs of nearly 700,000 inmate lives in over 1,800 correctional facilities in 49 states, including 15 in North Carolina. Diamond's 53 years of experience providing institutional care, and 40 years of correctional experience make us highly qualified to meet the needs of our clientele. We will work with Reserve Health to provide innovative technology solutions, enhanced clinical services, accurate reporting, reliable delivery, as well as industry leading operational program management to Gaston County's facilities.

Should Reserve Health be awarded the contract for Jail Medical Services, this Letter of Intent expresses our willingness as an independent contractor to work with Reserve Health and maintain a collaborative relationship in the provision of medication dispensing and pharmacy program management services to this population.

Diamond has a strong working relationship with Dr. Biondi and we look forward to working with your company to maintain complete and exceptional care for both the Gaston County Jail and the Gaston County Jail Annex.

Sincerely,

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Mark J. Zilner, R.Ph. President and Chief Executive Officer <u>mzilner@diamondpharmacy.com</u> Office: 800.882.6337 ext. 1003 Fax: 877.234.7050

Diamond Pharmacy Services + 645 Kolter Drive + Indiana PA 15701-3570 + 1.800.882.6337 x1003 + fax 877.234.7050

### 9. Level of Service

#### **I. Pharmaceutical Services**

I. Provisions for pharmaceutical services to assure the availability of prescribed medications within eight (8) hours of the order of issue being written. Pharmacy services, and emergency pharmacy services, consistent with State and Federal laws and/or regulations, monitored by a licensed, qualified pharmacist must be maintained.

#### **Pharmacy Services for the GCJ and Annex**

Reserve Health has selected Diamond Pharmacy Services to be our pharmaceutical partner for the Gaston County jail and Annex(GCJ). In the correctional pharmacy industry, Diamond is a provider that truly sets itself apart from the rest by delivering the most reliable and cost-effective pharmacy services while always doing what is best for the inmate patients that will be entrusted to Reserve Health's care.

Reserve Health appreciates that Diamond embraces their role as the industry leader and honors their responsibility to innovate the delivery of adult and juvenile correctional pharmaceutical services in terms of technology, daily operations, online reporting, clinical services, strong formulary management, and cost avoidance initiatives.

As you know from working with Diamond at the GCJ continuously from 2011 until the present, Diamond provides responsive pharmacist account management, consistent experienced technicians that will be committed to GCJ, a dependable delivery model, an established interface with CorEMR, accurate and meaningful reporting, utilization management and analysis, cost-avoidance strategies, clinical consultations, and an emphasis on regulatory compliance.

Whether you need a report, consultation, pricing, specialty medications, backup support, or technology troubleshooting, Diamond provides an expedient and thorough response to those needs. In concert with RFP evaluation standards, Diamond has the reputation, financial condition, experience, record, personnel, equipment, facilities, and organization to meet and exceed all of our medication dispensing and pharmacy program management services to the Gaston County jail and Annex.

As a 13-year pharmacy provider to GCJ, Diamond has a firm understanding of North Carolina Administrative Code and the pharmacy components of this solicitation, which will allow them to provide comprehensive pharmaceutical services at the highest level to Reserve Health and GCJ.

Reserve Health can count on Diamond and their 40 years of correctional pharmacy experience to effectively manage our pharmacy program, to quickly and effectively deal with the unexpected, and to ensure compliance with regulatory and accrediting bodies like no other pharmacy in the correctional industry.

#### Stock Cards That Satisfy the 8-Hour Delivery Requirement

Provisions for pharmaceutical services to assure the availability of prescribed medications within eight (8) hours of the order of issue being written.

To meet the needs of GCJ's requirement, Diamond supplies the majority of commonly prescribed medications as stock. This allows inmates to begin treatment immediately and has worked well at GCJ for many years. Diamond Distribution is properly licensed as a North Carolina wholesaler for legend stock distribution.

Diamond currently works with GCJ staff to manage a customized order form that lists all the stock items (prescription and OTC) your facility uses. Each form contains a list of the items with complete descriptions and package sizes. When a clinician needs to order medications using the form, they simply indicate the quantity needed next to each item, sign the form, and submit the order.

#### **Stock Accountability**

Cards for administration of emergency stock can be provided by Diamond.

As GCJ knows, a system of accountability is especially important. To reconcile all stock doses, Reserve Health will continue to use Diamond's inventory flow sheets or a stock binder/book to record and document each dose administered from a stock card.

When stock is depleted, our facility staff will transmit the completed accountability sheet to Diamond to reconcile doses. Medications are reordered as needed by submitting the peel-off reorder label, or the stock order form, to Diamond by fax or electronically.

Diamond's system of stock accountability complies with all National Commission on Correctional Health Care (NCCHC) patient safety standards and American Correctional Association (ACA) guidelines.

#### **Stock Diversion Prevention**

To differentiate medications while preventing diversion, over the counter (OTC) and legend items are packaged in **blue blister cards** and controlled-substance medications are packaged in **red blister cards**. To help reduce diversion further, Diamond requires that both the prescriber and a member of the nursing department sign any order forms for stock controlled-substance medications before Diamond distributes them.

Pharmacy services, and emergency pharmacy services, consistent with State and Federal laws and/or regulations, monitored by a licensed, qualified pharmacist must be maintained.

#### Compliance - Not to Be Taken for Granted

Diamond meets or exceeds all applicable local, state, federal, and Boards of Pharmacy laws, rules, regulations, and quality standards. They follow the guidelines established by the following:

- U.S. Drug Enforcement Administration (DEA)
- U.S. Food and Drug Administration (FDA)
- U.S. Department of Justice (DOJ)
- U.S. Environmental Protection Administration (EPA) regarding medication disposal
- U.S Department of Transportation (DOT) regarding hazardous medication standards
- Drug Quality and Security Act (DQSA) regarding counterfeit medication standards
- Health Insurance Portability and Accountability Act (HIPAA) regarding privacy
- North Carolina Board of Pharmacy rules and regulations
- 10A NCAC 14J specific to jail operations
- American Correctional Association (ACA)
- National Commission on Correctional Health Care (NCCHC)
- The Joint Commission (formerly JCAHO)
- NABP's Accredited Drug Distributor Certification (formerly Verified-Accredited Wholesale Distributor -VAWD) regarding distribution of stock medications

All correctional pharmacy service providers are expected to comply with federal, state, and local regulations and standards; however, regulatory compliance across the industry is not always the case. Because Diamond holds itself to a higher standard:

- Their customers receive superior service
- Your patients benefit from industry-leading top-quality care, and
- GCJ will continue to be in regulatory compliance. To our understanding, GCJ has never been fined or subject to disciplinary action because of the pharmacy management program.

Diamond has been a valuable resource to help GCJ navigate applicable laws, rules, and regulations with respect to inmates' rights to health care.

#### **State Boards of Pharmacy**

Diamond is licensed in good standing in the state of North Carolina as a non-inmate pharmacy.

#### U.S. Drug Enforcement Administration (DEA)—Controlled Substance Medication Dispensing Compliance

Diamond is registered with the U.S. Drug Enforcement Administration (DEA) to dispense controlled substance medications in Schedules II–V. Both Diamond Distribution and Diamond Pharmacy follow the DEA "know your customer" laws. This entails validating all DEA numbers against a third-party DEA database prior to dispensing/selling any controlled substance medication.

These processes give us peace of mind that our prescribers are following best practices for prescribing controlled substances as well as monitoring for any questionable activity.

# U.S. Food and Drug Administration (FDA) and North Carolina Licensure as a Wholesale Distributor that Ensures Regulatory Compliance

Diamond is properly licensed as a wholesaler to distribute prescription stock medication in the state of North Carolina. This status is important, as GCJ regularly receives most legend medications as stock.

Federal law and many state laws restrict pharmacies from dispensing more than 5% of their overall gross dollar sales as stock. The federal 5% rule applies to all sales of legend stock medications by a particular pharmacy to all their customers combined, not just the legend stock sold to GCJ.

Diamond knows that they dispense more than 5% of their gross sales as stock for correctional facilities nationwide. For this reason, Diamond complies with rules and regulations established by the U.S. Food and Drug Administration (FDA) and North Carolina wholesaler laws.

Diamond prides itself on keeping all their customers in regulatory compliance at their expense, not yours.

#### U.S. Food and Drug Administration (FDA)—FDA-Registered Repackager that Ensures Regulatory Compliance

Although bidders' compliance with federal and state regulations regarding medication repackaging is expected, the burden for ensuring compliance prior to a contract award falls on your evaluation committee prior to issuing a recommendation for award.

This is important because a wholesaler or pharmacy must use an FDA Registered Repackager to legally sell the GCJ medications not in the original manufacturer packaging. Otherwise, the wholesaler OR pharmacy can only sell legend stock medications to GCJ in the original high-cost manufacturers' bulk bottles.

Vendors that cannot accommodate this may only sell legend stock medications in the original manufacturers' bulk bottles. This requires facilities to use multi-dose bottles which are unsanitary, and which typically come in quantities of 500 or 1000 to achieve the same pricing point yet are not eligible for credit.

Diamond is aware that most correctional institutions house first-dose, interim, or routine supplies of legend stock medications. Therefore, Diamond was the first industry provider to establish a wholly owned subsidiary FDA registered repackager – RemedyRepack.

Their use of RemedyRepack permits them to distribute legend stock medications legally in blister packs and other packaging in addition to bulk bottles so that Reserve Health may effectively manage the cost of stock medications. We encourage your evaluation team to verify the name of the FDA Registered Repackager each respondent will utilize to ensure regulatory compliance at the time of their proposal evaluation.

Diamond has invested significant resources to comply with FDA regulations in the repackaging of prescription stock from bulk bottles into manageable 30count blister cards as a cost benefit to their clients.

#### Not All Pharmacies Seek the Same Accreditation Standards

#### NCCHC and ACA

NCCHC and ACA do not offer an accreditation specific to pharmacy services. Diamond follows NCCHC and ACA standards when conducting medication room inspections of their client correctional institutions. In 40 years of correctional pharmacy experience, there has never been a Diamond client to lose NCCHC or ACA accreditation because of the medication dispensing and pharmacy program management services. Diamond is a resource to their clients regarding compliance with both ACA and NCCHC standards related to pharmacy.

#### National Association of Boards of Pharmacy (NABP) Accredited Drug Distributor

Diamond has voluntarily taken the steps necessary in becoming an Accredited Drug Distributor (formerly Verified-Accredited Wholesale Distributor -VAWD) which is the nation's most stringent accreditation for drug wholesaling. To our knowledge, Diamond is the only national provider in the correctional pharmacy industry that has sought and obtained Drug Distributor accreditation.

The National Association of Boards of Pharmacy (NABP) and the state boards of pharmacy developed the Accredited Drug Distributor program to help protect the public from counterfeit, adulterated, and substandard drugs, and the initiative received the support of U.S. Food and Drug Administration (FDA).

The accreditation process includes a comprehensive review of a company's policies and procedures, inspection guidelines, and employee education and requires all employees to have a detailed and thorough understanding of pedigree compliance.

So why is a Drug Distributor Accreditation so important to GCJ and your patients? Before medications reach GCJ and your patients, they can change hands multiple times in the supply chain. Sometimes ingredients are sourced from one country, packaged in another, and repacked in a third. With the likely volume of stock medication on hand at GCJ, this accreditation is important.

Within the distribution channel, drugs may bounce from one manufacturer to several different wholesalers before finally ending up at GCJ. Despite regulatory efforts to track prescription drugs through the supply line, the truth is the supply line is in fact susceptible to counterfeiting, contamination, and diversion.

Ways stock medications can be compromised in the drug channel include:

- Contamination
- Storage in unsanitary or non-temperature-controlled conditions
- Illegal importation that evades inspection
- Previously dispensed drugs re-entering the drug channel
- False documentation
- Counterfeiting

Drug Distributor Accreditation ensures that stock medications distributed by Diamond to GCJ and your patients are safe prescription medications. Wholesalers distributing first dose and stock medications to GCJ that are not Drug Distributor Accredited could harm your patients.

#### **Emergency Prescriptions are Coordinated by Diamond**

Emergency medications not found in GCJ's first-dose starter packs and unavailable from Diamond in sufficient time are provided in a minimum quantity by a local backup pharmacy in the immediate area.

Due to Diamond's size and volume, they have aggressive national contracts with most chain pharmacies and are willing to negotiate with any pharmacy of your choice. Diamond recommends retaining Medical Center Pharmacy for your urgent medication needs unless GCJ wishes to make a change. If so, Diamond can negotiate with any backup pharmacy of your choice.

When GCJ needs an emergency prescription that is not available from stock on hand, Reserve Health staff will fax or electronically transmit the prescription to Diamond's Stat Line, which is staffed and available 24/7/365. When Diamond receives the order, they contact the backup pharmacy and arrange for the emergency prescription to be at GCJ within 2-4 hours.

By submitting stat/emergency orders to Diamond, GCJ can be sure to receive these prescriptions in the agreed-upon quantities at the agreed-upon back-up pharmacy-contracted rate. Diamond's ability to provide direct electronic claim transmission from the local backup pharmacy keeps costs at a minimum and ensures that your staff does not incur a charge if your employees pick up emergency orders.

Emergency prescriptions also can be delivered directly to your facility using the local pharmacy's delivery service or a taxi or courier service that has been pre-arranged by Diamond, at your request.

If GCJ staff phones Diamond with an emergency order, they are transferred immediately to a dedicated customer service technician or a pharmacist who can expedite your stat/emergency need. If you call after hours, Diamond's answering service patches your call through to one of their on-site pharmacists. Diamond regularly schedules pharmacists at their pharmacy 24 hours a day – every day of the year.

Jonathan Previte, PharmD-Executive Consultant Pharmacist

Jonathan Previte, PharmD has been GCJ's Executive Consultant Pharmacist since 2011, and will continue to be GCJ's point of contact for pharmacy issues.

Jon has served as an Executive Consultant Pharmacist and representative for correctional facilities throughout the United States. He oversees contracts with major medical groups, the U.S. Marshals Service, and state departments of corrections. His work involves setup and conversion to Diamond's system as well as formulary development and ongoing day-to-day facility maintenance. He provides oversight of the facilities, including policies and procedures as well as medication utilization review.

In addition to the daily oversight of pharmacy operations at his assigned facilities, he has successfully introduced and implemented electronic ordering, reconciliation, reporting, and medication management systems to his Diamond clients. His experience covers facilities in many disciplines of correctional pharmacy, such as adult correctional facilities , county jails and detention facilities, juvenile facilities, female institutions, mental health treatment units, intake centers, and correctional hospital facilities. Experience has no substitute, and Jon has a comprehensive knowledge and understanding of the correctional pharmacy industry.

#### Experience

- Correctional Clinical Consultant Pharmacist, Diamond Pharmacy Services (2001-Present)
- Retail Pharmacist, CVS Pharmacy, 2001

#### Licenses

• Registered Pharmacist in Pennsylvania and Virginia

#### Leadership Experience

- Gaston County jail (2011-Present)
- Arizona Department of Corrections Executive Consultant Pharmacist (2019-Present)
- Minnesota Department of Corrections Executive Consultant Pharmacist (2014-Present)
- MTC Medical Executive Consultant Pharmacist (2006-Present)
- U.S. Marshals Service (USMS) National Managed Care Contract Pharmacy Program Executive Consultant Pharmacist (2010-present)
- Pennsylvania Department of Corrections Assistant Executive Consultant Pharmacist (2003-Present)

#### Education

- PharmD, Duquesne University, Mylan School of Pharmacy, 2001
- Specialty Concentration in Pharmacy Management

#### Responsibilities

- Overseeing daily pharmacy operations in managed facilities, assuring efficient and effective operations
- Monitoring drug regimens and treatment therapies for inmates
- Implementing electronic ordering, reconciliation, and medication management systems
- Maintaining formulary exception and prior authorization processes
- Maintaining liaison with Diamond-serviced facilities
- Analyzing and reporting clinical and financial data
- Communicating and assessing pharmacy performance metrics
- Inspecting medication rooms
- Serving as a member, with effective participation and contributions, of the following:
- Facilities' CQI committees
- Formulary committees
- P&T committees
- Resolving facility-level issues or concerns

- Identifying areas where system modifications or changes could result in operational improvements
- Collaborating with facility management for regulatory reporting and other projects and outcomes
- Staying abreast of industry and pharmacy practices that can better serve customers
- Providing educational services to clients
- Providing custom reporting

# Monthly Statistics. Narrative reports shall be submitted by the tenth (10th) calendar day of each month to the jail Administrator, the Chief Deputy jail Administrator and the Sheriff's Office Business Services Administrator

Analyzing monthly utilization, formulary management trends, medication expenditures, clinical service metrics, polypharmacy information, and our clinicians' overall prescribing habits is critical for effectively managing your budgetary dollars as well as ensuring proper care. Both the facility and administrative levels need accurate and dependable reporting, where data is presented in a user-friendly and easy-to-understand format.

Diamond's high-quality reports reflect the needs of their customers. In their 40 years of correctional experience, Diamond has learned that listening to their customer suggestions is the best way to provide excellent service. They collaborate with prescribers, nurses, and administrators from clients nationwide to develop reports that provide information based on your operation's requirements.

Reserve Health and GCJ will have access to over 300 standard reports/charts. However, Diamond can customize and create reports to meet your specific needs. Data fields include patient name, inmate/patient number, correctional facility, provider name, date of service, prescription number, medication name, medication class, medication strength, quantity dispensed, number of days supplied, and drug cost. Basic, ad hoc, requested, and customized reports are all provided at no additional cost.

The Vendor shall be required to pass-on to the Gaston County Sheriff's Office any pharmacy manufacturers and or drug wholesaler's rebates, coupons and or discounts that apply to the medications that are provided to the pharmacy servicing the Gaston County jail patient's prescriptions.

Diamond is the nation's largest provider of correctional pharmacy services and has the largest purchasing power in the industry. Diamond purchases their medications from Cardinal Distribution, a nationally recognized distributor, and from several manufacturers and generic distributors. They also participate in national group purchasing organizations (GPOs) that further negotiate favorable drug pricing for Diamond.

With 85% to 90% of your pharmacy spend directly tied to the acquisition cost of medications, purchasing power matters. As with any commodity, the more a pharmacy purchases, the lower the acquisition cost. Diamond spends hundreds of millions of dollars on medication purchases annually and uses a combination of rebates, discounts, market share volume, and opportunity purchases to lower the front-end cost of medications and does not provide post purchase rebates or discounts.

Recording the administration of medications in a manner and on a form approved by the health care authority to include documentation of the fact that inmates are receiving and ingesting their prescribed medications. Documentation will also be required when a patient's ordered medication was not administered, and the reason given.

To our understanding, GCJ is utilizing CorEMR for electronic prescription order entry and eMAR. Diamond is one of CorEMR's original partners dating back to December 2011.

A very active and successful self-medication / Keep on Person (KOP) program is in place. It is the request of the Gaston County Sheriff's Office to maintain this program.

Diamond has years of experience coordinating and consulting clients regarding KOP or self-medication systems. If you wish to continue operating an existing KOP system, Reserve Health and Diamond will work in conjunction with the GCJ to help coordinate the KOP program.

#### Value and Benefit Provided by Diamond

We believe most of the services and products listed below are unique to Diamond and separates their program and services from other pharmacies that may be subcontracted by other respondents.

24/7/365 Hours of Operation	Diamond is always open to exceed all your clinical or operational consulting needs. They have regularly scheduled pharmacist on site at their corporate pharmacy 24/7/365.	
Multiple Clinical Pharmacist Specialists	A Certified Diabetes Educator, an Anti-coagulation specialist, and an Adverse Drug Reaction Coordinator currently on staff that provide many cost and clinical benefits to our customers.	
Compounding Department	Five (5) accredited compounding pharmacists allow Diamond to provide most compounding in-house instead of outsourcing to a third party that delays medication administration and typically at a higher cost.	
Office of Pharmacy Therapeutics and Integrated Clinical Services (OPTICS)	education. These include Board-Certified Pharmacotherapy Specialist (BCPS),	
HIV Pharmacist with AAHIVE accreditation	Diamond's infectious disease expert reviews patient regimens daily for appropriateness and cost-effectiveness of their HAART protocols for HIV as well as Hepatitis C therapy management.	
Compound IV Department	Allows your patients to begin therapy quickly since most IV medications can be prepared in-house at Diamond as compared to outsourcing this service to a third party and at a higher cost. Diamond's IV team also tracks each IV patient from therapy initiation to completion to assure proper labs are drawn and dosage adjustments are made when necessary.	
True-Unit Dose Blister Card Packaging	Diamond's commitment to unit-dose blister cards ensures patient safety and more credit on medications that are returned to Diamond. As you know, all pharmacies are reclaiming medications to be re-dispensed if they are offering credit. We believe the extensive use of unit-dose blister cards is unique to Diamond.	
340B Program Management	Diamond's two (2) 340B Diamond pharmacist experts have years of 340B regulatory and operational experience to proactively explore potential covered entity partnerships for our clients to lower overall medication cost spending and improve patient care.	
U.S. Food and Drug Administration (FDA) and State Licensure	Diamond is licensed as a wholesale distributor in North Carolina for stock distribution of first dose and starter stock on-hand at GCJ. This is an important requirement to remain in compliance if you wish to maintain a supply of stock medications and a key differentiator that separates Diamond from the rest of the industry.	
U.S. Food and Drug Administration (FDA) Registered Repackager	Unique to Diamond is the ability to legally provide cost-effective stock medications in repackaged in 30-count blister cards for easy administration. It would be assumed that all vendors assure regulatory compliance with this requirement; however, this is not always the case and a fantastic opportunity for your review committee to review during the evaluation process.	
Drug Quality and Security Act of 2013 (DQSA) compliance	Diamond ensures supply line integrity in the distribution of stock medications by adhering strictly to DQSA wholesale requirements. This ensures that all the medications currently in your medication areas have been acquired from a reliable supply line and are not counterfeit.	

NABP Drug Distributor Accredited	Diamond voluntarily sought and earned NABP Drug Distributor Accreditation. This accreditation ensures the highest industry standards and helps to ensure the products dispensed are not counterfeit. To our knowledge, this accreditation is attainable by other industry providers if they wish to invest in the accreditation process, but for whatever reason only Diamond has made this commitment among industry providers.
Web-based Online Reporting Program	Diamond introduced the online reporting dashboard to the correctional pharmacy industry so their customers can access reports 24/7/365 from any computer with internet access. Diamond is the industry leader regarding online reporting and this functionality is provided to Diamond customers at no additional cost.
Web-Based Electronic Reconciliation Program	Diamond's electronic reconciliation program helps to account for every piece of product shipped to and returned from a facility while also saving a significant amount of time and improving staff productivity. Again, a software solution provided to Diamond customers and no additional cost.
Sapphire CPOE/eMAR	Optional Benefit: Sapphire is a correctional specific electronic prescription order entry and eMAR software that is provided to Diamond customers at no additional cost when Diamond is your primary pharmacy, and all orders are transmitted through the program. Unlike other order entry and eMAR software, Sapphire is correctional specific and has been designed with input from experts within the correctional healthcare industry.
Electronic Prescribing of Controlled Substances	Diamond's Sapphire software is electronic prescribing of controlled substance (EPCS) certified, ensuring compliance with state/federal statutes regarding controlled substance medication ordering.
Continuity of Care Voucher Discharge Program	Diamond assists with medication continuity of care medications upon inmate discharge and re-entry into the community. Having a bridge supply of medications is important to ensure that the therapeutic gains are achieved while incarcerated are not lost during discharge due to lack of medication access. Diamond has developed a process where inmates on medication therapy are provided a voucher upon release that will allow them to receive up to a 30-day supply of medications written at the facility at a pharmacy of their choice billed to the facility at not out of pocket to the patient Successful re-entry programs helps to decrease recidivism.
Covid Preparedness	Diamond's clients did not experience any service disruptions due to Diamond's proactive response to Covid from 2019 to 2022.
Additional Brick and Mortar Locations	Diamond has four (4) satellite pharmacy locations as part of their corporate structure allowing them to provide uninterrupted services in the face of disaster. It is important to know that your patients will receive their medications even if the contracted pharmacy is beset with a disaster and cyber-attack?

#### **USMS Billing is Handled by Diamond**

Diamond is a Heritage Health Solutions participating pharmacy and has been a preferred pharmacy partner with Heritage Health Solutions since January 2010. We have worked with them since their inception in 2005 and currently at over 100 correctional institutions across the country, including Gaston County. We have a full understanding of their operations and procedures.

Prescriptions for U.S. Marshals Service (USMS) detainees are noted by GCJ at the time those orders are submitted to Diamond. Diamond routes these prescriptions for online adjudication and reimbursement prior to dispensing so those costs do not hit your invoice. Diamond's third-party billing department monitors these claims daily for any rejections or outstanding non-formulary medications. Diamond works directly with the Heritage Health Solutions customer service department and GCJ for prior authorization, when needed. Diamond has a pharmacist assigned directly to the Heritage account to best service USMS detainees' needs, which happens to be your Diamond Executive Consultant Pharmacist – Jon Previte PharmD.

# Medication Administration

1. Preparation Phase:

- Verify Medication Orders: A protocol will be in place to ensure all medication orders are current and verified by a licensed healthcare provider.

- We recommend four scheduled medication passes between 8 am and 10 pm. We work with our custody partners to schedule medication passes in a way that meets patients' needs without disrupting security operations.

2. Medication Organization:

- Organize Medications: Medications will be organized in a secure, locked cart or area..

- Review Medications: All medications will be double-checked against each inmate's medication administration record (MAR).

3. inmate Identification:

- Verify inmate Identity: A wristband or other reliable identification method will verify the inmate's identity before administering any medication.

- inmate Medical Records: The medication technician will review the inmate's medical history and allergies.

4. Medication Administration:

- The medication technician will follow the "Five Rights\*: Right patient, right medication, right dose, right route, and right time.

- Documentation: The medication technician will record the administration of each medication in the MAR immediately after giving it.

- Observe Ingestion: The medication technician will ensure inmates ingest their medications, particularly those with potential abuse.

5. Handling Special Situations:

- Refusal of Medication: If an inmate refuses their medication, the patient will be educated about the risks of missed medication. A signed refusal will be recorded in the patient's chart.

- Side Effects or Reactions: Any side effects or adverse reactions will be documented and appropriate medical management rendered.

6. Security Measures:

- Maintain Security: All staff will ensure that security protocols are followed during medication passes to maintain the safety of both staff and inmates.

- Controlled Substances: Two staff members will take extra precautions with controlled substances, including counting and double-checking.

7. Post-Administration Review:

- Audit and Compliance: The Director of Nursing will audit medication administration records for accuracy and compliance with jail policies and healthcare standards.

- Continuous Training: We will provide staff with ongoing training and updates on medication policies and procedures.

8. Emergency Protocols:

- Establish Emergency Procedures: We will have clear procedures for handling medical emergencies during medication passes.

9. Confidentiality and Privacy:

- Ensure Privacy: We respect inmate privacy during medication administration by administering medication to a single inmate. Those waiting must maintain an adequate distance to afford the inmate being treated with appropriate confidentiality.

# **Medication Formulary**

Reserve Health utilizes a medication formulary to achieve effective, safe, and efficient healthcare delivery within the correctional setting. Our formulary establishes a standardized list of medications approved in the facility. This standardization helps in ensuring consistency in treating various health conditions among inmates. We can better control costs by limiting the available medications to those on the formulary. We include generic or cost-effective medication alternatives that are equally effective but less expensive than brand-name drugs. This promotes the use of medications that are known to be safe and effective.

Using a standardized list of medications can help reduce medication errors and adverse drug interactions. By having a predefined list of medications, healthcare providers are more familiar with the drug profiles, dosages, and potential side effects, which enhances patient safety.

Additionally, in a jail setting with numerous security and logistical considerations, having a formulary simplifies the processes of prescribing, dispensing, and administering medications. The formulary allows us to have a focused list of medications, allowing us to more efficiently manage our inventory, reduce waste, and ensure the availability of essential medications.

Despite an effective formulary, there will always be instances when an inmate legitimately requires medication outside of the approved medication formulary. Reserve Health uses a fast, efficient system for the medical director to approve necessary medications, and our pharmacy relationships ensure timely delivery of non-formulary medications.

A draft formulary can be found in Appendix B.

# Drug and Alcohol Detox

Developing a safe and effective detoxification program for opiates and alcohol within a jail setting requires a comprehensive, multi-disciplinary approach. The program should address both the medical and psychological aspects of addiction and withdrawal, ensuring inmate safety and preparing them for long-term recovery.

Upon entry into the facility, we conduct thorough medical and psychological assessments, including substance use history. Once we identify individuals requiring detoxification, we evaluate the severity of their dependence and withdrawal risks. Once placed into a detox protocol, Reserve Health ensures that trained medical personnel, including nurses and providers, are available to monitor and manage withdrawal symptoms.

For opiate detoxification - Use Medication-Assisted Treatment (MAT) such as methadone or buprenorphine for opiate detoxification to manage withdrawal symptoms and cravings. Providers taper the medication according to individual needs and responses to treatment.

For alcohol detoxification, Reserve Health utilizes benzodiazepines (such as chlordiazepoxide or diazepam) to manage alcohol withdrawal symptoms, reducing the risk of severe complications like seizures or delirium tremens. A tapering schedule is utilized to wean the inmate off the medication gradually.

For both opiate and alcohol detoxification, we provide supportive care, including hydration, nutrition, and treatment of concurrent medical conditions. Staff administer vitamins and supplements, particularly thiamine for alcohol-dependent individuals, to prevent complications like Wernicke-Korsakoff syndrome. Regular assessments of withdrawal symptoms using standardized tools like the Clinical Opiate Withdrawal Scale (COWS) or the Clinical Institute Withdrawal Assessment for Alcohol (CIWA-Ar) are utilized according to best practices.

Treatment plans are based on the severity of symptoms and each individual's response to medication.

All inmates enrolled in opiate or alcohol detoxification are offered counseling and psychological support during detoxification. Importantly, we address underlying mental health disorders that may coexist with substance use disorders.

It is critical that we ensure that detoxification protocols align with the security protocols of the jail and that staff monitor for and manage any behaviors that may pose a risk to the individual or others.

# Medication-Assisted Treatment (MAT)

## XXX

## **Support Services**

Reserve Health has established a comprehensive system for providing ancillary medical services to meet the diverse healthcare needs of its population within the correctional facility. Here's an overview of the arrangements:

## Laboratory Services

- Reserve Health staff are responsible for drawing blood and collecting other lab specimens directly at the jail.

- These samples are then sent out to LabCorp for processing. This partnership ensures timely and accurate lab results, crucial for diagnosing and managing various health conditions.

- The process is streamlined to maintain the security and safety of inmates and staff while ensuring the integrity of the samples.

## Radiology and Imaging Services

- Reserve Health contracts with a mobile `service provider for X-rays and ultrasounds.

- This service allows imaging equipment to be brought into the facility, minimizing the need for off-site transfers, which can be logistically challenging and pose security concerns.

- The mobile service provider is equipped to perform various diagnostic imaging procedures onsite, facilitating prompt diagnosis and treatment planning.

- When more advanced imaging is required and approved through our utilization review process, arrangements are made at an appropriate outpatient imaging center or acute care facility.

## **Dialysis Services**

- Reserve Health coordinates care with local dialysis centers for inmates requiring dialysis.

- There is a focus on prioritizing facilities where the patient is already established to provide continuity of care and maintain treatment consistency.

- This coordination includes managing logistics for secure and safe transportation to and from the dialysis centers, ensuring that the inmates receive necessary care without disruption.

## Physical Therapy Services

- Reserve Health offers in-house physical therapy services within the facility.

- This service is particularly beneficial for inmates with injuries, post-surgical rehabilitation needs, or chronic conditions that require physical therapy.

- Having in-house services reduces the need for external referrals, enhancing the correctional environment's safety and security.

## Coordination and Communication

Effective communication and coordination are key to managing these ancillary services. Reserve Health ensures that all external providers are informed about the specific needs and constraints of the correctional environment. Regular updates and communication between Reserve Health staff and external providers ensure continuity of care and adherence to treatment plans.

By establishing these arrangements, Reserve Health ensures that inmates have access to a broad range of necessary medical services while maintaining the security and operational integrity of the correctional facility. This integrated approach to healthcare delivery exemplifies Reserve Health's commitment to providing comprehensive, high-quality medical care in a challenging environment.

## In-House Testing

At a minimum, Reserve Health maintains in-house testing, including electrocardiograms, urinalysis, urine pregnancy tests, fingerstick blood glucose, peak flow meters, spirometry, stool blood tests, rapid COVID tests, rapid flu tests, and strep tests.

## **Emergency Response**

### 1. Response Activation

Once the jail's emergency signal system alerts the staff, our on-site medical team is dispatched to the emergency location. Our target is a 4-minute response time.

### 2. Scene Assessment

Our medical team will quickly evaluate potential risks to the medical team, other inmates, and staff.

### 3. Medical Assessment and Intervention

Medical personnel perform an initial assessment and provide immediate care as needed. This includes life-saving measures, including CPR, respiratory support, stopping bleeding, administering Narcan or other appropriate emergency medications, or other necessary critical interventions. Staff will stabilize the patient for transport if required.

### 4. Communication

Staff will keep the control center and relevant authorities informed about the situation and actions taken. If necessary, staff will notify external emergency services for advanced medical support.

## 5. Documentation

A medical team member will be assigned to record the events and interventions in detail, including time notations. After the patient has been adequately stabilized or transported from the facility, staff will document the incident in detail, including the nature of the emergency, the response, and the outcome on the appropriate incident report forms and in the inmate's medical record.

### 6. Post-Incident Review

In serious medical emergencies, leadership staff will conduct a debriefing session with all involved personnel to review the response and identify areas for improvement. In some circumstances, it will be necessary for Reserve Health to offer counseling services to staff or inmates affected by the incident.

## 7. Training and Drills

We will conduct regular training for staff on emergency response protocols and perform mock emergency drills to ensure preparedness and identify any gaps in the response plan.

8. Continuous Improvement

Reserve Health will regularly review and update the emergency response protocol based on new information, incidents, or changing circumstances.

## Care of Pregnant Females

Creating a comprehensive care plan for pregnant females in a county jail involves coordination among various healthcare professionals, jail staff, and community resources to ensure both the health and safety of the pregnant inmate and the unborn child. Given that the medical providers on-site are primarily trained in primary care with basic training in caring for pregnant females and managing emergency deliveries, the plan will prioritize regular off-site care with specialists in obstetrics and gynecology. Here's a suggested plan:

1. Initial Assessment and Intake Screening

- Perform a thorough medical evaluation upon intake to identify pregnancy and assess gestational age, health status, and any special needs or risks.

- Initiate prenatal vitamins and any necessary medications immediately, based on the initial assessment.

2. Development of a Care Plan

- Create an individualized care plan based on the initial assessment, including dietary needs, exercise, prenatal care schedule, and mental health support.

- Address any substance use disorder utilizing protocols specific to pregnancy.

- Ensure all prescription and nonprescription medications are appropriate in pregnancy.

- The care plan should be reviewed and updated regularly as the pregnancy progresses.

3. Coordination of Off-Site Prenatal Care

- Arrange for regular off-site visits to an OB/GYN for routine prenatal care, including ultrasounds, gestational diabetes screening, and monitoring for any pregnancy-related complications.

- Ensure transportation to and from these appointments is secure and respects the inmate's dignity.

4. On-Site Support and Education

- Provide education on pregnancy, labor, delivery, and postpartum care through individual counseling.

5. Emergency Preparedness

- Train jail staff and primary care providers to recognize signs of labor and pregnancy complications and provide initial emergency care if needed.

- Establish protocols for emergency transportation to a hospital equipped for deliveries and pregnancy-related emergencies.

## 6. Mental Health and Social Support

- Offer access to mental health professionals for support with the emotional and psychological aspects of pregnancy, especially as they relate to being incarcerated.

- Connect inmates with social services that can provide support during incarceration and after release, including parenting resources, substance abuse programs, and housing assistance.

## 7. Postpartum Care

- Plan for postpartum medical care for the mother, including monitoring for complications, managing postpartum depression, and providing contraception counseling.

## 9. Training for jail Staff

- Provide training for jail staff on the special needs of pregnant inmates, including dietary requirements, the importance of prenatal appointments, and handling emergencies.

- Educate jail staff on the NCCHC standards for the use of restraints in pregnant females and those women in the postpartum period.

10. Legal and Ethical Considerations

- Review and comply with all legal requirements and ethical guidelines regarding the treatment of pregnant inmates, ensuring access to necessary healthcare services and humane treatment.

# Technology

Reserve Health is an active participant in local Health Information Exchanges, providing realtime access to medical records from many local acute care facilities, specialty clinics, and primary care offices. This includes Atrium Health, Novant Health, Tryon Medical Partners, and Caromont Health. Additionally, we utilize a technology service that allows us to access to the past 6 of prescriptions medications filled at the vast majority of retial pharmacies. This allows us immediate insight into the patient's medical history and medication needs. This means our nurses' time can be spent in useful patient-facing tasks since their time will no longer be spent waiting on phone-hold for a pharamcy staff member. We will no longer need to wait days to receive faxes in response to release of information requests. Leveraging these modern technology improves efficiency and effectiveness in the care we deliver.

# **Data Analytics**

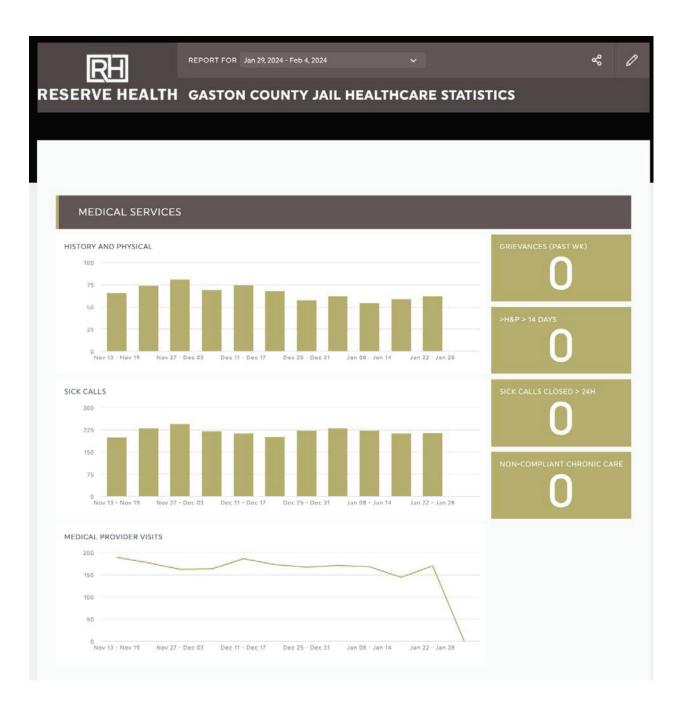
## Advanced Data-Analytics

At the core of our service is a sophisticated Electronic Medical Record platform. By leveraging this, we can identify trends and patterns in inmate health needs, forecast future healthcare requirements, and optimize resource allocation. This helps in strategic planning and enhances the effectiveness of health interventions, contributing to better inmate health outcomes.

## **Robust Reporting**

Reserve Health's system is designed to streamline your reporting processes. Our comprehensive and proprietary reporting tools offer meaningful insights into healthcare services within your facility. This includes detailed reports on inmate health status, treatment plans, and medication management. We aim to provide transparency and accountability in inmate healthcare, simplifying the complex task of managing health records in a correctional environment.

We are able to develop meaningful and convenient reporting specific to your facility's needs so that useful information is available at your fingertips. A Healthcare Statistics dashboard is customized to your specifications so that trends and key performance indicators are easily identifiable with a glance. Here we have demonstrated a version of such a dashboard with artificial data. In the live version, hovering over any point of a chart or graph will illustrate more detailed information and numerical values. This is simply an example of a dashboard and can be customized to your specifications.









# **Quality Assurance and Utilization Review**

Reserve Health's utilization review process is a key component of our services. We continuously evaluate the healthcare services provided to inmates, ensuring they are necessary, efficient, and in line with contemporary medical standards. We aim to ensure that the Gaston County Sheriff's Office receives the best value for its investment in inmate healthcare while maintaining the highest standards of care.

Our commitment to integrating technology with healthcare means we are constantly innovating to meet the unique challenges faced by your facility. Partnering with Reserve Health means investing in a future where inmate healthcare is not just a mandatory service but a model of efficiency and quality.

The Site Medical Director reviews these services, which require approval before execution:

- Non-formulary medication prescriptions
- Non-emergent off-site care
- Imaging Services

The Site Medical Direct reviews these services immediately upon notification, but pre-approval is not required to avoid delays in care.:

- Emergent off-site care
- Inpatient Hospitalizations

# Key Perrformance Targets

Responsibility	NCCHC Standard	Reserve Health Standard
Receiving Screening	immediate	immediate
Intake Assessment	24 hours	4 hours
Initial Health Assessment	14 days	7 days
Initial Mental Health Assessment	14 days	7 days
Initial Dental Assessment	14 days	7 days
TB Screening	14 days	at intake
Instructions on Health Services	24 hours	24 hours
Instructions on oral Hygeine	14 days	7 days
Initial Chronic Care Visit	14 days	10 days
Follow Up Chronic Care	at least every 90 days	at least every 90 days
Sick Call Evaluation	24 hours	24 hours
Initial Suicide Watch Provider	unspecified	12 hours

Suicide Risk provider Re- Evaluation	unspecified	24 hours
Isolation Assessment	12 hours	12 hours
Segregation Assessment	3 times weekly	3 times weekly
Initial Mental Health Provider Visit	1 week	1 week
Infirmary Assessments	daily	daily
Emergency Response	timely	4 minutes
Time to First Med Dose	timely	8 hours
Healthcare Professional CE	12 hours	20 hours
Staff completion of orientation	90 days	30 days
Officer Health Related Training	Every 2 years	Annually
inmate Grievances	timely	48 hours

# **Officer Training**

Here's a list of some of the officer training we have offered in the past:

1. Emergencies: Training staff in handling emergencies effectively.

2. Mental Health Awareness: Understanding common mental health issues in a correctional setting and how to address them compassionately.

3. Substance Abuse Recognition: Training to recognize signs of substance abuse and withdrawal in inmates.

4. Infection Control: Educating staff on how to prevent the spread of infectious diseases, including COVID-19.

5. Handling Bloodborne Pathogen: Training on safely handling blood and other potentially infectious materials.

6. Stress Management: Techniques to manage personal stress and recognize stress in colleagues and inmates.

7. Suicide Prevention and Intervention: Training to recognize signs of suicidal ideation and how to intervene effectively.

8. De-escalation Techniques: Skills for de-escalating potentially violent or tense situations, especially involving inmates with mental health issues.

9. Nutritional Health: Understanding the importance of nutrition in a correctional setting for staff and inmates.

10. Physical Fitness: Encourage physical fitness to maintain staff's physical and mental health.

11. Disability Awareness: Training on interacting with and accommodating inmates with physical or mental disabilities.

12. Cultural Competency: Education on understanding and respecting diverse cultural backgrounds and practices among inmates.

13. Emergency Response Planning: Training in emergency protocols for fires, natural disasters, or major health crises.

14. Occupational Health and Safety: Education on maintaining a safe work environment to prevent workplace injuries.

15. Confidentiality and Ethics in Healthcare: Understanding the importance of confidentiality and ethical conduct, especially regarding inmate health information.

# Standard for Interactions with Correctional Staff

At Reserve Health, our approach to interactions with correctional staff is grounded in respect, collaboration, and understanding of our unique role within the correctional environment. We

firmly believe in establishing a partnership in the care of inmates while recognizing and respecting the boundaries of our position as guests in the Sheriff's facility.

Key Principles:

Respect for Authority and Protocol: We acknowledge the authority of correctional staff and adhere strictly to facility protocols and procedures. Our interactions are always professional, demonstrating respect for the roles and responsibilities of the correctional staff.

Collaborative Approach: We strive for a collaborative relationship with correctional staff, recognizing that our joint efforts are crucial for the well-being and safety of inmates. This involves open communication, mutual support, and shared goals in inmate care.

Clear Communication: We maintain clear and transparent communication with correctional staff. This includes promptly sharing relevant health-related information about inmates, discussing care plans, and seeking input from correctional staff as appropriate.

Boundaries and Professionalism: While we are care partners, we also understand the importance of maintaining professional boundaries. We do not interfere with the security and operational aspects of the facility and ensure that our actions align with our primary role as healthcare providers.

Cultural Competence and Sensitivity: We approach every interaction with cultural competence and sensitivity, recognizing the diverse backgrounds of inmates and the correctional staff. This includes being mindful of language, customs, and perspectives.

Education and Training: Our staff receive ongoing education and training to understand the dynamics of the correctional setting, including the challenges and constraints faced by correctional staff. This ensures our team can effectively navigate and contribute positively to this unique environment.

Safety and Compliance: The safety of both inmates and staff is paramount. We comply with all safety protocols and work collaboratively with correctional staff to address any safety concerns related to inmate care.

Feedback and Improvement: We are committed to continuous improvement and welcome feedback from correctional staff. Regular meetings and discussions are held to evaluate our partnership and identify areas for enhancement.

# Organizational Capability

## Implementation

Reserve Health's Implementation Program aims to enhance your experience by establishing a personalized and proactive approach to support. Central to this program is the introduction of weekly calls between Reserve Health and the Gaston County Sheriff's Office. We commit to continuity and a deeper understanding of the facility's unique needs and preferences. These weekly calls serve as a mechanism to ensure a seamless transition to Reserve Health's services. They allow our team to update you on recent developments, gather feedback, and anticipate future requirements. This consistent interaction strengthens your relationship with Reserve Health and enables our team to provide customized solutions and timely support. The program is structured to be flexible, accommodating your staff's varying schedules and preferences. We want you to feel valued and supported by us at every step of your journey.

## **Transition Plan**

Month 1: Planning and Assessment Week 1: Initial Meeting and Documentation Review

- Objective: Establish a transition team, define roles, and strengthen communication channels

- Actions:

1. Meet with current and incoming service providers, jail administration, and other stakeholders

2. Review existing contracts, service level agreements (SLAs), and documentation of current healthcare services.

3. Schedule meetings with jail administration, healthcare staff, and other stakeholders to discuss the transition status.

4. Establish regular update meetings and reporting mechanisms.

5. Begin public communication strategies to inform about changes in healthcare services, if necessary.

Week 2: Needs Assessment and Infrastructure Evaluation

- Objective: Understand the healthcare needs of the inmate population and assess the current infrastructure.

- Actions:

1. Perform a comprehensive needs assessment to identify healthcare service gaps.

2. Conduct a comprehensive evaluation of existing healthcare staff and confirm recruitment needs..

3. Confirm IT Infrastructure needs

Week 3-4: Transition Planning

- Objective: Refine the transition plan, including timelines, responsibilities, and milestones.

- Actions:

1. Ensure the transition plan addresses staffing, training, equipment, IT systems, and compliance requirements.

2. Define clear milestones and deadlines for each phase of the transition.

3. Establish communication protocols among all stakeholders.

Week 4: Legal and Compliance Review

- Objective: Ensure the transition plan meets all legal, regulatory, and accreditation requirements.

- Actions:

1. Ensure the transition plan meets NC Medical Board, NC Board of Nursing, NC Board of Pharmacy, National Commission of Correctional Health Care, American Correctional Association, and Prison Rape Elimination Act requirements.

2. Consult with legal experts to ensure the transition plan complies with all applicable laws and standards.

3. Develop a compliance checklist for ongoing monitoring and evaluation.

Month 2: Implementation

Week 1-2: Order Placement and Logistics Planning

- Objective: Finalize orders for equipment, disposables, and pharmaceuticals and plan logistics for delivery and storage.

- Actions:

1. Place initial orders for medical equipment, disposables, and pharmaceuticals based on the needs assessment.

2. Coordinate with vendors on delivery schedules, ensuring all items arrive promptly and follow the transition timeline.

3. Plan for storing and inventory management of received supplies, considering space, security, and environmental conditions.

Week 3-4: Policy and Procedure Refinement

- Objective: Finalize and disseminate policies and procedures for healthcare services.

- Actions:

1. Update healthcare policies, procedures, and protocols to be facility-specific.

2. Review and update emergency response plans and continuity of care protocols.

3. Distribute documentation to all relevant staff and stakeholders; conduct training sessions as needed.

Month 3: Finalization and Handover

#### Week 1: Staffing and Training

- Objective: Begin staffing transitions and initiate training programs.

- Actions:

1. Finalize contracts and agreements with healthcare professionals and support staff.

2. Start orientation and training programs focused on correctional healthcare, safety protocols, and specific health needs.

3. Implement a mentoring and shadowing program for knowledge transfer between outgoing and incoming staff.

Week 2: Infrastructure and Technology Setup

- Objective: Upgrade and prepare healthcare facilities and IT systems.

- Actions:

1. Begin any necessary renovations or upgrades to healthcare facilities.

2. Install and test healthcare IT systems, including electronic health records (EHR) and telehealth services.

3. Ensure cybersecurity measures are in place for patient data protection.

Week 3: Final Review and Adjustments

- Objective: Conduct final reviews and make necessary adjustments.

- Actions:

1. Perform a comprehensive review of the transition process, identifying any areas for improvement or adjustment.

2. Finalize the handover of responsibilities from the outgoing provider to the incoming provider.

3. Ensure all staff are fully trained and all systems are operational.

4. Coordinate delivery and staging of all equipment and supplies.

Week 4: Equipment Installation and Setup

- Objective: Oversee the delivery and installation of medical equipment and the setup of storage areas for disposables and pharmaceuticals.

#### - Actions:

1. Coordinate with vendors and facility maintenance teams to install medical equipment, ensuring that all items are correctly set up and operational.

2. Organize storage areas for disposables and pharmaceuticals, implementing inventory management systems.

3. Conduct safety checks and equipment calibration as required to ensure operational readiness.

# Launch

During the handover, the outgoing medical staff will be asked to review inmates' health status and medical needs, highlighting any urgent care requirements, ongoing treatments, and scheduled medical appointments. This review should include discussing specific cases that require close monitoring, such as inmates with chronic conditions, psychiatric needs, or those in withdrawal from substances. Reserve Health leadership personnel will be present to help facilitate these interactions.

Reserve Health will ensure that medical records are carefully updated with the latest treatment information, medication administration records, and any incidents or notable events during the previous shift. This ensures that incoming staff have access to accurate and up-to-date information.

A comprehensive support staff will be present throughout the launch to ensure that all new protocols are followed and an efficient and effective workflow is quickly established within the new medical, mental health, and dental teams. This will require respectful communication with custody personnel to ensure they are fully aware of any changes to historical experiences.

We will ensure there are duplicative personnel so that transition and training needs do not interrupt daily operations and patient care.

Post-Launch: Monitoring and Evaluation

- Objective: Begin monitoring the implementation and prepare for ongoing evaluation.

- Actions:

1. Establish mechanisms for ongoing monitoring of healthcare services, staff performance, and inmate satisfaction.

2. Schedule the first evaluation of the new healthcare services within the next quarter.

3. Continue to engage with all stakeholders for feedback and make adjustments as necessary.

# Patient Communication

Change requires excellent communication and inmates can't be forgotten in that process. Here is a sample communication that could be provided to current inmates:

#### Dear Patients,

We want to let you know that there will be some new faces in our healthcare team here at the jail. This means that you might see different doctors and nurses than before when you need any health care.

We promise that these new team members are very kind and good at their jobs. They are here to make sure you stay healthy and get any medical help you need. If we do things in a different way we will explain the changes so you know what to expect.

If you have any questions or feel worried about this change, you can talk to us anytime. We are here to help and make sure you feel safe and cared for.

Take care,

Your Health Care Team

# Staffing

# Proposed Staffing Matrix

#### Medical Director (0.2 FTE)

The Medical Director oversees the entire healthcare operation within the jail, ensuring highquality medical care, compliance with healthcare standards, and effective clinical governance. A 0.2 FTE allocation reflects the part-time oversight required for a facility of this scale, focusing on policy development, staff supervision, and liaison with jail administration.

#### Physician (0.4 FTE)

A physician is critical for diagnosing and managing acute and chronic medical conditions. The 0.4 FTE allocation allows for regular, on-site medical consultations, ensuring inmates' healthcare needs are promptly and effectively addressed.

#### Nursing Director/Health Services Administrator (HSA) (1 FTE)

This role is pivotal in managing the nursing staff and coordinating all healthcare services within the facility. The full-time position ensures leadership is always available to address operational issues, staff concerns, and patient care quality.

#### Registered Nurse (RN) (8.4 FTE)

RNs are essential for day-to-day inmate healthcare, including medication administration, wound care, chronic disease management, and emergency response. The allocation of 8.4 FTEs ensures comprehensive 24/7 nursing coverage, catering to the diverse healthcare needs of the inmate population.

# Administrative Assistant (1 FTE)

This position supports the healthcare team by managing medical records, scheduling appointments, and ensuring the seamless flow of information. For space considerations, this position will spend a portion of their time on-site and a portion at our administrative offices.

#### Medical Records (1 FTE)

This position ensures all external medical records are quickly accessed and imported into each patient's on-site medical record. Additionally, requests for inmate medical records require prompt processing, particularly during inter-facility transfers and off-site trips. For space considerations, a secure e-fax will be set up at our administrative offices for this employee to work from.

Case Management/Referral Coordinator (1 FTE)

Critical for coordinating care beyond the jail, including specialist consultations and hospital care. This role ensures inmates receive necessary external healthcare services, facilitating appointments and managing follow-ups. For space considerations, a secure e-fax will be set up at our administrative offices for this employee to work from.

#### Medical APP (Physician Assistant/Nurse Practitioner) (1 FTE)

APPs complement the physician's care delivery, providing routine medical evaluations, treatments, and follow-up care. A full-time APP ensures high-quality primary care is accessible, enhancing the healthcare services' responsiveness and flexibility.

# Psychiatrist (0.25 FTE)

Given the high prevalence of mental health issues within the inmate population, a psychiatrist's part-time role is crucial for diagnosing, managing, and overseeing mental health care and medication management.

Psychiatric Mental Health Nurse Practitioner (PMHNP) (1 FTE)

The PMHNP provides daily psychiatric care and medication management, vital for inmates with mental health conditions. A full-time allocation ensures continuous mental health support and treatment.

Mental Health Professional/Licensed Clinical Social Worker (MHP/LCSW) (1 FTE) This role provides psychotherapy and counseling services, addressing inmates' complex emotional and psychological needs. A full-time position ensures adequate support for mental health and rehabilitation.

# Dentist (0.2 FTE)

Oral health is critical to overall health. A dentist's part-time role ensures inmates access to essential dental care, including examinations, treatments, and emergency dental services.

#### Dental Assistant (0.2 FTE)

Supporting the dentist, this role helps in providing efficient dental care and ensures that dental operations run smoothly. The part-time allocation is aligned with the dentist's FTE to optimize dental service delivery.

# Licensed Practical Nurse (LPN) (7 FTE)

LPNs support RNs and are crucial for providing basic medical care and ensuring the health and well-being of inmates. The allocation of 7 FTEs ensures substantial support for nursing operations, aiding in medication administration, patient monitoring, and other essential tasks.

This staffing matrix is designed to provide a comprehensive, multi-disciplinary healthcare team that can address the complex and varied healthcare needs of the Gaston County jail population, ensuring that all inmates receive timely, effective, and compassionate.

Position	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	On-Call*
			1	st Shift				
Medical Director	Variable	$\sim$						
Physician	0800-1700		0800-1700					$\checkmark$
Nursing Director/HSA	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			$\sim$
RN	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
Administrative Assistant	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Case Mgmt/Referral Coord.	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Medical Records	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			
Medical APP (PA/NP)	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			$\checkmark$
Psychiatrist		0800-1700		0800-1700				$\sim$
PMHNP	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			$\checkmark$
MHP/LCSW	0800-1700	0800-1700	0800-1700	0800-1700	0800-1700			Image: A start and a start
Dentist					0800-1600			$\checkmark$
Dental Assistant					0800-1600			
Booking RN	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
LPN 1	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
LPN 2	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	0700-1500	
			21	nd Shift				
Booking RN	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
LPN 1	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
LPN 2	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
Charge RN	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	1500-2300	
			3	rd Shift				
Booking RN	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	
LPN	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	
Charge RN	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	2300-0700	

Day Shift (Mon-Fri)	
Medical Director	0.2
Physician	0.4
Nursing Director/HSA	1
RN	1
Administrative Assistant	1
Case Mgmt/Referral Coord.	1
Medical Records	1
Medical APP (PA/NP)	1
Psychiatrist	0.25
PMHNP	1
MHP/LCSW	1
Dentist	0.2
Dental Assistant	0.2
Booking RN	1
LPN (Med Pass)	2
i	
Eve Shift (Mon-Fri)	
Booking RN	1
LPN	2
Charge RN	1
Night Shift (Mon-Fri)	
Booking RN	1
LPN	1
Charge RN	1
Day Shift (Sat, Sun)	
Booking RN	0.4
LPN	0.8
Charge RN	0.4
Eve Shift ( Sun- Sat)	
Booking RN	0.4
LPN	0.8
Charge RN	0.4
Night Shift (Sun-Sat)	
Booking RN	0.4
LPN	0.4
Charge RN	0.4
Total Staffing	23.65

# Staff Retention Rates

Staff Retention: Cha	arlotte Market
Position	2023 Retention Rate (%)
Medical Director	100%
Physicians	100%
Psychiatrists	100%
APPs	67%
Nurses	100%
Mental Health Professionals	100%
Radiation Technologist	100%
Physical Therapist	100%
Medical Assistants	67%
Managers	100%
Care Coordinators	100%
Exercise Physiologists	100%
Health Coach	100%
Administrative Assistants	75%

# Recruitment

A comprehensive recruitment process involving multiple stages can ensure the organization hires the most qualified, proficient, and culturally fitting candidates. Here's a detailed description of such a process, tailored for positions ranging from administrative to clinical positions within a healthcare or similar environment.

Stage 1: Initial Vetting of Qualified Resumes

Objective:

- To screen for candidates who meet the basic qualifications and have the potential to excel in the position.

Process:

1. Resume Submission: Candidates submit their resumes, cover letters, and other required documents.

2. Manual Review: Recruitment professionals conduct a detailed review of resumes to assess candidates' experiences, education, and skills against the job requirements.

3. Shortlisting: Identify a pool of candidates with qualifications, experience, and skills most closely aligned with the position's requirements for further evaluation.

Stage 2: Virtual Interviews

Objective:

- To evaluate candidates' proficiency, communication skills, and initial cultural fit, as well as to answer any questions they might have about the role or organization.

Process:

1. Scheduling Interviews: Shortlisted candidates are invited for virtual interviews via email or phone.

2. Conducting Virtual Interviews: Interviews are conducted through video conferencing tools. The panel may include HR representatives, the hiring manager, and potential team members.

3. Evaluation: Interviewers assess candidates' responses to behavioral and situational questions, their technical or clinical knowledge (if applicable), and their ability to communicate effectively.

4. Feedback Gathering: Interviewers compile notes and scores based on predefined criteria to determine which candidates should advance to the next stage.

Stage 3: In-person Interviews and Facility Tours

Objective:

- To further assess candidates' skills, cultural fit, and potential to integrate into the team, a deeper evaluation of clinical proficiency and preparedness to deliver high-quality care is conducted for clinical positions.

Process:

1. Scheduling In-Person Interviews: Finalists are invited to the facility for in-person interviews and tours.

2. Facility Tours: Candidates tour the facilities where they will work, highlighting the work environment and culture.

3. In-Person Interviews: A more in-depth interview is conducted, often with senior management or specialized clinicians present. This stage may include practical assessments, case studies, or presentations.

4. Clinical Questions (for clinical positions): Candidates are asked specific clinical questions or scenarios to evaluate their clinical judgment, knowledge, and ability to provide care.

5. Evaluation and Feedback: The interview panel reviews the candidates' performance, discusses their observations and selects the most suitable candidate(s) for the position.

Post-Interview Process

- Reference Checks: Conduct reference checks to validate the information provided by the candidates and gain insights into their work ethic and capabilities.

- Job Offer: Extend a job offer to the selected candidate, including details about salary, benefits, and start date.

- Onboarding: Upon acceptance, initiate the onboarding process to integrate the new hire into the organization effectively.

This process ensures a thorough evaluation of candidates, focusing on their abilities, cultural fit, and, for clinical positions, their readiness to provide high-quality care. Tailoring the interview questions and assessments to the specific requirements of the role ensures that the organization hires individuals who are not only qualified but also aligned with its values and goals.

# Job Descriptions

Position Title:	Dental Assistant
Position Summary:	The Dental Assistant assists the Dentist in providing oral care to inmates, managing dental office operations, and ensuring compliance with dental procedures and correctional facility policies

# EDUCATION, EXPERIENCE, AND SKILLS REQUIRED:

- High school diploma or equivalent.
- Completion of an accredited dental assisting program.
- Certification as a Dental Assistant, if required by the state.
- Previous experience as a Dental Assistant, preferably in a correctional facility, public health, or community dental setting.
- Basic Life Support (BLS) certification.
- Ability to pass a comprehensive background check and security clearance.
- Knowledge of dental instruments, procedures, and aseptic techniques.
- Proficiency in taking and processing dental radiographs.
- Strong organizational and administrative skills.
- Effective communication and interpersonal abilities.
- Ability to work effectively in a secure and challenging environment.

# **ESSENTIAL FUNCTIONS:**

The Dental Assistant must comply with current and future state, federal, and local laws and regulations.

- Dental Assistance:
  - Assist the Dentist during a variety of treatment procedures, including preparation and cleanup.
  - $\circ$   $\;$  Set up and sterilize dental instruments and equipment.
  - Take and process dental X-rays as required.
- Patient Care and Management:
  - Prepare patients for dental treatment and ensure their comfort.
  - Keep patients informed about dental procedures and oral healthcare.
  - $\circ$   $\;$  Assist in managing patient flow within the dental office.
- Office Administration:
  - Schedule appointments and maintain patient records.

- Manage dental office inventory and order dental supplies as needed.
- Ensure cleanliness and organization of the dental office.
- Infection Control and Safety Compliance:
  - Adhere to infection control protocols and guidelines.
  - Maintain a clean and safe clinical environment.
  - Ensure compliance with safety standards in a correctional facility.
- Collaboration and Teamwork:
  - Work closely with the dental team and other healthcare professionals.
  - Participate in staff meetings and contribute to team efforts.

The Dental Assistant will work in a dental office within a correctional facility, which requires adhering to strict security protocols. The position may involve exposure to various dental materials and requires adherence to safety guidelines. Flexibility in scheduling, including the possibility of shift work, may be required.

Physical activity requirements are based as follows:

Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

#### **JOB ACCEPTANCE:**

This job description has been reviewed with me and I have been given an opportunity to ask questions. If I have any questions later, it is my responsibility to seek clarification from my supervisor.

EMPLOYEE	WITNESS
Name:	Name:

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Position Title:	Administrative Assistant/Medical Records Clerk
Position Summary:	The Administrative Assistant/Medical Records Clerk will handle a variety of administrative tasks while also managing medical records.

# EDUCATION, EXPERIENCE, AND SKILLS REQUIRED:

- High school diploma or equivalent; associate's or bachelor's degree in healthcare administration, business, or related field preferred.
- Previous experience as an administrative assistant or medical records clerk, preferably in a healthcare setting.
- Familiarity with medical terminology and healthcare documentation.
- Proficiency in computer applications, including Microsoft Office and electronic health records systems.
- Ability to pass a comprehensive background check and security clearance.
- Strong organizational and multitasking skills.
- Excellent written and verbal communication abilities.
- Attention to detail and high level of accuracy.
- Ability to handle confidential information with discretion.
- Comfortable working in a correctional facility environment.

# **ESSENTIAL FUNCTIONS:**

The Administrative Assistant/Medical Records Clerk must comply with current and future state, federal, and local laws and regulations.

- Administrative Support:
  - Perform general administrative duties such as answering phones, typing, filing, and managing correspondence.
  - Schedule appointments and coordinate meetings for healthcare staff.
  - $\circ$   $\;$  Assist in preparing reports and presentations as required.
- Medical Records Management:
  - Accurately file and maintain physical and electronic medical records.
  - $\circ$   $\;$  Ensure the confidentiality and security of all medical records.
  - Retrieve medical records and information as requested by healthcare providers.
- Data Entry and Reporting:
  - Perform data entry tasks related to patient information, treatment plans, and medical histories.

- Generate and distribute regular reports as required by healthcare staff or facility administration.
- Liaison and Coordination:
  - Act as a liaison between healthcare staff, inmates, and other departments within the facility.
  - Coordinate with external agencies or providers as needed for patient care and record requests.
- Compliance and Quality Control:
  - Ensure adherence to healthcare policies, legal requirements, and accreditation standards related to medical records and administrative procedures.
  - Participate in audits and quality control activities for medical records and administrative processes.

The role is based in a correctional facility, requiring adherence to strict security protocols. The position may involve direct or indirect interaction with the inmate population. It requires a mix of sitting, standing, and moving around the facility.

Physical activity requirements are based as follows: Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

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#### EMPLOYEE

# WITNESS

Name:	Name:
Date:	Date:

Position Title:Advanced Practice Provider (Physician Assistant or Nurse Practitioner)Position Summary:The Advanced Practice Provider either a Physician Assistant (PA) or Nurse<br/>Practitioner (NP) plays a crucial role in providing primary and acute care to<br/>the inmate population, addressing a wide range of health issues.

#### EDUCATION, EXPERIENCE, AND SKILLS REQUIRED:

- Graduation from an accredited PA or NP program.
- Current licensure as a Physician Assistant or Nurse Practitioner in the state of employment.
- Certification from an appropriate national certifying body.
- Minimum of 2 years of clinical experience, preferably in primary care, emergency medicine, public health, or a correctional setting.
- Eligibility to obtain DEA registration and prescriptive authority in the state of practice.
- Excellent clinical skills with the ability to manage a variety of health conditions.
- Strong communication and interpersonal skills, with the ability to interact effectively with a diverse patient population.
- Ability to work independently with minimal supervision.
- Resilience and adaptability in a challenging and dynamic environment.
- Commitment to ethical practice and maintaining patient confidentiality.

#### **ESSENTIAL FUNCTIONS:**

The Advanced Practice Provider must comply with current and future state, federal, and local laws and regulations.

- Patient Care:
  - Perform comprehensive assessments, diagnose, and treat a variety of acute and chronic medical conditions.
  - Provide high-quality, evidence-based care to incarcerated individuals.
- Clinical Procedures:
  - Perform minor surgical procedures and other clinical duties as per the scope of practice and facility protocols.
- Collaborative Practice:
  - Work closely with physicians, nursing staff, and other healthcare professionals to ensure a coordinated approach to patient care.
- Chronic Disease Management:

- Manage and monitor inmates with chronic illnesses, providing ongoing care and education to optimize health outcomes.
- Health Promotion and Disease Prevention:
  - Implement and participate in health promotion, disease prevention, and health education activities within the facility.
- Emergency Response:
  - Assist in responding to medical emergencies within the correctional setting, providing urgent care and stabilization.
- Record Keeping and Documentation:
  - $\circ$   $\;$  Maintain accurate, timely, and confidential health records.
  - Document all patient encounters and treatments in accordance with facility policies.
- Regulatory Compliance:
  - Ensure compliance with federal, state, and facility health care standards and regulations.
- Patient Education:
  - Educate patients on managing their health conditions, medications, and preventive care strategies.

This position involves working in a secure correctional environment. The APP will be required to follow strict security protocols and may encounter challenging behaviors from the inmate population. Flexibility in scheduling, including the potential for on-call duties, is required.

Physical activity requirements are based as follows:

Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

# JOB ACCEPTANCE:

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

# Position Title: Charge Nurse

**Position Summary:** The Charge Nurse is responsible for overseeing the daily operations of the nursing department, providing clinical leadership, and ensuring the delivery of high-quality nursing care to the inmate population.

# EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Bachelor of Science in Nursing (BSN) is preferred; an associate's degree in nursing (ADN) is required.
- Current RN licensure in the state of employment.
- BLS certification; ACLS certification preferred.
- Minimum of 3 years of nursing experience, with at least 1 year in a supervisory or leadership role.
- Experience in a correctional facility, emergency, or critical care setting is highly desirable.
- Ability to pass a comprehensive background check and security clearance.
- Strong leadership and team management abilities.
- Excellent clinical nursing skills.
- Effective communication and interpersonal skills.
- Ability to make sound decisions in a fast-paced and potentially stressful environment.
- Adaptability to work within the unique conditions of a correctional facility.

# **ESSENTIAL FUNCTIONS:**

The Charge Nurse must comply with current and future state, federal, and local laws and regulations.

- Clinical Leadership and Supervision:
  - Supervise and mentor nursing staff, including Registered Nurses (RNs), Licensed Practical Nurses (LPNs), and nursing assistants.
  - Allocate nursing staff resources and assignments to ensure efficient and effective patient care.
  - $\circ$   $\;$  Lead by example in providing high standards of nursing care.
- Patient Care Management:
  - Oversee the assessment, planning, implementation, and evaluation of patient care.

- Ensure the nursing team delivers care in accordance with established policies, procedures, and standards of care.
- Collaborate with physicians and other healthcare providers to coordinate comprehensive care plans.
- Administrative Duties:
  - Participate in the development and implementation of nursing policies and procedures.
  - Manage nursing schedules, staffing levels, and overtime to ensure adequate coverage.
  - Oversee the preparation and maintenance of nursing records, reports, and other documentation.
- Quality Assurance and Compliance:
  - Monitor and evaluate the quality and effectiveness of nursing care.
  - Ensure compliance with all relevant healthcare regulations, standards, and facility policies.
  - Participate in audits, inspections, and continuous quality improvement initiatives.
- Training and Development:
  - Facilitate ongoing training and professional development of nursing staff.
  - Conduct performance evaluations and provide constructive feedback to nursing team members.
- Emergency Response:
  - Lead and coordinate the nursing response in emergencies within the facility.
  - Ensure the nursing team is trained and prepared for emergency protocols.

This position requires working in a secure correctional facility. The Charge Nurse may encounter a wide range of medical and psychiatric conditions and must be prepared to handle potentially stressful and volatile situations. The role may require shifts, including nights, weekends, and holidays.

Physical activity requirements are as follows:

Constant = 67-100% of work day,

Frequent = 34-66% of workday

Occasional = 33% or less of work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for extended periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

#### **JOB ACCEPTANCE:**

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

Position Title:

**Position Summary:** The Dentist performs a full range of dental services, from routine examinations to complex treatments, while adhering to the highest standards of dental care and correctional facility regulations.

# EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Doctor of Dental Surgery (DDS) or Doctor of Dental Medicine (DMD) from an accredited dental school.
- Valid state dental license and eligibility to practice dentistry in the state of employment.
- Minimum of 2 years of clinical experience in general dentistry.

Dentist

- Experience in a correctional facility, public health, or community dental clinic is preferred.
- Ability to pass a comprehensive background check and security clearance.
- Strong clinical skills and proficiency in a wide range of dental procedures.
- Excellent diagnostic and treatment planning abilities.
- Good interpersonal and communication skills, with the ability to interact effectively with a diverse inmate population.
- Understanding of the unique challenges of providing dental care in a correctional environment.
- Commitment to ethical and compassionate patient care.

# **ESSENTIAL FUNCTIONS:**

The Dentist must comply with current and future state, federal, and local laws and regulations.

- Dental Examinations and Treatment:
  - Conduct comprehensive dental examinations and assess the dental health needs of inmates.
  - Diagnose and provide treatment for various dental issues including cavities, gum diseases, and dental injuries.
  - Perform routine and complex dental procedures such as fillings, extractions, root canals, crowns, bridges, dentures, and other treatments.
- Emergency Dental Care:
  - Provide emergency dental care and pain management for acute dental issues.
  - Respond promptly to dental emergencies within the facility.
- Treatment Planning and Documentation:
  - Develop individualized treatment plans for inmates.

- Maintain accurate and detailed dental records, documenting all assessments, treatments, and follow-up care.
- Infection Control and Compliance:
  - Adhere to strict infection control protocols and ensure a clean and sanitary clinical environment.
  - Comply with all relevant healthcare regulations and standards specific to dental care in a correctional setting.
- Patient Education:
  - Educate inmates about oral hygiene, dental care, and preventive measures.
  - Encourage and promote good oral health practices among the inmate population.
- Collaboration and Coordination:
  - Collaborate with healthcare professionals, including medical and mental health staff, to provide integrated care.
  - Coordinate with external dental specialists for referrals and specialized treatments as needed.

The Dentist will work in a correctional facility, which involves adhering to security protocols and interacting with an inmate population. The role requires standard clinical hours but may include some on-call responsibilities for dental emergencies.

Physical activity requirements are based as follows:

Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

# **JOB ACCEPTANCE:**

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

Position Title: Director of Nursing

**Position Summary:** The Director of Nursing manages nursing staff, develops and implements nursing policies and procedures, and ensures the delivery of high-quality healthcare to the inmate population.

# EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Master's degree in Nursing, Healthcare Administration, or related field preferred.
- Current RN licensure in the state of employment.
- Minimum of 5 years of nursing leadership experience, ideally in a correctional facility, hospital, or public health setting.
- Demonstrated experience in managing a diverse nursing staff and developing healthcare programs.
- Ability to pass a comprehensive background check and security clearance.
- Strong leadership and organizational skills.
- Excellent communication and interpersonal abilities.
- Proficiency in healthcare management, policy development, and quality assurance.
- Knowledge of correctional healthcare systems and standards.
- Strategic thinking and problem-solving capabilities.

# **ESSENTIAL FUNCTIONS:**

The Director of Nursing must comply with current and future state, federal, and local laws and regulations.

- Nursing Leadership and Management:
  - Provide strong leadership and direction to the nursing staff, including Charge Nurses, RNs, LPNs, and nursing assistants.
  - Oversee recruitment, training, and retention of nursing personnel.
  - Conduct performance evaluations, provide feedback, and foster professional growth and development among staff.
- Policy Development and Implementation:
  - Develop, implement, and regularly review nursing policies, procedures, and standards of care to ensure compliance with national healthcare standards and legal requirements.
  - Ensure nursing practices are evidence-based and aligned with the overall healthcare objectives of the correctional facility.
- Quality Assurance and Compliance:

- Monitor and evaluate the quality and effectiveness of nursing care and services.
- Lead quality improvement initiatives and compliance with accreditation standards.
- Ensure adherence to infection control protocols and other safety guidelines.
- Budget and Resource Management:
  - Develop and manage the nursing department budget.
  - Oversee the procurement and allocation of supplies and equipment.
- Interdepartmental Collaboration:
  - Collaborate with other healthcare leaders and administrative staff to coordinate comprehensive healthcare services.
  - Act as a liaison between the nursing department and other facility departments, external agencies, and healthcare providers.
- Crisis and Emergency Management:
  - Coordinate nursing roles and responsibilities in emergency situations, including disaster preparedness and response.
  - Ensure nursing staff are adequately trained in emergency procedures and protocols.
- Reporting and Documentation:
  - Prepare and present reports on nursing activities, challenges, outcomes, and strategic initiatives.
  - Maintain accurate and comprehensive records related to nursing services.

The Director of Nursing will work in a correctional facility, which requires adherence to strict security and safety protocols. The position involves both office-based administrative work and regular interaction with healthcare staff and inmates within the facility.

Physical activity requirements are as follows:

Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

# **JOB ACCEPTANCE:**

This job description has been reviewed with me and I have been given an opportunity to ask questions. If I have any questions later, it is my responsibility to seek clarification from my supervisor.

EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

Position Title:	Health Services Administrator

**Position Summary:** The Health Services Administrator manages healthcare staff, ensuring quality medical, dental, and mental health care to inmates and maintaining compliance with healthcare standards and facility policies.

# EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Strong leadership and organizational skills.
- Excellent communication and interpersonal abilities.
- Proficient in healthcare management and administrative practices.
- Ability to handle complex and sensitive issues confidentially and professionally.
- Adaptability and resilience in a challenging and dynamic environment.
- Bachelor's degree in Nursing; Master's degree preferred.
- Minimum of 5 years of experience in healthcare management, with significant leadership experience.
- Experience in correctional healthcare, hospital administration, or public health administration is highly desirable.
- Knowledge of healthcare laws, regulations, and accreditation standards.
- Ability to pass a comprehensive background check and security clearance.

# **ESSENTIAL FUNCTIONS:**

The Health Services Administrator must comply with current and future state, federal, and local laws and regulations.

- Healthcare Management and Oversight:
  - $\circ$   $\;$  Oversee the day-to-day operations of the facility's healthcare services.
  - Ensure the delivery of high-quality, efficient, and cost-effective healthcare.
  - Develop and implement health care policies and procedures in line with best practices.
  - Contract compliance monitoring
- Staff Supervision and Development:
  - Manage and lead a diverse team of medical, dental, and mental health professionals.
  - Recruit, hire, train, and evaluate healthcare staff.

- Foster professional development and ensure staff compliance with continuing education requirements.
- Budget and Resource Management:
  - Develop and manage the healthcare budget, including resource allocation and financial planning.
  - Oversee procurement of medical supplies and equipment.
- Regulatory Compliance and Accreditation:
  - Ensure compliance with federal, state, and local regulations governing healthcare in a correctional setting.
  - Prepare for and manage audits and inspections from accrediting bodies.
  - Oversee medical record keeping according to all applicable laws and standards
  - Policy development, review, and enforcement
- Quality Assurance and Improvement:
  - Monitor healthcare services and implement quality assurance measures.
  - Analyze healthcare outcomes and data to identify areas for improvement.
  - Data gathering
- inmate Healthcare Coordination:
  - Oversee inmate health assessments, treatment plans, and access to necessary healthcare services.
  - Coordinate with external healthcare providers and agencies for specialized care and continuity of care post-release.
- Communication and Collaboration:
  - As the primary liaison for healthcare matters with facility administration, external agencies, and stakeholders.
  - Communicate effectively with staff at all levels within the correctional facility.

This position is based in a correctional facility, requiring the Health Services Administrator to work within a secure and controlled environment. The role involves administrative office work and interaction with healthcare staff, inmates, and facility personnel.

Physical activity requirements are as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods.

• Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

#### **JOB ACCEPTANCE:**

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

 Position Title:
 Licensed Practical Nurse (LPN)

 Position Summary:
 The Licensed Practical Nurse provides nursing care under the supervision of Registered Nurses (RNs) and physicians, focusing on patient assessment,

medication administration, wound care, and health education.

# EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Diploma, certificate, or degree from an accredited LPN/LVN program.
- Current LPN/LVN license in the state of employment.
- CPR certification.
- Preferably 1-2 years of experience in a correctional facility, hospital, or similar healthcare setting.
- Ability to pass a comprehensive background check and security clearance.
- Strong practical nursing skills and knowledge.
- Good assessment and observation abilities.
- Effective communication and interpersonal skills.
- Ability to work independently and as part of a team.
- Adaptability to work in a secure and challenging environment.

#### **ESSENTIAL FUNCTIONS:**

The Licensed Practical Nurse must comply with current and future state, federal, and local laws and regulations.

- Patient Care:
  - Conduct basic health assessments and monitor the health status of inmates.
  - Administer medications, injections, and treatments as prescribed.
  - Assist in wound care and other basic medical procedures.
- Support to RNs and Physicians:
  - Work under the direction and supervision of RNs and medical doctors.
  - Provide assistance in more complex medical procedures and emergency situations.
  - Communicate any changes in an inmate's condition to the supervising RN or physician.
- Health Education and Counseling:
  - Educate inmates on various health topics, including medication management, chronic disease management, and preventive health measures.
  - Provide emotional support and counseling to inmates as needed.

- Documentation and Record Keeping:
  - Maintain accurate and detailed medical records.
  - Document all nursing interventions and responses to care.
- Infection Control and Safety:
  - Adhere to infection control policies and protocols.
  - Ensure the safety and well-being of inmates during healthcare delivery.
- Collaboration and Communication:
  - Collaborate with a multidisciplinary team, including healthcare and correctional staff, to provide comprehensive care.
  - Communicate effectively with inmates, staff, and healthcare providers.

The LPN will work in a correctional facility, which may involve exposure to potentially volatile situations and a diverse range of medical and psychiatric conditions. The role may require shifts, including nights, weekends, and holidays.

Physical activity requirements are as follows: Constant = 67-100% of the workday, Frequent = 34-66% of the workday Occasional = 33% or less of the work day.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
- Occasional Pushing: Exerting up to 30 pounds of force occasionally and/or 20 pounds of force frequently and/or 10 pounds of force constantly to move objects.

#### **JOB ACCEPTANCE:**

This job description has been reviewed with me, and I have been given an opportunity to ask questions. If I have any questions later, it is my responsibility to seek clarification from my supervisor.

EMPLOYEE	WITNESS
Name:	Name:

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Position Title: Medical Assistant

**Position Summary:** The Medical Assistant assists medical providers in treating and managing patient care, with duties ranging from clinical assistance to administrative tasks.

### EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- High school diploma or equivalent.
- Completion of an accredited Medical Assistant program.
- Certification as a Medical Assistant (CMA) is preferred.
- Proven phlebotomy skills
- Previous experience in a medical assistant role, preferably in a correctional facility, hospital, or similar healthcare setting.
- Ability to pass a comprehensive background check and security clearance.
- Strong organizational and multitasking skills.
- Proficiency in clinical procedures, including phlebotomy and basic patient care.
- Excellent communication and interpersonal skills, with the ability to interact effectively with a diverse patient population.
- Knowledge of medical terminology and healthcare procedures.
- Computer literacy and familiarity with electronic medical records.

### **ESSENTIAL FUNCTIONS:**

The Medical Assistant must comply with current and future state, federal, and local laws and regulations.

- Clinical Assistance:
  - Assist healthcare providers during examinations and medical procedures.
  - Perform basic clinical tasks such as taking vital signs, collecting specimens, administering injections, and performing EKGs.
  - $\circ$   $\;$  Utilize phlebotomy skills to collect blood samples as required.
- Patient Preparation and Follow-Up:
  - Prepare patients for examinations and explain medical procedures.
  - Provide instructions to patients as directed by providers.
  - Assist in managing patient flow within the facility.
- Medical Records and Documentation:
  - Maintain and update medical records, ensuring accuracy and confidentiality.
  - Document medical histories and other relevant patient information.

- Assist with coding and filling out insurance forms.
- Equipment and Supply Management:
  - Ensure examination rooms are stocked with necessary supplies and equipment.
  - Maintain and sterilize medical instruments.
  - Manage inventory and order medical supplies as needed.
- Administrative Support:
  - Perform administrative duties such as answering phones, scheduling appointments, and managing correspondence.
  - Assist in the coordination of patient care and referrals.

The Medical Assistant will work in a correctional facility, which involves interaction with an inmate population and adherence to strict security protocols. The position may require standing for extended periods and handling biohazardous materials. Flexibility in scheduling, including the possibility of shift work, weekends, and holidays, may be required.

Physical activity requirements are as follows: Constant = 67-100% of the workday, Frequent = 34-66% of the workday Occasional = 33% or less of the workday.

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EMPLOYEE	WITNESS
Name:	Name:

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Position Title: Medical D
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**Position Summary:** The Medical Director has a wide range of responsibilities, overseeing the healthcare services provided to inmates. They ensure high-quality patient care, monitor budgets, and stay updated on medical trends.

## EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Medical Degree (MD or DO) from an accredited institution.
- Valid and unrestricted license to practice medicine in the state of employment, with experience in a clinical setting.
- Board certification or eligibility in Family Medicine, Internal Medicine, or a related field.
- Qualifications in healthcare administration.
- Experience in correctional healthcare or a similar environment is often preferred.
- Strong leadership, communication, and organizational skills.
- Deep understanding of the unique challenges of providing healthcare in a correctional setting.

## **ESSENTIAL FUNCTIONS:**

The Medical Director must comply with current and future state, federal, and local laws and regulations.

- Clinical Oversight:
  - Supervise the delivery of medical, psychiatric, and dental services to inmates.
  - Review and manage the quality of care.
  - Ensure compliance with national healthcare standards.
  - Develop protocols and guidelines for medical treatments.
- Staff Management:
  - Hire, train, and supervise medical staff, including doctors, nurses, and other healthcare professionals.
  - Ensure that staff are appropriately qualified, licensed, and trained in correctional healthcare.
- Policy Development and Implementation:
  - Develop health care policies and procedures that comply with state and federal regulations.

- Implement policies that ensure patient confidentiality and ethical medical practices.
- Budget Management:
  - Manage the healthcare budget for the facility, which includes overseeing the procurement of medical supplies and equipment and ensuring cost-effective delivery of healthcare services.
- Compliance and Accreditation:
  - Ensure the facility's healthcare services comply with state and federal regulations and standards.
  - Prepare for audits and inspections from accrediting bodies.
- inmate Health Management:
  - Oversee the management of chronic illnesses, infectious diseases, mental health disorders, and substance abuse issues among the inmate population.
  - Develop and implement preventive health programs.
- Emergency Response:
  - Develop and oversee emergency medical procedures and responses within the facility.
  - Handle on-site medical emergencies and coordinate with external emergency services when necessary.
- Liaison Role:
  - Act as a liaison between the correctional facility and external healthcare providers, government agencies, and other stakeholders.
  - Coordinate inmate transfers to external healthcare facilities.
- Reporting and Documentation:
  - Maintain accurate and confidential medical records.
  - Provide regular reports on healthcare activities, incidents, and outcomes within the facility.
- Continuous Improvement:
  - Continuously evaluate and improve the quality of healthcare services based on feedback, health outcomes, and new developments in correctional healthcare.

Physical activity requirements are as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

Position Title:	Mental Health Professional (Licensed Clinical Social Worker/Licensed Professional Counselor)
Position Summary:	
	The Mental Health Professional, either a Licensed Clinical Social Worker (LCSW) or a Licensed Professional Counselor (LPC), conducts assessments, provides counseling, and develops treatment plans for inmates with a variety of mental health issues.

## EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Master's degree in Social Work, Counseling, Psychology, or a related field from an accredited institution.
- Current licensure as an LCSW, LPC, or equivalent in the state of employment.
- Minimum of 2 years of professional experience in mental health counseling, preferably in a correctional, forensic, or community mental health setting.
- Experience with crisis intervention, cognitive-behavioral therapy, and other evidencebased treatment modalities.
- Excellent counseling and interpersonal skills, with the ability to engage effectively with a diverse inmate population.
- Knowledge of the psychological, social, and environmental factors affecting inmates.
- Strong assessment and diagnostic skills.
- Ability to work independently and as part of a team in a challenging environment.
- Strong ethical standards and respect for confidentiality.

### **ESSENTIAL FUNCTIONS:**

The Mental Health Professional must comply with current and future state, federal, and local laws and regulations.

- Mental Health Assessment and Counseling:
  - Conduct comprehensive mental health assessments of inmates.
  - Provide individual and group counseling sessions to address issues such as trauma, substance abuse, depression, anxiety, and other mental health conditions.
- Treatment Planning:
  - Develop and implement individualized treatment plans, in collaboration with other mental health professionals and medical staff.
- Crisis Intervention:

- Respond to and manage mental health crises within the facility, providing immediate support and intervention.
- Case Management:
  - Coordinate care and link inmates to appropriate services within and outside the facility, including preparing for post-release continuity of care.
- Program Development and Facilitation:
  - Develop and facilitate mental health and wellness programs and workshops for the inmate population.
- Interdisciplinary Collaboration:
  - Work as part of a multidisciplinary team, including psychiatrists, psychologists, nurse practitioners, and correctional staff, to provide comprehensive care.
- Documentation and Compliance:
  - Maintain accurate and confidential records of all clinical activities.
  - Ensure compliance with all professional standards, facility policies, and legal requirements.

The Mental Health Professional will work in a secure correctional facility, which may involve exposure to challenging behaviors and complex mental health conditions. Flexibility, resilience, and the ability to maintain professional boundaries are essential.

Physical activity requirements are based as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

### Position Title: Primary Care Physician

**Position**The Primary Care Physician provides comprehensive medical care to a diverse inmate**Summary:**population, managing a range of acute, chronic, and preventive medical conditions.

## EDUCATION, EXPERIENCE, AND SKILLS REQUIRED:

- Medical Degree (MD or DO) from an accredited institution.
- Valid and unrestricted license to practice medicine in the state of employment.
- Board certification or eligibility in Family Medicine, Internal Medicine, or a related field.
- Minimum of 2 years clinical experience, preferably including experience in a correctional, public health, or emergency setting.
- Ability to pass a thorough background check and obtain security clearance.
- Strong clinical and diagnostic skills.
- Excellent communication and interpersonal abilities.
- Ability to work independently and as part of a multidisciplinary team.
- Adaptability to work in a challenging and dynamic environment.
- Commitment to ethical medical practices and respect for patient confidentiality.

## **ESSENTIAL FUNCTIONS:**

The Primary Care Physician must comply with current and future state, federal, and local laws and regulations.

- Medical Evaluation and Treatment:
  - Conduct thorough medical examinations of inmates, and diagnose and treat a variety of illnesses and injuries.
  - Prescribe and administer medications as necessary.
- Management of Chronic Conditions:
  - Provide ongoing care for inmates with chronic medical conditions such as hypertension, diabetes, and asthma, ensuring consistent and effective management.
- Preventive Healthcare:
  - Implement and manage preventive health programs, including vaccinations, health screenings, and patient education on healthy lifestyles.
- Emergency Care:
  - Respond to medical emergencies within the facility, providing prompt and effective care.

- $\circ$   $\;$  Coordinate with external emergency services when needed.
- Health Records Management:
  - Maintain accurate and confidential health records for all patients.
  - Ensure documentation is compliant with facility policies and legal requirements.
- Collaboration and Coordination:
  - Work collaboratively with other healthcare professionals, including nurses, specialists, and mental health providers, to ensure a comprehensive approach to inmate health.
- Compliance and Standards:
  - Ensure that medical practices are compliant with all relevant laws, regulations, and standards of care.
  - Stay informed about current best practices in correctional healthcare.
- Patient Education:
  - Educate patients about health management and disease prevention, adapting communication to a range of literacy levels and diverse backgrounds.

This position may involve exposure to challenging behaviors and potentially hazardous situations. The physician will be required to adhere to strict security protocols and may be subject to irregular hours, including on-call responsibilities.

Physical activity requirements are based as follows:

Constant = 67-100% of the work day,

Frequent = 34-66% of the work day

Occasional = 33% or less of the work day.

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

Position Title:	Psychiatric Mental Health Nurse Practitioner (PMHNP)
Position Summary:	The Psychiatric Mental Health Nurse Practitioner assesses, diagnoses, and treats inmates with various mental health conditions, working under the supervision of a Psychiatrist and collaborating with a multidisciplinary team.

## EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Master's or Doctoral degree in Nursing from an accredited nursing program specializing in Psychiatric-Mental Health.
- Current licensure as a Nurse Practitioner in the state of employment.
- Board Certification as a Psychiatric-Mental Health Nurse Practitioner (PMHNP-BC).
- DEA registration and prescriptive authority in the state of practice.
- Minimum of 2 years of clinical experience in psychiatric nursing, preferably in a correctional, forensic, or community mental health setting.
- Excellent clinical skills with the ability to manage a variety of mental health conditions.
- Strong communication and interpersonal skills, with the ability to interact effectively with a diverse inmate population.
- Knowledge and understanding of the legal and ethical considerations related to psychiatric nursing in a correctional setting.
- Ability to work independently and as part of a multidisciplinary team.
- Resilience and adaptability, capable of working effectively in a challenging environment.

# **ESSENTIAL FUNCTIONS:**

The Psychiatric Mental Health Nurse Practitioner must comply with current and future state, federal, and local laws and regulations.

- Mental Health Assessment and Treatment:
  - Conduct psychiatric evaluations.
  - Develop and implement treatment plans.
  - Provide ongoing mental health care.
  - Prescribe medications.
  - Provide psychotherapy.
  - Monitor treatment effectiveness.
- Crisis Intervention:
  - Respond to mental health crises within the facility, providing immediate assessment, intervention, and stabilization.
- Collaborative Care:

- Work closely with psychiatrists, other nurse practitioners, and mental health professionals to ensure a coordinated approach to patient care.
- Participate in multidisciplinary team meetings and case reviews.
- Patient Education and Support:
  - Educate patients about their mental health conditions, medication management, and coping strategies.
  - Provide support and counseling to inmates to promote mental health and wellbeing.
- Program Development:
  - Assist in developing and implementing mental health programs and services within the correctional facility.
- Compliance and Quality Improvement:
  - Ensure that psychiatric services comply with all relevant laws, regulations, and best practices.
  - Participate in quality improvement initiatives to enhance patient care.
- Record Keeping and Reporting:
- Maintain accurate and confidential medical records.
- Document all patient encounters, treatments, and outcomes in accordance with facility policies and procedures.

This position is located within a secure correctional facility. The PMHNP may be exposed to challenging behaviors and situations. Strict adherence to safety and security protocols is required.

Physical activity requirements are as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
- Frequent Standing: Particularly for periods of time.
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my supervisor.

EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

## Position Title: Psychiatrist

**Position Summary:** The Psychiatrist provides psychiatric evaluation, diagnosis, and treatment to inmates, along with oversight of Advanced Practice Providers (APPs) working in the mental health unit.

## EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Medical Degree (MD or DO) with specialization in Psychiatry.
- Valid and unrestricted medical license to practice in the state of employment.
- Board Certification in Psychiatry.
- DEA registration with the authority to prescribe medication.
- Minimum of 3 years of psychiatric experience, with preference for experience in a correctional, forensic, or community mental health setting.
- Experience supervising and overseeing Advanced Practice Providers.
- Expertise in clinical psychiatry and understanding of the unique challenges faced in a correctional environment.
- Excellent diagnostic and treatment planning skills.
- Strong leadership and team management abilities.
- Effective communication skills, with the ability to interact compassionately with a diverse inmate population.
- Resilience and adaptability, with the ability to handle challenging situations.

## **ESSENTIAL FUNCTIONS:**

The Psychiatrist must comply with current and future state, federal, and local laws and regulations.

- Psychiatric Evaluation and Treatment:
  - Conduct comprehensive psychiatric evaluations.
  - Develop treatment plans.
  - Provide ongoing mental health care for inmates, including medication management and psychotherapy.
- Management of Mental Health Services:
  - Oversee the delivery of psychiatric services within the facility, ensuring highquality care and adherence to clinical guidelines.
- Oversight of APPs:

- Provide clinical supervision and oversight to Advanced Practice Providers, including Nurse Practitioners and Physician Assistants, within the mental health team.
- Mentore, conduct performance evaluation and ensure the effectiveness of psychiatric services provided by APPs.
- Crisis Intervention:
  - Respond to psychiatric emergencies within the facility, providing immediate assessment and intervention as required.
- Multidisciplinary Collaboration:
  - Work collaboratively with other healthcare providers, correctional staff, and administrative personnel to ensure a coordinated approach to inmate care and mental health treatment.
- Program Development and Implementation:
  - Participate in developing, implementing, and evaluating mental health programs and services within the facility.
- Training and Education:
  - Provide training and education to healthcare staff, correctional officers, and other personnel on mental health issues, treatments, and approaches to inmate care.
- Compliance and Quality Assurance:
  - Ensure psychiatric services are compliant with legal, ethical, and professional standards.
  - Participate in quality assurance and improvement activities.
- Record Keeping and Reporting:
  - Maintain accurate and confidential medical records.
  - Prepare reports and analyses related to psychiatric services and patient outcomes.

This position requires working in a secure correctional facility, with exposure to a population that may have complex and severe mental health issues. The Psychiatrist must adhere to strict safety and security protocols and be prepared to work in a potentially high-stress environment.

Physical activity requirements are as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

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EMPLOYEE	WITNESS
Name:	Name:
Date:	Date:

 Position Title:
 Registered Nurse (RN)

 Position Summary:
 The Registered Nurse provides comprehensive nursing care in various settings within the facility, including intake assessments, infirmary care, triage, and emergency response.

## EDUCATION, EXPERIENCE AND SKILLS REQUIRED:

- Associate's or Bachelor's degree in Nursing from an accredited nursing program.
- Valid RN license in the state of employment.
- Minimum of 2 years of nursing experience, preferably in a correctional, emergency, or critical care setting.
- BLS certification; ACLS certification preferred.
- Ability to pass a comprehensive background check.
- Strong clinical skills with a broad knowledge of nursing principles and practices.
- Excellent assessment and triage abilities.
- Ability to work independently and as part of a multidisciplinary team.
- Strong communication and interpersonal skills, with the ability to interact effectively with a diverse inmate population.
- Adaptability and resilience, with the capability to work in a challenging environment.

# **ESSENTIAL FUNCTIONS:**

The Registered Nurse must comply with current and future state, federal, and local laws and regulations.

- Intake Assessments:
  - Conduct health assessments for incoming inmates, including medical history, physical examinations, and initial mental health screenings.
  - Identify immediate health concerns and coordinate with healthcare providers for necessary interventions.
  - $\circ$   $\;$  Document all findings accurately in the inmate's health record.
- Infirmary Care:
  - Provide nursing care to inmates in the infirmary, including medication administration, wound care, and monitoring of vital signs.
  - Manage care for inmates with chronic conditions and post-operative recovery.
  - Collaborate with physicians and other healthcare providers to develop and implement treatment plans.
- Triage:

- Triage inmate health complaints, determining urgency and necessary interventions.
- As needed, provide appropriate referrals to medical, dental, or mental health services.
- Educate inmates on health maintenance and disease prevention.
- Emergency Response:
  - Respond to medical emergencies within the facility, providing immediate assessment and intervention.
  - Work as part of the emergency response team, coordinating with other healthcare professionals and correctional staff.
  - Participate in ongoing emergency response training and drills.

This position requires working in a secure correctional facility. The RN may encounter a wide range of medical and psychiatric conditions and must be prepared to handle potentially stressful and volatile situations. The position may require shifts, including nights, weekends, and holidays.

Physical activity requirements are as follows:

Constant = 67-100% of the workday,

Frequent = 34-66% of the workday

Occasional = 33% or less of the workday.

- Constant reaching: Extending hand(s) and arm(s) in any direction.
- Constant Walking: Moving about on foot to accomplish tasks
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## EMPLOYEE

## WITNESS

Name:	Name:
Date:	Date:

## Staff Orientation and Training

Completed within 90 days of hire and repeated annually

Signature/date at the bottom indicates the completion date for all training topics are completed.

Employee Name: \_\_\_\_\_ Date Initiated:

Completed for (check one): \_\_\_\_\_New Hire \_\_\_\_\_Annual Review \_\_\_\_\_Supplemental

\_\_\_\_\_

Training

Policy Reference	Торіс	Highlights of policy for review, discussion, and/or demonstrated	Trainer	Employe e
	Correctional Environment	Security Focused Keep conversation to a minimum Never discuss personal information Professional, pleasant, kind, firm, fair consistent PPT		
	Professional Boundaries	Maintain at all times PPT		
	Housing	Unit assigned determined by custody with input from medical Special precautions Low bunks, extra mattresses, blankets and pillows, special shoes		
	Diagnostics	Labs drawn on-site Venipuncture procedure for blood draws, centrifuge, resulting, critical level reporting Radiology procedures		
	Supplies	Storage HSA places the orders List in med room Email or call if urgent need		
J-A-01	Access to Care	<ul> <li>Written information provided in detainee handbook</li> <li>Verbal instruction by nurse at intake</li> <li>Verbal instruction by nurse during physical</li> <li>Deliberate Indifference (Estelle v. Gamble)</li> <li>8<sup>th</sup> amendment</li> <li>Necessary medical care (needs versus wants)</li> <li>Prevent medical decline</li> <li>Medical Practitioner on call 24/7</li> </ul>		

J-A-02	Responsible	Role of the HAS	
	Health Authority	Collaborative effort of Warden, Physician, and QMHP	
J-A-03	Medical	No obstacles to care, examples provided	
1 4 0 4	Autonomy	Collaborate with security (metal braces, walkers, etc.)	
J-A-04	Administrative	Admin meetings quarterly with CQI	
	Meetings and	Health care staff meetings monthly	
	Reports	Minutes available	
J-A-05	Policies and	Stats collected and reported through CQI Policy book kept in medical nurses' office	
J-A-03	Procedures	Reviewed/revised annually and PRN	
	FIOCEDUIES	Each nurse responsible for knowing policy	
		Ask questions, report conflicts	
J-A-06	Continuous	Meetings at least quarterly	
5 A 00	Quality	Input from medical and security staff	
	Improvement	Stats reported to identify trends/patterns	
	Plan (CQI or	Establish opportunities for improvement	
	QUAPI)	Process and outcome studies	
	(	Action items and plan re-evaluation	
		Year-end review for feedback	
J-A-07	Privacy of Care	Safeguard privacy to greatest extent possible without	
		jeopardizing safety	
		Keep conversation as quiet as possible	
		HIPAA regulation specific to corrections (handout)	
		When cell side triage is necessary, use proper draping	
		Correctional staff is also trained in privacy and HIPAA	
		Documentation sent out of facility transports in a	
		sealed envelope or handed to EMS personnel	
J-A-08	Health Records	"Owned" by the facility but confidential based on	
		"need to know"	
		Warden may request record at anytime	
		CorrecTek training conducted	
		Outside records are scanned into EMR	
		ROI to other HC agencies for continuity of care	
		ROI from non-clinical persons Managing detainee ROI for self	
		Cost to county and feds versus ICE detainees	
J-A-09	Death in	Next of kin and external agency notification by	
5 A 05	Custody	security staff, or as directed by Warden	
	custouy	Clinical mortality review w/in 30 days, shared w/staff	
		Psychological autopsy and mortality review w/in 30	
		days, shared when appropriate	
		Critical incident debriefing w/in 24-72 hours	
J-A-10	Grievance	Patient's "right to complain" about their medical care	
	Prevention for	Filed w/in 15 days of occurrence	
	Health Care	Informal, verbal complaint/resolution encouraged first	
	Complaints	Formal, written when unsatisfied w/ verbal resolution	

		Reviewed by HSA next business day		
		Resolution offered		
		Reviewed by CQI team quarterly		
J-B-01	Healthy	Education Ring Binder		
5 2 01	Lifestyle	Disease specific, low impact exercises, healthy diet,		
	Promotion	smoking cessation, and other topics available		
J-B-02	Infectious	Use of proper PPE is not optional		
5 0 02	Disease	BBP training		
	Prevention and	Exposure plan		
	Control	Standard (universal) precautions		
		TB testing – reverse isolation cell		
		Ectoparasite management		
		Skin infection management		
		Weekly environmental inspections by security staff		
		Monthly environmental inspection by nursing		
		IDPH reporting		
J-B-03	Clinical	Physician determines medical necessity for		
	Preventative	communicable disease screening		
	Services	Physician determines medical necessity for		
		immunizations/ vaccines (tetanus, COVID vaccine, flu		
		vaccine, Hep B, Childhood series)		
		Dentist determines dental necessity		
J-B-04	Detainee	Medical rule out for contraindications to a work		
	Workers –	program		
	Medical	Illnesses contraindicative to work (diarrhea, draining		
	Surveillance	skin wounds, meds known to cause poor coordination,		
		etc.)		
1 5 65		Return to work safety, clearance		
J-B-05	Suicide	Risk factors		
	Prevention and	Acute versus non-acute suicidal ideation		
	Intervention	Immediate crisis referral to MH, eval w/in 24 hours		
		Any staff can recommend suicide watch		
		Only QMHP or physician can remove from suicide		
		watch Training by QMHP		
		Suicide debriefing w/in 24-72 hours		
		Discharge of persons on a suicide watch		
		Use of other detainees to monitor suicide watch		
		prohibited		
J-B-05a	Hunger Strike	Not necessarily suicidal		
5 0 050		No food intake x 3 days		
		Physician and MH referral		
		Daily weight, vitals, other diagnostics per physician		
		Monitor intake, output		
J-B-06	Contraception	Physician considers short or long term stay		
••		Offered following a sexual assault that may end in		
		pregnancy		

J-B-07	Communicatio n on Patient's Health Needs w/iin 30 days	Correctional staff advised when special needs require restrictions to normal activity and/or when a potential risk is posed to the health/safety of that detainee, other detainees, staff, or visitors Communicated via Special Needs form	
J-B-08	Patient Safety	Medication error reporting system in place Trends and factors monitored Non-punitive process except when carelessness or poor practice is obvious	
J-B-09	Staff Safety	Officer escort in the presence of detainees Radios w/panic buttons Medical staff do not possess keys or have authority to conduct detainee movement	
J-C-01	Credentials	Qualified, trained, licensed and practicing w/in scope at all times	
J-C-02	Clinical Performance Enhancement	Peer reviews for QMHP, Nurses, Practitioners at least annually by an individual in the same field with same level of licensure or higher	
J-C-03	Professional Development	Current, active license is an assumption that CEU requirements are met CPR certification	
J-C-04	Health Training for Correctional Staff	Oversight by Warden Emergency response CPR (at least 75% certified present on each shift) HIPAA BBP Common illnesses and manifestation of chronic conditions Suicide prevention PREA Communicable disease reporting	
J-C-05	Medication Administration Training	Officers in this facility do not pass medications Medication security Nothing to be left on the top of the cart (i.e. no sharps (lancets and syringes) Medications secured (double lock, never leave the cart unattended, med room door always shut /locked	
J-C-06	Detainee Workers	May sweep, mop, empty trash, wash walls Do NOT clean medical equipment Do NOT distribute or collect sick call request forms Keep patient information covered and inaccessible to detainees	
J-C-07	Staffing	Contact HSA in the event of an unexpected workflow	
J-C-08	Health Care Liaison	24-hour care and no need for a health care liaison	

J-C-09	Orientation for Health Staff	W/in 90 days of employment	
J-D-01	Pharmaceutical Operations	Body's Pharmacy Contraindicated court-ordered meds reported to the court system by the physician Pharmacy maintains a record of prescriptions for 7 years Destruction procedure options (do not flush) Perpetual inventory system for controlled meds and sharps Controlled meds under double lock when unattended Controlled meds and sharps counted by on-coming and off-going nurses (together) at shift change Non-pharmaceutical measures encouraged Quarterly pharmacy inspections by a licensed pharmacist Poison control number is posted in medical	
J-D-02	Medical Services and Administration	All medications ordered at the discretion of the physician Home prescription meds accepted under certain circumstances Home OTC meds, open creams, vials, etc. are not accepted Medication verification procedure Medication administration is documented in the EMR- MAR Discuss unavailability of any med with physician Release medications may be sent with detainee in the original container Release of meds for county/federal detainees depends on destination, 3 days or remaining doses on card is usually sent ICE requires 7 days chronic meds, 7 days for acute meds, 15 days of TB meds, 30 days of HIV meds When remaining in-custody, give meds and instructions in a sealed envelope to transport officer All meds released recorded on the transfer sheet or Discharge Medication Form	
J-D-03	Clinical Performance Enhancement	Notify HSA or Warden of supply and equipment needs Complete a work order form to notify maintenance of any equipment in disrepair	
J-D-04	Diagnostic Services Onsite	Radiology and Lab – review requisition process CLIA waiver	
J-D-05	Medical Diets	Menus reviewed by a registered dietician at least annually RD to be consulted on unusual diets (i.e., renal) Nutritional counseling	

		Following advection by the physician restricted	 
		Following education by the physician, restricted	
		commissary allowed if non-compliance negatively	
		impacts security operations and/or places the patient in significant risk of self-harm	
J-D-06	Patient Escort	By officer staff only	
J-D-00		Off-site medical transports coordinated through	
		security	
		Off-site reports scanned to the chart	
J-D-07	Emergency	Physician requests emergency transport, or in a life-	
	Services and	threatening situation is notified ASAP following	
	Response Plan	transport	
		Evacuation procedures set by security and followed by	
		nurses	
		Phone numbers for staff and emergency agencies kept	
		in medical and available to control	
		Mass disaster drills and man-down drills conducted	
J-D-08	Hospital and	Physician determines the need for specialty consults	
	Specialty Care	Specialist orders for care approved or revised by site	
		practitioner	
		Detainee is NOT advised of time/date/location of	
		appointments	
		Tele-med used in exigent circumstances only	
J-E-01	Health	Access to care and grievance policy provided in	
	Services	writing by security staff w/in 12 hours	
		Intake nurse verbally explains access w/in 12 hours	
		Use translation line for those who do not speak	
1 = 00		English	
J-E-02	Receiving	Intake screen conducted by RN or LPN w/in 12 hours	
	Screening	of arrival	
	(FFC)	Abnormal findings reported to physician	
		Fit for Confinement procedure ICE to receive IHSC834 if not FFC	
J-E-03	Transfer	This facility does not transfer intra-facility	
J-E-02	Screening		
J-E-04	Initial Health	Physical exam by RN w/in 14 days of arrival	
JLUT	Appraisal		
J-E-05	Mental Health	Mental Health Screening conducted w/in 12 hours of	
00	Screening and	intake by trained LPN or RN	
	Evaluation	Referred to MH as indicated with MH eval to follow	
		w/in 72 hours	
J-E-06	Oral Care	Dental Screening conducted w/in 12 hours of booking	
-		by LPN or RN	
		Oral exam conducted with the 14-day physical	
		Dentist visit w/in 12 months	
		Fluorinated water	 
J-E-07	Health Care	Written request by detainee	
	Requests and	Triage w/in 24 hours	

	Services –	Face to face visit w/in 48 hours Generally conducted in medical	
	Non-urgent	Cell-side allowed if patient cannot be moved (properly	
		drape)	
J-E-08	Nursing	Not in use at this facility	
	Assessment Protocols		
J-E-09	Continuity,	Abnormal diagnostic results, off-site consults, etc.	
	Coordination,	called to physician w/in 24 hours	
	and Quality of	Normal or expected results reviewed at next physician	
	Care	visit	
		Hospital returns scheduled for next physician clinic	
		Detainee is notified of abnormal lab results and POC changes	
		Annual Peer Reviews for practitioner, nurses, QMHP	
		Pertinent health records forwarded to receiving	
		facilities	
		Upcoming appointments scheduled, necessary or	
		recommended are communicated to detainee or	
J-E-10	Discharge	receiving facility As above J-E-09	
J-L-10	Planning		
J-F-01	Chronic Care	Initiated during or before the 14-day physical	
		Lab protocols determined by physician and based on	
		national clinical practice guidelines	
		Examined by physician w/in 2 working business days of booking	
		CC Clinic conducted q 3 months	
		CC labs drawn and resulted prior to scheduled CC visit	
J-F-02	Infirmary-Level Care	This facility does not provide "infirmary" level care	
J-F-03	Mental Health	Data collected w/in 12 hours of booking by LPN or RN	
	Services	Referral to MH as indicated	
		MH visit w/in 72 hours post-screening	
		Crisis services available 24/7 for suicidal ideation	
		QMHP determines need for psych services in	
J-F-04	Medically	collaboration with the physician Individualized plan of care	
5104	Supervised	Severe, acute, progressive detox patients transferred	
	Withdrawal	to ER	
	and Treatment	Pregnant detainees using opiates is an immediate	
		notification of the physician	
J-F-05	Pregnancy	Conduct UPT if pregnancy is suspected	
	Counseling and Care	Education on all options (keeping child, abortion,	
		adoption) provided to mother Timely referral to OB-Gyn, do not wait for "out" date	
		Prenatal education throughout pregnancy	

J-F-05a	Abortion –	Post-partum visits and education within 6 weeks after birth Report of off-site visit retrieved and scanned to the medical record See restraint policy pertinent to pregnant females Only "protected" elective procedure currently in jail	
	Elective	system Referral MUST be timely Costs for procedure and transport may be charged in advance	
J-F-06	Sexual Abuse Response	Prison Rape Elimination Act (PREA) review REPORT IMMEDIATELY TO FACILITY ADMINISTRATION	
J-F-07	Terminally Ill Care	Dignity and respect are paramount Hospice care may be an option if approved by security DNR orders, Advanced Directives initiated to community standard	
I-G-01	Restrain and Seclusion	Check for clinical contraindications first if possible	
I-G-02	Segregated Detainees	Check for clinical contraindication first if possible	
I-G-03	Emergency Psychotropic Medications	Rarely used – less restrictive measure first Eminent danger to self or others Court order for forced meds Physician orders monitoring perimeters, must be w/in one-hour post administration	
I-G-04	Therapeutic Relationship, Forensics, and Discipline	Ethical issues presented when involved with collection of forensic evidence against a patient Body cavity searches not conducted unless for a valid medical reason and ordered by the physician Body cavity searches avoided at facility if for drug stashing, no clinical treatment available for a broken bag Court orders followed or physician addresses through court system Collection of DNA for paternity, blood for STD, alcohol level IF patient consents Medical staff never participate in discipline of any kind	
I-G-05	Informed Consent and Right of Refusal	No different than any other medical agency Patient has a right to refuse Patient has a right to know adverse side effects and consequences to treatment	
I-G-06	Research – Medical and Other	Patients already enrolled in a research program such as a drug trial may continue with documented consents provided, patient demonstrates an	

understanding of benefits/risks, and the site practitioner approves Medical research activities may not be initiated inside	
the facility	

I understand that this Orientation Checklist is not all-inclusive and that it is my obligation to ask questions and seek clarifications of my supervisor.

Orienting Staff:	Date:	

Supervisor Signature: \_\_\_\_\_ Date:\_\_\_\_\_

New Employee ReviewInitialsMission/VisionCore ValuesCorrectional Environment OrientationJob DescriptionProper Approach to the detainee/offenderPREAHIPPA AwarenessBloodborne PathogensPeer Review ProcessProfessional Boundariesjail Policies and Procedures	Date
Mission/Vision	
Core Values	
Correctional Environment OrientationImage: constraint of the second	
Job Description	
Proper Approach to the detainee/offender	
PREA       Image: Second	
HIPPA Awareness       Image: Second state st	
Bloodborne Pathogens       Image: Second secon	
Peer Review Process	
Professional Boundaries jail Policies and Procedures	
jail Policies and Procedures	
init Madical Delining and Durandhung	
jail Medical Policies and Procedures	
jail Security Policies Pertinent to Medical Staff	
Medical Documentation	
Electronic Medical Records	
Medical History and Appraisal	
Narrative Progress Note	
Medical Progress Note	
Dental Progress Note	
Proper SOAP Note Technique	
AIMS Testing Form	
Pain Assessment Form	
Physical Assessment Form	
Medical Problem List	
Education Sheets for Detainee/Offenders	
Refusal of Treatment Forms	
Dental Screen	
Release of Information Forms	
Release of Information Log	
TB Testing Log	
Technique for Administering / Reading a TB Test	
Restraint Checklist	
Informed Consent Forms	1
Grievance Process and Tracking	1
Discharge Referral Form	1
Release of Responsibilities Forms	1
5 Stack System for Charts	1

"S" Sickest Patient Charts		

Employee Name:	Employee	Trainer	Data
	Initials	Initials	Date
Sick Call Review			
Sick Call Process and Form Review			
Physician Sick Call			
Nursing Sick Call Triage			
Dental Sick Call Triage			
Chronic Clinic Procedures			
Chronic Clinic Log			
Chronic Clinic Scheduling			
Chronic Clinic Labs			
Continuous Quality Improvement			
Monthly Data Collection Procedure			
CQI Form/Process			
Action Item Review			
Outcome Study - Diabetic			
Outcome Study - Hypertension			
Testing On-Site			
Proper Technique, Forms, and Ordering for the following onsite diagnostics:			
<ul> <li>Urine Dipstick and Lab Study Form</li> </ul>			
Urine Pregnancy Test			
Blood Glucose			
Blood Pressure Cuff			
Thermometer			
Pulse Oximetry			
Physician Notification			
Testing Off-Site			
Off-Site Lab Service (Procedures and Forms)			
Venipuncture Procedure			
Mobile Radiology Request/Procedures			
Physician Signature and Review of Reports			
Routine Testing for Chronic Clinics			
Medication Administration	1		
Medication Administration Record (MAR)			
Medication Error Form			
Medication Administration Training			
Medication Verification Form			
Medication Count (Controlled Substances)			
Medication Destruction Procedures			
Medication Destruction Log			
Discharge Medication Procedures and Form			

Refrigerator Temperature Log			
Pharmacy			
Main Pharmacy Procedures			
Backup Pharmacy Procedures			
Medication Ordering Procedures (New and Refills)			
Medication Return Policy			
Emergency On-Site Medications			
Employee Name:	Employee Initials	Trainer Initials	Date
Housing Issues	•	L	L
Low Bunk Criteria, Special Shoes, Extra Matts, etc			
Special Diets			
Housing for Special Needs			
Supply Ordering			
Disposable Medical Supply Orders			
Durable Supply Orders (jail and Medical)			
Count Log (syringes, sharps, etc)			
Nursing Responsibilities On-Site			
Review Intake Health Screening			
Seclusion/Restraint Check Expectation			
Suicide Prevention and Watch Procedures			
Suicide Precautions Release by QMHP or Physician			
Off-Site Referrals	1		
Off-Site referral Forms			
Contract Responsibilities	1		
Schedule Expectations			
Corporate Contact List			
24 Hour On-Call List			

Employee Response to Training:

Employee Signature:

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Trainer Signature:

# **Proposed Contract Price and Composition**

Reserve Health has endeavored to offer Gaston County a transparent, detailed breakdown of the costs of delivering high-quality, compassionate healthcare services to those in custody.

Within these pages, we outline our financial proposal, including the total contract price and a clear delineation of how these funds will be allocated to ensure the highest standards of inmate healthcare. Our pricing model is structured to provide Gaston County with exceptional value, balancing cost-effectiveness with our unwavering commitment to quality care. This encompasses all aspects of inmate health services, from routine medical screenings and emergency care to mental health support, chronic disease management, and dental care.

The composition of our proposed contract details the scope of services Reserve Health is prepared to offer, including staffing models, healthcare delivery mechanisms, and our approach to healthcare management within the correctional setting. Our proposal is built on evidence-based practices and a deep understanding of the unique healthcare needs and challenges the inmate population faces.

Our goal is to establish a partnership with Gaston County that addresses inmates' immediate healthcare needs and contributes to their long-term well-being and rehabilitation. Reserve Health demonstrates its commitment to operational excellence, transparency, and accountability through this proposal. We look forward to discussing this proposal in further detail and answering any questions the Gaston County Sheriff's Office may have regarding our proposed contract price and composition.

# **Cost Inclusions**

# Implementation Fee

Securing \$100,000 in start-up costs for initial infrastructure investments is a critical step in establishing comprehensive healthcare services at Gaston County jail. This funding is essential for upgrading and installing advanced IT infrastructure and WiFi capabilities, foundational to implementing a robust electronic health record (EHR) system. An EHR system is vital for ensuring inmates receive timely, coordinated, and efficient healthcare by allowing medical staff to access and update patient records instantly.

Furthermore, this initial investment will cover the cost of acquiring startup medical equipment necessary to provide a wide range of healthcare services on-site. This includes diagnostic tools and treatment devices essential for addressing acute and chronic health conditions among the

inmate population. To ensure all equipment meets current standards, has been properly calibrated and maintained, is manufacturer waranteed, and to ensure notification of any future recalls, no used equipment will be purchased or implemented for the purposed on this upfit. By allocating these funds towards such crucial infrastructure and equipment, Gaston County jail can significantly improve the quality of healthcare services, enhance operational efficiencies, and ensure the safety and well-being of both the inmates and the staff.

## Startup Equipment

Equipment	Quantity		
Arrest Processing			
Desktop Computer	1		
AED	1		
Wall Mount for AED	1		
Vitals Machine on Pole	1		
Portable Oto/Ophtho	1		
Small flexiport BP cuff	1		
Medium flexiport BP cuff	1		
Large flexiport BP cuff	1		
Extra large flexiport BP cuff	1		
Durashock Aneroid	1		
Pulse Oximeter	1		
Scale w/Rails & Height rod	1		
Exam Stool	1		
Medical-Main			
Desktop Computers	6		
AED	1		
Wall Mount for AED	1		
Vitals Machine on Pole	2		
Portable Oto/Optho	3		
Small flexiport BP cuff	2		
Medium flexiport BP cuff	2		
Large flexiport BP cuff	2		
Extra Large flexiport BP cuff	2		

Durashock Aneroid	2
Pulse Oximeter	3
Scale w/ rales	1
Stadiometer	1
ECG Machine	1
Med Cart	3
Emergency Bag	1
C-Collar, plastic	1
C-Collar, Foam	1
CPR Backboard	1
Ambu Bag	1
Reflex Hammer	3
Exam Table	3
Lab Fridge	1
Medication Fridge	1
Phelbotomy Chair	1
IV Pole	1
Wheelchair	4
Bedside Comode	1
Exam Stool	6
CPR Backboard	1
Annex	
Desktop Computer	1
AED	1
Wall mount for AED	1
Vitals Machine on Pole	1
Portable Oto/Optho	1
Small flexiport BP cuff	1
Medium flexiport BP cuff	1
Large flexiport BP cuff	1
Extra Large flexiport BP cuff	1
Durashock Aneroid	1

Pulse Oximeter	1
Scale w/ rales	1
ECG Machine	1
Emergency Bag	1
C-Collar, plastic	1
C-Collar, Foam	1
CPR Backboard	1
Ambu Bag	1
Reflex Hammer	1
Exam Table	1
Exam Stool	1
Dental	
Xray	1
Dental Chair	1
Exam Stool	1
Autoclave	1
Ultrasonic Cleaner	1
Operative Light	1

## Staffing

		Base	Base	Base
Job Title	Job Code	50th	75th	90th
Administrative Assistant I	8867	\$19.51	\$21.72	\$23.71
Dental Assistant	1589	\$20.73	\$22.51	\$24.12
Dentist	7761	\$86.54	\$98.80	\$109.85
Licensed Clinical Social Worker	10448	\$34.22	\$38.29	\$41.96
Medical Director	2904	\$124.07	\$144.33	\$162.58
Nurse (LPN)	7130	\$24.97	\$28.06	\$30.85
Nurse (RN)Charge	7190	\$43.43	\$49.65	\$55.25
Nurse (RN)Long-Term Care	7183	\$32.70	\$35.68	\$38.36
Nurse (RN)Triage	8560	\$37.14	\$43.18	\$48.62
Nurse Director	7106	\$57.36	\$68.82	\$79.15
Nurse PractitionerGeneral	5681	\$55.69	\$60.31	\$64.48
Nurse PractitionerPsychiatry	11490	\$60.91	\$66.26	\$71.08
Physician Assistant	7260	\$59.21	\$65.87	\$71.89
PhysicianInternal Medicine	9844	\$100.73	\$122.36	\$141.86
PhysicianPsychiatry	9852	\$120.00	\$137.28	\$152.85
Referral Coordinator	13674	\$19.73	\$21.15	\$22.43

#### Salaries

Methodology: Initially, a comprehensive dataset from Payscale specific to the Gastonia, North Carolina Metropolitan area was collected, ensuring it covered a wide spectrum of industries, job titles, and experience levels to reflect the local labor market accurately. Once accuracy was confirmed, it was filtered to the local healthcare industry. This data was then analyzed to determine median salaries for various positions, including job complexity, required education, years of experience, and industry-specific demands. To create equitable and competitive salary ranges, these median salaries were adjusted by applying a percentile approach, where the lower end of the range is set at the 50th percentile of the market rates and the upper end at the 90th percentile. This methodology allows flexibility within the ranges to accommodate individual qualifications and performance levels while considering cost-of-living adjustments specific to the Gastonia area and ensuring competitive recruitment of highly qualified candidates.

Staff

#### Staff Benefits

In developing our pricing proposal, we have meticulously calculated the costs associated with staff benefits, employing our authentic company costing metrics pertinent to current employee plans. This calculation rests on the foundational assumptions that the average age and family size of potential employees will closely align with the demographics of our existing workforce. Additionally, we anticipate achieving a level of participation in these benefits programs that mirrors the current engagement observed within our workforce. This approach ensures that our proposal is grounded in real-world data and reflects our commitment to providing realistic and sustainable benefits offerings to our employees.

## Reporting and Accountability

This pricing proposal comprehensively covers all costs associated with data collection, analytics, and reporting, ensuring that every aspect of the information management process is accounted for. It includes deploying sophisticated data collection systems, utilizing advanced analytics to interpret health data, and preparing detailed reports that provide insights into the healthcare services' performance and outcomes at Gaston County jail.

Furthermore, this proposal encompasses the participation of both staff and leadership in monthly meetings with jail administration to present and discuss this data. This ensures that stakeholders are fully informed and can make evidence-based decisions. Including these costs guarantees transparency and provides a clear understanding of the financial investment required to maintain a high level of operational excellence and continuous improvement in the healthcare services offered at the facility.

# Technology

Reserve Health will assume full financial responsibility for installing and maintaining a secure internet and WiFi infrastructure within the facility, ensuring compliance with the Sheriff's Department's protocols and specifications. This commitment underscores our dedication to creating an efficient, secure, and technologically advanced healthcare environment for the inmate population. Furthermore, Reserve Health will cover all costs associated with the provision, maintenance, and secure storage of electronic medical records (EMR), ensuring that patient data is managed with the highest privacy and security standards.

In addition to these foundational services, Reserve Health is committed to funding an innovative electronic consultation service. This service is designed to streamline the process of seeking expert medical advice and facilitate quicker decision-making, enhancing the quality of care provided to inmates. We will also invest in the necessary equipment for on-site virtual visits with local specialists. This technology will significantly reduce the need for transportation and

the associated security costs by allowing inmates to access specialist care without leaving the facility. While Reserve Health will fund the equipment and infrastructure required for these virtual visits, the physician fees for such consultations will be managed by the Sheriff's Office, similar to the financial arrangements for off-site care. This approach not only leverages modern healthcare technology to improve service delivery but also aligns with our goal of controlling costs while maintaining high standards of inmate healthcare.

# Pharmacy

Reserve Health commits to covering all expenses related to the provision of pharmaceuticals for inmates, ensuring that both emergent and chronic medication needs are met comprehensively. This coverage extends to all associated costs, including any applicable taxes, fees, shipping expenses, and licensing requirements necessary for the lawful and efficient supply of these medications. This financial responsibility reflects our dedication to ensuring inmates have uninterrupted access to essential medications, supporting their health and well-being while in custody.

However, it is important to note that this coverage does not extend to over-the-counter medications that inmates may purchase independently from the facility's commissary. These items remain the financial responsibility of the inmates themselves, allowing them the discretion to procure additional non-prescription health products as they see fit.

Reserve Health has established a cap of \$25,000 per inmate annually to ensure sustainability and manage costs effectively. This cap is designed to balance the need for access to potentially expensive pharmaceutical treatments with the practicalities of budget management. It ensures that while inmates will have access to necessary medications, there are safeguards in place to prevent disproportionate financial impacts from the costs of high-priced drugs. This policy is a part of our broader strategy to provide comprehensive, responsible healthcare services within the constraints of a managed budget.

# Medical Supplies

Our methodology for managing the costs associated with disposable medical and administrative supplies and ongoing equipment needs is comprehensive and designed to ensure both efficiency and cost-effectiveness. For equipment purchases, we will implement a rigorous evaluation process to identify products that offer the best value in terms of cost, durability, and functionality. Reserve Health will continue to support our medical equipment needs by allocating up to \$10,000 annually towards the purchase of new or replacement equipment. Should our needs exceed this allocation, any additional funding requirements will be presented to the Gaston County Sheriff's office for consideration within the scope of the annual budgetary process. We will collaborate closely with the Gaston County Sheriff's Office to prepare annual budgetary requests. This collaboration will include providing detailed justifications for

equipment needs exceeding \$10,000, ensuring that all expenditures are transparent and aligned to deliver high-quality healthcare services efficiently and responsibly. This approach supports the immediate needs of healthcare services and establishes a sustainable framework for managing future costs and investments.

# **Off-Site Costs**

Off-site healthcare costs, encompassing transportation by custody and ambulance services, offsite emergency care, inpatient hospitalizations, inpatient and outpatient procedures, and off-site specialty services, will be borne by the Sheriff's Office. Reserve Health acknowledges the significance of these costs and is committed to implementing strategies to minimize them without compromising the quality of care provided to inmates. Our approach includes prioritizing delivering the highest quality of care that can be safely administered within the facility itself, thereby reducing the necessity for off-site services.

Reserve Health will engage in a collaborative process with the Sheriff's Office to further control costs, ensuring that any required off-site care is accurately documented, including coverage dates and associated costs. This includes working closely with the Sheriff's Office's third-party bill scrubbing service to verify that all billing information is timely and accurate and that only necessary and appropriately priced services are charged. This cooperative effort is designed to provide transparency, prevent billing errors, and ultimately support the Sheriff's Office in managing healthcare-related expenditures more effectively.

# Per Diem

For the contract period from July 1, 2024, through June 30, 2025, our cost structure includes a provision to accommodate fluctuations in the inmate population at Gaston County jail. Specifically, should the jail's Monthly Average Daily Population (MADP) exceed the anticipated capacity of 620 inmates by five percent (5%) or more in any given month, the compensation payable to Reserve Health by the Sheriff's Office will be accordingly adjusted. This adjustment is calculated based on the number of inmates exceeding the 620 threshold, with an additional cost incurred at a per diem rate of \$3.78 for each inmate above this count. Importantly, this per diem rate is not static; it will be subject to annual adjustments aligned with the Consumer Price Index (CPI) for healthcare, mirroring the methodology applied to other contract costs. This ensures that the compensation structure remains responsive to the changing inmate population and the economic factors influencing healthcare service provision costs.

# Changes in Standard of Care or Scope of Services

In recognition of the dynamic nature of healthcare, particularly with the ongoing introduction of new medications, technology, and treatments, we understand that unanticipated costs may arise. Should the expenses associated with these new developments exceed 2% of the annual

operating budget outlined in this proposal, we commit to negotiating additional fees in good faith. This approach ensures that both parties can address any financial adjustments necessary to incorporate these advancements into the healthcare services provided at Gaston County jail. Our goal is to maintain a transparent and cooperative relationship, ensuring that the healthcare services can adapt to emerging needs and continue to provide high-quality care while considering the financial implications of such enhancements.

# **Annual Adjustments**

Our annual fee adjustment will be directly tied to the Consumer Price Index (CPI) for healthcare, ensuring that our pricing structure remains aligned with the economic realities of providing healthcare services. The CPI for healthcare reflects changes in the prices of medical services and commodities, and using it as a benchmark for our fee adjustments allows us to maintain the quality and sustainability of our services in the face of inflationary pressures.

It is important to note that this adjustment mechanism ensures fairness and transparency, allowing both parties to anticipate and plan for annual fee adjustments in line with economic conditions affecting healthcare costs.

# Total Cost

Catanana	<b>*</b>
Category	\$
Pharmaceuticals	\$175,000.00
Medical Supplies	\$42,000.00
Medical Waste	\$8,000.00
Shredding/Destruction	\$4,850.00
Personnel	\$2,480,046.00
Personnel Benefits/Taxes	\$495,000.00
Shift Differential	\$119,000.00
Administrative Costs	\$182,000.00
Malpractice Insurance	\$149,500.00
Business Insurance	\$12,000.00
Cyber Security Insurance	\$4,800.00
Unemployment Insurance	\$18,000.00
EHR/IT/Phone/Fax	\$60,000.00
Laboratory Costs	\$41,880.00
Staff Training	\$5,000.00
Licenses	\$15,200.00
Contract Fees	\$487,200.00
TOTAL	\$4,299,476.00

# Appendices

Appendix A: Curriculum Vitae

# Daniel Biondi, DO, MBA

#### **Current Clinical Practice and Leadership**

#### CEO/Physician (03/2016-Present)

#### Reserve Health, PC, Charlotte, NC

- Manage financial and business operations, strategic development, and compliance.
- Provide primary care services to patients of all ages, including preventive health, acute illness, chronic disease management, and office-based procedures.

#### Medical Director Charlotte Fire Department (03/2016-Present)

- Design and administer a program to appropriately identify pre-existing health risk, reduce future risk, and maintain the health of employees serving in the public safety sector according to federal and state regulations
- Serve as a subject matter expert and liaison with client leadership, assisting in the translation of complex clinical topics

#### Medical Director Charlotte Charlotte-Gaston Police Department (03/2016-Present)

- Design and administer a program to appropriately identify pre-existing health risks, reduce future risks, and maintain the health of employees serving in the public safety sector according to federal and state regulations
- Serve as a subject matter expert and liaison with client leadership, assisting in translating complex clinical topics.

#### Medical Director Gaston County jail (03/2020- Present)

Wellpath-Gaston County jails, Charlotte, NC

- Provide clinical care to inmates
- Provide clinical leadership, establish and maintain clinical policies and procedures.
- Provide administrative support and leadership as a liaison between Correct Care Solutions and Gaston County jail Administration.

#### Medical Director RAO Community Health (01/2019- Present)

- Provide clinical oversight for the care of uninsured patients with particular attention to the marginalized populations of the LGBTQI Community and racial minorities
- Provide HIV Care and Prevention opportunities for the Charlotte Community

#### Medical Director Miracle House (03/2021- Present)

- Provide clinical care to juvenile inmates of Level 3 inmateial treatment facilities.
- Provide medical oversight in program development and compliance for the moderate and long-term inmateial treatment of youth, including medical and mental health programming.

#### **Past Leadership**

#### Medical Director (02/2016-10/2018)

Correct Care Solutions-Gaston County jails, Charlotte, NC

- Provide clinical care to inmates
- Provide clinical leadership to establish and maintain clinical policies and procedures.
- Provide administrative support and leadership as a liaison between Correct Care Solutions and Gaston County jail Administration.

#### Carolinas Concussion Network (01/2013-01/2016)

- Member of a select group of physicians with training and experience in the advanced management of traumatic brain injury
- Perform community education regarding the signs, symptoms, and initial management of head injuries.
- Educate healthcare professionals regarding the most up-to-date treatment recommendations for the care of concussions.

#### Family Physician (08/2006-07/2008)

Primary Care Associates of South Denver: Denver, NC

#### Hospitalist Moonlighting Coverage (08/2006-07/2008)

Lake Norman Regional Medical Center: Mooresville, NC

#### Regional Medical Director (01/2013-01/2016)

Carolinas Healthcare System: Charlotte, NC

- Provide regional leadership for Carolinas HealthCare System within the Lincoln, Gaston, and Gaston Counties of North Carolina.
- Support, mentor and remain accountable for the performance of regional site-based medical directors and practices.

- Accountability for the overall performance of designated sites and the communication and deployment of all quality, safety, patient experience initiatives, patient-first primary care initiatives, and other operational, financial, and patient care redesign.
- Coordination and care integration within the region across the care continuum, including acute care, subacute and rehabilitative care, ambulatory care (primary care and specialties), urgent care, and home health.
- Committee Participation:
  - o Clinically Integrated Network
  - Readmission Reduction Committee
  - Health Maintenance Committee
  - Adult standing order and Triage Protocol Committee
  - Pediatric standing order and Triage Protocol Committee
  - CHS Lincoln-Levine Cancer Institute Oncology Council

#### Medical Director (05/2010-01/2016)

Lincoln County Heart of a Champion

 Provide multispecialty provider and staff recruitment, planning, marketing, standardization, and clinical supervision of an annual event providing free preparticipation athletic evaluations to more than 500 high school student-athletes annually, including advanced cardiac testing with ECG and echocardiography.

#### ATC Supervisory Physician (08/2010-01/2016)

East Lincoln High School North Lincoln High School Lincoln Charter School Lincolnton High School

- Provide oversight and clinical guidance to Athletic Trainers.
- Provide medical coverage for athletic events.
- Develop and execute emergency protocols for high school athletics
- Serve as liaison between CHS and local schools.

#### ACP Supervisory Physician (01/2009-01/2016)

East Lincoln Urgent Care Express: Denver, NC

Provide clinical oversight to Advanced Care Providers in urgent care

#### On Site Medical Director (01/2008-01/2016)

East Lincoln Primary Care: Denver, NC

• Provide leadership to practice providers. Co-lead all non-provider staff with the practice manager. Responsible for operations, financial viability, strategic planning, quality improvement, and patient satisfaction

#### Laboratory Director (01/2008-01/2016)

East Lincoln Primary Care: Denver, NC (2008- Present)

East Lincoln Urgent Care Express: Denver, NC (2009- Present)

Provide laboratory oversight and maintain regulatory compliance

#### Family Physician (07/2008-01/2016)

East Lincoln Primary Care: Denver, NC

- Provide primary care services to patients of all ages, including preventive health, acute illness, and chronic disease management.
- Office Procedures: Joint injections of small, medium, and large joints, skin biopsies, suturing, toenail excision, and osteopathic manipulation

#### Physician Leadership Council to the CEO (08/2006-07/2008)

Lake Norman Regional Medical Center: Mooresville, NC

#### Chief inmate (05/2005-05/2006)

Saint Vincent Health System Family Medicine Residency: Erie, PA

#### **Certifications /Licensure**

Active North Carolina Medical License Inactive Pennsylvania Medical License Board Certified American Academy of Family Physicians (Recertification completed 11/ 2013. Due again 2023) NCQA Diabetes Care DEA-X Licensure

#### **Community Service**

#### Medical Director (01/2009-01/2016)

Camp Dogwood

• Develop and execute all routine and emergency healthcare protocols for this renowned NC Lions vacation retreat for more than 850 blind and visually impaired campers annually.

Lincoln Charter Middle School Sports Physicals (01/2009-Present)

100+ free physicals annually

#### East Lincoln Optimist Club Sports Physicals (01/2007-01/2106)

• 100+ free physicals annually

#### Board of Managers YMCA of Greater Charlotte (01/2010-02/2014)

Sally's Y Branch, Denver, NC

• Provide leadership in the development and management of a local YMCA Branch including program development, financial stewardship, and charitable giving

#### Teaching

Duke University (08/2014-01/2016)

Preceptor for nurse practitioner students

Wingate University (08/2015-10/2015)

Preceptor for physician assistant students

University of North Carolina (10/2011-3/2012)

Preceptor for medical students

Winston Salem State University (01/2010-04/2010)

Preceptor for nurse practitioner students

Wake Forest University (10/2011-10/2012)

Preceptor for nurse practitioner students

#### **Education**

Masters of Business Administration (08/2014-05/2016)	
Auburn University, Auburn, AL	

- Professional Development Certificate in Physician Leadership (05/2013) Queens University, Charlotte, NC
- Professional Development Certificate in Negotiation (01/2006) Notre Dame University: South Bend, IN
- **Family Medicine Residency (07/2003-06/2006)** Saint Vincent Health System Family Medicine Residency: Erie, PA
- **Traditional Rotating Osteopathic Internship (07/2003-06/2004)** Saint Vincent Health System: Erie, PA

#### Doctor of Osteopathic Medicine (07/1999-05/2003)

Lake Erie College of Osteopathic Medicine: Erie, PA

#### **B.S. with Honors in Health Policy and Administration (08/1995-05/1999) Thesis: Development of Pulmonary Rehabilitation in Community Hospitals** The Pennsylvania State University: University Park, PA

Minor in Health Studies (08/1995-05/1999) The Pennsylvania State University: University Park, PA

Minor in Natural Science (08/1995-05/1999) The Pennsylvania State University: University Park, PA

#### **International Study**

Russia (Winter Semester 1999)- International Healthcare Ireland/Scotland (Summer Semester 2015)- International Healthcare

#### **Collegiate Activities**

The Lake Erie College of Osteopathic Medicine Student Osteopathic Medical Association Undergraduate American Academy of Osteopathic Medicine Christian Medical and Dental Association

The Pennsylvania State University Varsity Crew Varsity Cross Country Triathlon Club Health Policy and Administration Club

## Appendix B: Lawsuit

*Estate of Haley v. Wellpath et al*, 3:23-cv-85-FDW-DCK (W.D.N.C.). Reserve Health along with Wellpath, Sherriff McFadden, and multiple individual detention and healthcare providers at the MCDC have been named as defendants in a claim arising out of the suicide of John Devin Haley at the Gaston County jail in May 2021. All defendants have filed motions to dismiss the claim; the motions are full briefed and are pending before the Court. The parties are proceeding through discovery and mediation is set for April 2024.



# Appendix C: Policies

# **Company Policy: Patient Access to Care**

Policy Statement:

At Reserve Health, we are committed to providing high-quality healthcare services to all detainees within our correctional facility facilities. This policy outlines the guidelines and procedures for ensuring access to healthcare, addressing medical needs promptly, and upholding the dignity and rights of all individuals under our care.

#### Purpose:

The purpose of this policy is to establish clear standards for patient access to care in a correctional facility, with a focus on ensuring the health and well-being of detainees while complying with all relevant laws, regulations, and ethical principles.

#### Scope:

This policy applies to all Reserve Health employees, including medical staff and administrative staff, working within our correctional facility facilities.

Policy Guidelines:

#### 1. Patient-Centered Care:

a. All detainees have the right to receive medical care that is respectful, non-discriminatory, and of the highest quality.

b. Healthcare services shall be provided without regard to race, color, religion, national origin, gender, sexual orientation, disability, or any other protected characteristic.

#### 2. Timely Access to Care:

a. Detainees shall have access to healthcare services in a timely manner, including routine, urgent, and emergency care.

b. Medical staff shall promptly assess and address the healthcare needs of detainees, prioritizing urgent cases.

#### 3. Confidentiality and Privacy:

a. All medical information and records related to detainees' healthcare shall be kept confidential and only disclosed as required by law.

b. Detainees' privacy and dignity shall be respected during medical examinations and procedures.



4. Cultural Sensitivity:

a. Medical staff shall be trained to be culturally sensitive and responsive to the diverse backgrounds and needs of detainees.

b. Interpreter services shall be available for detainees with limited English proficiency.

5. Informed Consent:

a. Detainees shall be provided with clear and understandable information about their healthcare options and the risks and benefits of treatments.

b. Informed consent for medical procedures shall be obtained whenever applicable.

6. Access to Mental Health Services:

a. Detainees shall have access to mental health assessments and services, with a focus on identifying and addressing mental health needs.

b. Crisis intervention and suicide prevention protocols shall be in place and followed diligently.

7. Compliance with Legal and Regulatory Requirements:

a. Reserve Health shall adhere to all applicable local, state, and federal laws and regulations governing healthcare in detention facilities.

b. The correctional facility shall maintain necessary licenses and certifications for healthcare services.

8. Complaint and Grievance Process:

a. Detainees shall be informed of the process for filing complaints or grievances related to healthcare services.

b. Reserve Health shall investigate and respond to complaints in a prompt and thorough manner.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees are expected to comply with this policy. Failure to adhere to these guidelines may result in disciplinary actions, up to and including termination of employment.

Reserve Health is dedicated to upholding the highest standards of patient access to care in our correctional facilitys. We are committed to continuous improvement and the well-being of all detainees under our care.



# **Company Policy: Designation of Responsible Health Authority**

Purpose:

This policy establishes the designation of a Responsible Health Authority (RHA) and clarifies the role and responsibilities of the RHA in making ultimate decisions regarding patient care, healthcare practices, and overall healthcare authority within the facility.

Policy:

1. Designation of Responsible Health Authority:

a. Reserve Health designates its Medical Director as the Responsible Health Authority (RHA) for the facility.

b. The RHA is the ultimate arbiter of decisions within the facility related to patient care, healthcare practices, and healthcare authority.

2. Role of the Responsible Health Authority:

a. The RHA has the authority to make final determinations on matters related to patient care, healthcare policies, procedures, and standards of practice within the facility.

b. The RHA is responsible for ensuring that patient care is delivered in compliance with applicable laws, regulations, ethical standards, and facility policies.

c. The RHA may delegate specific responsibilities to appropriate clinical and administrative leaders but retains ultimate decision-making authority.

3. Responsibilities of the Responsible Health Authority:

a. The RHA will provide guidance and oversight to clinical and administrative leaders to maintain high-quality patient care.

b. The RHA will address and resolve disputes or conflicts related to patient care, clinical practices, and healthcare policies.

c. The RHA will review and approve significant changes in healthcare policies and procedures.

d. The RHA will ensure that the facility maintains compliance with regulatory agencies, accrediting bodies, and standards-setting organizations.

4. Decision-Making Process:

a. Decisions made by the RHA will be based on the best interests of patient care, safety, and quality.

b. The RHA will consider input from clinical and administrative leaders, as well as relevant data, evidence-based practices, and ethical principles when making decisions.

c. Decisions made by the RHA are final and binding.

d. Physicians, dentists, and mental health clinicians are responsible for their respective health care services, are appropriately licensed, and are available to the facility frequently enough to fulfill the positions' clinical and administrative responsibilities.



5. Notification and Communication:

a. Clinical and administrative leaders within the facility are responsible for promptly communicating important patient care issues, regulatory concerns, or significant changes to the RHA.

b. The RHA will ensure that decisions are communicated effectively to relevant stakeholders within the facility.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards and regulations, including those set forth by NCCHC. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health, PC serving as the responsible health authority are expected to comply with this policy. Failure to adhere to these guidelines may result in disciplinary actions, up to and including termination of employment or contract.



# **Company Policy: Health Autonomy for Providing Care**

#### Policy Statement:

Reserve Health is committed to ensuring health autonomy in providing healthcare services within the correctional facilities under our care. This policy outlines our dedication to delivering comprehensive, evidence-based healthcare while respecting the autonomy and rights of individuals in custody, adhering to relevant laws and regulations, and promoting ethical and responsible healthcare practices.

#### Purpose:

The purpose of this policy is to establish clear guidelines for healthcare providers within correctional facilities to exercise health autonomy, safeguard inmate rights, and deliver care in a manner that is consistent with ethical standards and legal requirements.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities.

#### Policy Guidelines:

#### 1. Health Autonomy:

a. Healthcare providers have the professional autonomy to make clinical decisions based on their medical expertise, evidence-based practices, and the best interests of the patient's health.

b. Healthcare providers shall not compromise their professional judgment or ethical standards due to external pressures.

#### 2. Patient-Centered Care:

a. inmates have the right to receive healthcare services that are respectful, nondiscriminatory, and of the highest quality.

b. Healthcare services shall be provided without regard to race, color, religion, national origin, gender, sexual orientation, disability, or any other protected characteristic.

#### 3. Informed Consent:

a. inmates shall be provided with clear and understandable information about their healthcare options, including the risks and benefits of treatments.

b. Informed consent for medical procedures shall be obtained whenever applicable, following the principles of voluntariness and capacity.



4. Confidentiality and Privacy:

a. All medical information and records related to inmates' healthcare shall be kept confidential and only disclosed as required by law or with the patient's consent.

b. inmates' privacy and dignity shall be respected during medical examinations and procedures.

5. Cultural Sensitivity:

a. Healthcare providers shall be trained to be culturally sensitive and responsive to the diverse backgrounds and needs of inmates.

b. Interpreter services shall be available for inmates with limited English proficiency or other language barriers.

6. Compliance with Legal and Regulatory Requirements:

a. Reserve Health shall adhere to all applicable local, state, and federal laws and regulations governing healthcare in correctional facilities.

b. The healthcare authority shall maintain necessary licenses and certifications for healthcare services.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health providing healthcare services within correctional facilities are expected to comply with this policy. Failure to adhere to these guidelines may result in disciplinary actions, up to and including termination of employment or contract.



# **Company Policy: Continuous Quality Improvement**

Policy Statement:

Reserve Health is dedicated to providing healthcare services within correctional facilities that meet or exceed the standards established by the National Commission on Correctional Health Care (NCCHC). This policy outlines our commitment to continuous quality improvement (CQI) to enhance the delivery of healthcare while adhering to NCCHC standards, ensuring patient safety, and promoting efficient and effective healthcare practices.

#### Purpose:

The purpose of this policy is to establish clear guidelines for CQI processes within Reserve Health, aimed at systematically evaluating and enhancing the quality of healthcare services provided in correctional settings in full compliance with NCCHC standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the provision of healthcare services within correctional facilities.

#### Policy Guidelines:

1. Compliance with NCCHC Standards:

a. Reserve Health shall adhere to and comply with all applicable NCCHC standards for correctional healthcare services.

b. We will regularly review and update our policies, procedures, and practices to ensure alignment with NCCHC standards.

2. CQI Infrastructure:

a. Establish and maintain a dedicated CQI team responsible for overseeing and facilitating CQI initiatives.

b. Ensure that CQI activities are integrated into the overall healthcare delivery system.

3. Data Collection and Analysis:

a. Collect and analyze relevant healthcare data, including clinical outcomes, patient satisfaction, and incident reports.

b. Identify areas for improvement based on data-driven insights.

4. Setting Performance Goals:



a. Set clear, measurable performance goals and quality benchmarks aligned with NCCHC standards.

b. Goals should be challenging yet attainable, with a focus on enhancing patient care and safety.

5. CQI Projects and Initiatives:

a. Develop and implement CQI projects and initiatives to address identified areas for improvement.

b. Allocate necessary resources and assign responsibility for each project.

6. Monitoring and Evaluation:

a. Regularly monitor and evaluate the progress and outcomes of CQI projects.

b. Conduct root cause analysis when unexpected outcomes or issues arise.

7. Feedback and Communication:

a. Encourage open and transparent communication among healthcare providers, administrators, and staff.

b. Solicit input from inmates when appropriate to gather feedback on healthcare services.

8. Training and Education:

a. Provide ongoing training and education to staff on CQI principles, NCCHC standards, and best practices.

b. Ensure that staff members are aware of their roles and responsibilities in CQI efforts.

9. Documentation and Reporting:

a. Maintain comprehensive records of CQI activities, including project plans, progress reports, and outcomes.

b. Prepare and submit required reports to NCCHC or other relevant regulatory bodies as necessary.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC requirements, and best practices in CQI. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in CQI efforts. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Correctional Facility Policy on Informed Consent for Psychotropic Medications**

#### **Policy Statement**

Reserve Health is committed to upholding inmates' rights to participate in healthcare decisions. This policy establishes the guidelines for obtaining informed consent from inmates before initiating any psychotropic medication, ensuring that such consent is given voluntarily, based on a clear understanding of the proposed treatment.

#### Purpose

- To ensure inmates are fully informed about the benefits, risks, and alternatives to the use of psychotropic medications.

- To respect and uphold the autonomy of inmates in making healthcare decisions.

- To comply with legal, ethical, and professional standards governing informed consent in healthcare.

#### Scope

This policy applies to all healthcare providers, including psychiatrists, psychologists, nurses, and any other medical staff involved in the prescribing, administering, or managing psychotropic medications within the correctional facility.

#### Definitions

- Psychotropic Medications: Medications used to treat psychiatric disorders and affect mood, perception, or behavior.

- Informed Consent: A process by which a patient voluntarily agrees to a proposed medical treatment or intervention after being informed of the benefits, risks, alternatives, and potential consequences of accepting or declining the treatment.

#### Policy Guidelines

1. Information Provision: Before prescribing any psychotropic medication, healthcare providers must ensure that the inmate understands:

- The nature of their condition and the reason the medication is recommended.

- The benefits of the proposed medication, as well as its common and serious side effects.
- Any reasonable alternatives to the proposed medication, including their benefits and risks.



- The likely consequences of not receiving the medication.
- The inmate's right to refuse treatment.

2. Capacity Assessment: The healthcare provider must assess the inmate's capacity to make informed healthcare decisions. This involves determining whether the inmate can understand the information provided, appreciate the consequences of their decisions, and communicate their consent or refusal.

3. Voluntary Consent: Consent must be obtained without coercion or undue influence. inmates must have the opportunity to ask questions and receive satisfactory answers. Consent given under pressure or duress is not considered valid.

4. Documentation: The process of obtaining informed consent, including the information provided to the inmate and the inmate's decision, must be thoroughly documented in the inmate's health record. The documentation should reflect that the inmate understood the information and voluntarily consented to the treatment.

5. Consent Withdrawal: inmates can withdraw their consent at any time. The policy for managing consent withdrawal should be explained, including any potential health consequences of discontinuing the medication.

6. Special Considerations: For inmates with impaired decision-making capacity, healthcare providers must follow legal and ethical guidelines for obtaining consent, which may involve legal guardians or court orders, in accordance with state and federal laws.

Training and Compliance

- All staff involved in the prescribing and administering psychotropic medications will receive training on this informed consent policy.

- Compliance with this policy will be monitored through regular audits of medical records and staff performance evaluations.

Policy Review and Updates

This policy will be reviewed annually and updated as necessary to reflect changes in legal, ethical, and clinical standards related to informed consent and the use of psychotropic medications.



# **Company Policy: Patient Privacy of Care**

Policy Statement:

Reserve Health is dedicated to safeguarding the privacy and confidentiality of healthcare services provided to inmates within correctional facilities. This policy outlines our commitment to upholding the highest standards of patient privacy while delivering quality healthcare, complying with relevant laws and regulations, and respecting the rights and dignity of individuals in our care.

#### Purpose:

The purpose of this policy is to establish clear guidelines for ensuring the privacy and confidentiality of healthcare services within the correctional setting. It is our goal to protect the sensitive health information of inmates and to maintain their trust while delivering essential medical care.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities.

#### Policy Guidelines:

1. Confidentiality and Privacy:

a. All medical information and records related to inmates' healthcare shall be kept confidential and only disclosed as required by law or with the patient's consent.

b. Healthcare providers shall respect the privacy and dignity of inmates during medical examinations and procedures.

2. Access to Healthcare Records:

a. Access to inmates' healthcare records shall be restricted to authorized healthcare personnel directly involved in the patient's care.

b. inmates shall not have unrestricted access to their own healthcare records, but they have the right to request copies in accordance with applicable laws and regulations.

3. Electronic Health Records (EHR):

a. Reserve Health shall implement secure electronic health record (EHR) systems to protect the confidentiality and integrity of inmates' healthcare data.

b. EHR access shall be role-based, with strict controls to prevent unauthorized access.



4. Release of Information:

a. inmates' healthcare information shall only be released to individuals or entities authorized by law or with the inmate's written consent.

b. Reserve Health shall comply with all applicable laws, including the Health Insurance Portability and Accountability Act (HIPAA), when disclosing health information.

5. Training and Education:

a. All healthcare personnel shall receive training on patient privacy and confidentiality, including the importance of maintaining the privacy of healthcare information.

b. Staff shall be aware of and adhere to their responsibilities for maintaining confidentiality.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively protect the privacy and confidentiality of inmates' healthcare information. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medical Records**

Policy Statement:

Reserve Health is committed to maintaining accurate, secure, and confidential medical records for the care provided to inmates within correctional facilities. This policy outlines our commitment to upholding the highest standards in the creation, maintenance, and access to medical records, in compliance with applicable laws, regulations, and ethical principles.

#### Purpose:

The purpose of this policy is to establish clear guidelines for the creation, maintenance, access, and security of medical records for inmates receiving healthcare services within correctional facilities. It is our goal to ensure the accuracy, confidentiality, and accessibility of these records.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in creating, maintaining, or accessing medical records within correctional facilities.

#### Policy Guidelines:

#### 1. Medical Record Creation:

a. A medical record shall be created for each inmate upon admission to the correctional facility's healthcare system.

b. Medical records shall include comprehensive and up-to-date information regarding each inmate's healthcare history, assessments, treatments, and outcomes.

2. Accuracy and Completeness:

a. All entries in the medical records shall be accurate, complete, and legible.

b. Corrections to medical records shall be made in accordance with established correctional facility and Reserve Health protocols, with a clear audit trail of changes.

3. Security and Access Control:

a. Access to medical records shall be restricted to authorized healthcare personnel directly involved in the patient's care.

b. Access shall be role-based, with strict controls to prevent unauthorized access.

c. Any access or release of medical records beyond authorized personnel shall require proper authorization and follow applicable laws and regulations.



4. Electronic Health Records (EHR):

a. Reserve Health shall implement secure electronic health record (EHR) systems to enhance the accuracy and accessibility of medical records.

b. EHR access shall be password-protected and compliant with applicable privacy and security standards.

5. Retention and Disposal:

a. Medical records shall be retained in accordance with federal, state, and local laws and regulations, including any retention requirements specified by the correctional facility.

b. Records shall be securely disposed of in accordance with established protocols when they are no longer required to be retained.

6. Release of Information:

a. Disclosure of medical information shall be made only as required by law, with proper authorization, or in response to valid court orders or subpoenas.

b. Reserve Health shall comply with all applicable laws, including the Health Insurance Portability and Accountability Act (HIPAA), when disclosing health information.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

#### Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and adhere to the guidelines for medical record creation, maintenance, and access. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Written and Verbal Orders for Care**

#### Policy Statement:

Reserve Health is committed to providing timely and high-quality medical care to inmates within correctional facilities. This policy outlines the guidelines and procedures for the issuance, documentation, and implementation of written and verbal orders for medical care in compliance with applicable laws, regulations, and best practices.

#### Purpose:

The purpose of this policy is to establish clear standards for the issuance and documentation of both written and verbal medical orders, ensuring the efficient delivery of healthcare services to inmates within the correctional facility while maintaining accuracy and compliance with medical and legal requirements.

#### Scope:

This policy applies to all healthcare providers, including physicians, nurse practitioners, physician assistants, nurses, and any other qualified healthcare personnel, employed by Reserve Health who provide medical care within correctional facilities.

#### Policy Guidelines:

#### 1. Written Orders:

a. Written medical orders shall be issued for all non-emergency medical treatments, medications, diagnostic tests, and procedures.

b. All written orders shall include the inmate's full name, date of birth, identification number, and a clear description of the treatment, medication, or procedure ordered.

c. Medical orders shall be signed and dated by the prescribing healthcare provider.

d. Written orders shall be entered into the inmate's medical record promptly.

#### 2. Verbal Orders:

a. Verbal orders may be given in urgent situations or when immediate action is required.

b. Verbal orders shall only be issued by qualified healthcare providers.

c. The person receiving the verbal order shall repeat it back to the prescribing provider for confirmation.

d. All verbal orders shall be documented in the inmate's medical record as soon as possible after the order is given.

3. Verification of Verbal Orders:



a. Verbal orders shall be promptly countersigned by the prescribing provider (in writing) within 5 days.

b. Verbal orders shall be reviewed by the Medical Director or their designee on a regular basis to ensure compliance with this policy.

## 4. Documentation:

a. All medical orders, whether written or verbal, shall be accurately documented in the inmate's medical record, including the date and time of issuance.

b. Documentation shall also include the reason for the order, any relevant clinical findings, and the inmate's response to treatment as appropriate.

## 5. Order Authentication:

a. Healthcare providers shall authenticate all orders using their unique identification and credentials.

b. The healthcare provider's signature or electronic authentication shall signify approval and responsibility for the order.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and adhere to the guidelines for issuing and documenting medical orders. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Procedure in the Event of a Death**

#### Policy Statement:

Reserve Health is committed to ensuring the compassionate and thorough handling of deaths that occur within correctional facilities under our care, in strict compliance with the National Commission on Correctional Health Care (NCCHC) standards. This policy outlines the procedures and responsibilities for addressing deaths, preserving evidence, notifying authorities, and providing support to affected parties.

#### Purpose:

The purpose of this policy is to establish clear and standardized procedures for responding to and managing deaths within correctional facilities. These procedures are designed to ensure the highest level of professionalism, transparency, and compliance with NCCHC standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the event of an inmate's death.

#### Policy Guidelines:

#### 1. Preservation of Evidence:

a. In the event of an inmate's death, all healthcare personnel shall take immediate steps to preserve evidence and the integrity of the scene.

b. Preserve all relevant medical records, equipment, medications, and physical evidence as needed for investigation.

#### 2. Notification of Authorities:

a. Promptly notify appropriate authorities, including law enforcement, medical examiner's office, and the facility's administration, in accordance with local, state, and federal regulations.

b. Cooperate fully with law enforcement agencies and medical examiners during investigations.

3. Notification of Next of Kin or Legal Representatives:

a. In accordance with applicable laws and regulations, make every reasonable effort to notify the inmate's next of kin or legal representative of the death.

b. Coordinate with facility authorities to facilitate communication with the inmate's family while respecting confidentiality and legal requirements.

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4. Post-Mortem Examination:

a. In cases of unexpected or unexplained deaths, or as required by law, request a postmortem examination or autopsy, and fully cooperate with the medical examiner's office.

b. Ensure that the post-mortem examination is performed in a manner consistent with medical and forensic standards.

5. Documentation:

a. Thoroughly document all aspects of the inmate's death, including observations, medical care provided, responses to emergencies, and any other pertinent information.

b. Ensure that the documentation is timely, accurate, and complies with NCCHC standards.

6. Support for Staff and inmates

a. Provide emotional support to staff who may be affected by the death.

b. Offer grief counseling or access to counseling services for inmates who may be emotionally impacted by the loss.

7. Review and Quality Improvement:

a. Conduct a comprehensive review of the circumstances surrounding the inmate's death to identify opportunities for improvement.

b. A comprehensive review should include participants from all relevant departments and should include both a medical and mental health review.

c. The comprehensvie review must take place within 30-days of the death. If information is known to be unavailable within the first 30-days, an additional review shall be scheduled upon retention of complete information. This may include portions or entire autopsy results.

b. Implement corrective actions as necessary to prevent similar incidents in the future.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

#### Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the procedures outlined herein. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Grievance Process Using a Kiosk**

#### Policy Statement:

Reserve Health is committed to providing inmates within correctional facilities under our care with a fair and accessible grievance process. This policy outlines the procedures for inmates to file grievances using a kiosk and the responsibilities of Reserve Health in addressing and resolving these grievances promptly and impartially.

#### Purpose:

The purpose of this policy is to establish clear guidelines for the implementation of a grievance process using a kiosk, which ensures that inmates have a confidential and efficient means of expressing their concerns and seeking resolution of issues related to their healthcare while incarcerated.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the grievance process using a kiosk.

# Policy Guidelines:

# 1. Grievance Kiosk Setup:

a. Reserve Health shall ensure a designated kiosk or computer terminal within the correctional facility has been established that is easily accessible to inmates.

b. The kiosk shall be equipped with a user-friendly interface for inmates to submit grievances electronically.

# 2. Access to Kiosk:

a. inmates shall be informed of the location and availability of the grievance kiosk.

b. Access to the kiosk should be available during designated hours to ensure that inmates have ample opportunity to submit grievances.

3. Grievance Submission:

a. inmates may use the kiosk to electronically submit grievances related to their healthcare, including issues such as medical care, medication administration, and staff conduct.

b. inmates shall receive guidance on how to complete the grievance form, and the process shall be designed to accommodate individuals with disabilities or language barriers.

4. Confidentiality:



a. Grievance submissions shall be confidential, and measures shall be in place to protect the identity of the inmate filing the grievance.

b. Access to grievance information shall be restricted to authorized personnel responsible for addressing and resolving grievances.

# 5. Response and Resolution:

a. Reserve Health shall establish procedures for reviewing and responding to grievances submitted through the kiosk in a timely manner, generally within 24-48 hours.

b. Grievances shall be thoroughly investigated, and a written response shall be provided to the inmate, outlining any actions taken or decisions made to address the grievance.

# 6. Appeals Process:

a. inmates who are dissatisfied with the response to their grievance shall be informed of the process for filing an appeal.

b. Appeals shall be reviewed by a higher authority within Reserve Health to ensure fairness and impartiality.

# 7. Documentation and Reporting:

a. Reserve Health shall maintain comprehensive records of all grievances submitted through the kiosk, including the initial grievance, responses, and any appeal decisions.

b. Periodic reports on the status and outcomes of grievances shall be generated for internal monitoring and compliance.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC requirements, and best practices in grievance handling. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the grievance process using the kiosk. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: On-Call Provider Contact**

# Policy Statement:

Reserve Health is committed to ensuring timely and effective medical care for inmates within correctional facilities, even during non-standard hours when on-call providers are required. This policy outlines the procedures for on-call provider contact, expectations, and responsibilities to ensure uninterrupted and quality healthcare services in the correctional facility setting.

# Purpose:

The purpose of this policy is to establish clear guidelines for on-call healthcare providers and their contact procedures while providing medical services to inmates within correctional facilities. This policy aims to ensure that inmates have access to medical care at all times, including emergencies, weekends, and holidays.

#### Scope:

This policy applies to all healthcare providers, including physicians, nurse practitioners, physician assistants, and other qualified medical personnel, employed by Reserve Health who are responsible for on-call services in correctional facilities.

# Policy Guidelines:

# 1. On-Call Schedule:

a. Reserve Health shall establish an on-call schedule to ensure coverage during non-standard hours, including evenings, weekends, and holidays.

b. The schedule shall be communicated to all relevant personnel, including facility staff, healthcare providers, and administrators.

# 2. Contact Information:

a. On-call healthcare providers shall maintain up-to-date contact information with Reserve Health and the correctional facility.

b. The provider's contact information, including phone number, email address, and backup contact, shall be readily accessible to facility staff and administrators.

# 3. Availability and Responsiveness:

a. On-call healthcare providers shall be available and responsive to calls from the correctional facility during their designated on-call hours.

b. Providers shall acknowledge and respond promptly to all communication from the facility, including phone calls and emails.



# 4. Clinical Decision-Making:

a. On-call providers are expected to exercise clinical judgment and provide guidance to facility staff for urgent or emergent medical situations.

b. Providers shall adhere to the established protocols and policies for providing care during on-call hours.

# 5. Medication Orders:

a. On-call providers may issue medication orders and treatment recommendations for inmates when necessary, following established protocols and within their scope of practice.

b. Medication orders shall be documented, and facility staff shall ensure accurate administration and documentation.

# 6. Documentation:

a. On-call providers shall maintain accurate and thorough records of all interactions, assessments, and decisions made during on-call hours.

b. Documentation shall be completed promptly and in compliance with established policies and regulations.

# 7. Escalation Procedures:

a. If an on-call provider is unable to address a medical issue remotely, they shall follow escalation procedures, which may include recommending transfer to a hospital or seeking additional consultation.

# 8. Quality Assurance:

a. Reserve Health shall implement a quality assurance program to monitor the effectiveness and responsiveness of on-call services.

b. Feedback and performance evaluations shall be conducted regularly to ensure the highest level of care during on-call hours.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, regulations, and best practices in on-call services. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All healthcare providers and staff involved in on-call services within correctional facilities are expected to comply with this policy. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Healthy Lifestyle Promotion Policy**

#### Policy Statement:

Reserve Health is dedicated to promoting and supporting healthy lifestyles for inmates within correctional facilities. This policy outlines our commitment to providing education, resources, and opportunities for inmates to make informed choices that contribute to their overall health and well-being during their incarceration.

#### Purpose:

The purpose of this policy is to establish clear guidelines for the promotion of healthy lifestyles among inmates within correctional facilities. It aims to provide inmates with information and resources that empower them to make healthier choices while respecting their rights and dignity.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in promoting healthy lifestyles among inmates.

#### Policy Guidelines:

# 1. Health Education Programs:

a. Reserve Health shall develop and implement health education programs that address various aspects of healthy living, including nutrition, physical activity, mental health, substance abuse prevention, and chronic disease management.

b. Educational materials shall be culturally sensitive and accessible to inmates with diverse backgrounds and literacy levels.

# 2. Healthy Diet and Nutrition:

a. inmates shall be provided with balanced and nutritious meals that meet dietary guidelines established by reputable health organizations.

b. Educational materials and workshops shall be provided to inmates to promote healthy eating habits and portion control.

# 3. Physical Activity Opportunities:

a. Facilities shall provide opportunities for inmates to engage in regular physical activity, including exercise classes, recreational activities, and access to fitness equipment.

b. inmates shall receive information on the benefits of physical activity and be encouraged to participate in regular exercise routines.



4. Mental Health and Stress Management:

a. Mental health resources and support shall be available to inmates, including counseling services and access to mental health professionals.

b. Stress management techniques, such as mindfulness and relaxation exercises, shall be promoted to help inmates cope with the challenges of incarceration.

5. Substance Abuse Prevention and Treatment:

a. Educational programs on substance abuse prevention shall be offered to inmates to raise awareness about the risks and consequences of drug and alcohol use.

b. inmates with substance abuse issues shall have access to treatment and rehabilitation services as needed.

6. Tobacco Cessation Programs:

a. Medical staff shall offer tobacco cessation programs to inmates who smoke, providing them with support and resources to quit smoking.

b. Smoking cessation materials and counseling services shall be readily available.

7. Access to Healthcare Services:

a. inmates shall have access to routine healthcare services, including preventive screenings, vaccinations, and chronic disease management, to support their overall health.

b. Timely medical care shall be provided as needed to address health concerns and promote early intervention.

8. Monitoring and Evaluation:

a. The effectiveness of health promotion programs and initiatives shall be monitored and evaluated regularly through feedback from inmates and relevant data analysis.

b. Program improvements shall be made based on feedback and evaluation findings.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively support the promotion of healthy lifestyles among inmates. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Infection Disease Prevention and Control**

#### Policy Statement:

Reserve Health is dedicated to the prevention and control of infectious diseases within correctional facilities, ensuring the health and safety of inmates, staff, and the community. This policy outlines our commitment to maintaining the highest standards of infection prevention and control practices in compliance with applicable laws, regulations, and best practices.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the prevention, monitoring, and management of infectious diseases within correctional facilities. It is our goal to minimize the risk of disease transmission and protect the health and well-being of all individuals in our care.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in infection prevention and control efforts.

# Policy Guidelines:

1. Infection Prevention and Control Team:

a. Reserve Health shall designate an infection prevention and control team responsible for overseeing and coordinating all infection control activities within correctional facilities.

b. The team shall include trained healthcare personnel with expertise in infection prevention.

2. Risk Assessment and Surveillance:

a. Regularly assess the risk of infectious diseases within the correctional facility population, including screening and testing inmates as appropriate.

b. Conduct surveillance to detect and monitor infectious diseases, including outbreaks, and report findings to appropriate authorities.

3. Infection Control Practices:

a. Implement and maintain infection control practices, including hand hygiene, respiratory hygiene, and standard precautions.

b. Ensure that all healthcare providers and staff receive training on infection control protocols.

4. Isolation and Quarantine:



a. Isolate and quarantine inmates with suspected or confirmed infectious diseases according to established protocols and guidelines.

b. Maintain appropriate isolation and quarantine facilities to prevent disease transmission.

5. Vaccination Programs:

a. Offer vaccination programs to inmates for preventable infectious diseases, such as influenza, hepatitis, and others, in accordance with established guidelines and protocols.

b. Maintain records of inmate vaccinations and immunization status.

6. Cleaning and Disinfection:

a. Establish and maintain cleaning and disinfection protocols for common areas, cells, medical equipment, and other high-touch surfaces.

b. Use appropriate disinfectants and cleaning agents as recommended by healthcare authorities.

7. Personal Protective Equipment (PPE):

a. Ensure the availability and appropriate use of PPE, including masks, gloves, gowns, and eye protection, for healthcare providers and staff.

b. Train personnel on the correct use, donning, and doffing of PPE.

8. Communication and Education:

a. Communicate infection prevention and control policies and procedures to all relevant personnel, including staff and inmates.

b. Provide educational materials and resources to inmates on hygiene and disease prevention.

9. Outbreak Management:

a. Develop outbreak management plans to respond promptly and effectively to infectious disease outbreaks within the facility.

b. Collaborate with public health authorities when necessary.

10. Reporting and Documentation:

a. Maintain accurate records of infectious disease cases, interventions, and outcomes.

b. Report notifiable infectious diseases to the appropriate health authorities in accordance with legal requirements.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:



All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in infection prevention and control efforts. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Mandatory Reporting to the Health Department**

**Policy Statement:** 

Reserve Health is committed to complying with all applicable laws and regulations, including mandatory reporting requirements to local, state, and federal health departments. This policy outlines our commitment to timely and accurate reporting of communicable diseases, outbreaks, and other public health concerns to relevant health authorities in accordance with legal obligations and best practices.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the mandatory reporting of communicable diseases and public health incidents to the appropriate health department authorities. It is our goal to ensure the protection of public health and the safety of individuals within correctional facilities.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the reporting of communicable diseases or public health incidents.

#### Policy Guidelines:

1. Awareness and Training:

a. Reserve Health shall provide training to all employees and contractors on the legal requirements and procedures for mandatory reporting to health departments.

b. Training shall include guidance on recognizing reportable diseases and incidents.

#### 2. Identification of Reportable Diseases:

a. Healthcare providers and staff shall promptly identify and diagnose reportable communicable diseases as defined by local, state, and federal health departments.

b. inmates with suspected or confirmed reportable diseases shall be isolated, treated, and reported to health authorities as required.

#### 3. Timely Reporting:

a. Reserve Health shall ensure that all mandatory reports to health departments are made promptly, typically within the specified timeframe defined by relevant laws and regulations.

b. Designated personnel shall be responsible for submitting reports to health authorities.



4. Data Accuracy:

a. All reports submitted to health departments shall be accurate and complete, including patient demographics, diagnosis, and other required information.copies of reports submitted to health departments and any related correspondence.

b. Records shall be retained in accordance with applicable laws and regulations.

b. Corrections and updates to reports, if necessary, shall be submitted promptly.

5. Outbreak Reporting:

a. In the event of a disease outbreak or public health incident within a correctional facility, Reserve Health shall notify the appropriate health department authorities immediately.

b. Collaborate with health authorities to manage and control outbreaks effectively.

# 6. Documentation:

a. Reserve Health shall maintain comprehensive records of all mandatory reports, including 7. Confidentiality:

a. Ensure the confidentiality of patient information and comply with privacy laws, such as the Health Insurance Portability and Accountability Act (HIPAA), when reporting to health departments.

8. Compliance Monitoring:

a. Periodically review and audit compliance with mandatory reporting requirements to identify and address any issues or gaps.

b. Implement corrective actions and updates to policies and procedures as needed.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in mandatory reporting to health departments. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Preventive Health Services for Patients**

#### **Policy Statement:**

Reserve Health is committed to providing comprehensive preventive health services to patients within correctional facilities. This policy outlines our dedication to promoting and maintaining the overall health and well-being of inmates by offering evidence-based preventive healthcare measures in compliance with applicable laws, regulations, and recognized healthcare standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the delivery of preventive health services to inmates within correctional facilities. It is our goal to identify and address potential health risks, improve health outcomes, and reduce the burden of preventable diseases among the inmate population.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the delivery of preventive health services to inmates.

# Policy Guidelines:

# 1. Preventive Health Assessments:

a. inmates shall undergo a comprehensive preventive health assessment upon admission to the correctional facility, including medical history, physical examination, and risk assessments.

b. Periodic preventive health assessments shall be conducted in accordance with established schedules and clinical guidelines.

# 2. Immunizations:

a. inmates shall be offered age-appropriate vaccinations and immunizations in accordance with recommendations from reputable healthcare authorities.

b. Vaccine records shall be maintained and updated as needed.

# 3. Screening and Testing:

a. Routine screenings and testing for communicable diseases, chronic conditions, and other health risks shall be conducted as appropriate based on clinical guidelines and inmate risk factors.

b. inmates with positive screening results shall receive appropriate follow-up care and treatment.



4. Health Education and Counseling:

a. Provide health education and counseling to inmates on various preventive health topics, including nutrition, physical activity, substance abuse prevention, and sexual health.

b. Educational materials and resources shall be accessible to inmates with diverse backgrounds and literacy levels.

5. Tobacco Cessation Programs:

a. Offer tobacco cessation programs and resources to inmates who smoke, with the goal of reducing smoking rates and promoting healthier choices.

b. Smoking cessation materials and counseling services shall be readily available.

6. Mental Health and Substance Abuse Prevention:

a. Promote mental health awareness and provide resources for stress management and emotional well-being.

b. Conduct substance abuse prevention programs to raise awareness about the risks and consequences of drug and alcohol use.

7. Chronic Disease Management:

a. inmates with chronic health conditions shall receive appropriate management and treatment to prevent complications and improve health outcomes.

b. Medication adherence and regular follow-up care shall be emphasized.

8. Documentation and Reporting:

a. Maintain accurate records of preventive health services provided to inmates, including assessments, screenings, immunizations, and counseling sessions.

b. Periodic reports on preventive health activities shall be generated for internal monitoring and compliance.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the delivery of preventive health services to inmates. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medical Surveillance of inmate Workers**

Policy Statement:

Reserve Health is committed to ensuring the health and well-being of inmate workers who provide labor within correctional facilities. This policy outlines our dedication to conducting medical surveillance, assessing occupational health risks, and implementing necessary preventive measures to safeguard the health of inmate workers, in compliance with applicable laws, regulations, and recognized healthcare standards.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the medical surveillance of inmate workers who are also patients of Reserve Health within correctional facilities. It aims to identify and mitigate occupational health risks, provide necessary medical care, and promote the safety and well-being of inmate workers while complying with all relevant legal and ethical standards.

Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the medical surveillance and healthcare provision for inmate workers.

Policy Guidelines:

1. Identification of inmate Workers:

a. Reserve Health shall identify inmates engaged in labor or work assignments within correctional facilities.

b. inmate workers shall receive an initial health assessment upon assignment to work tasks, including an evaluation of their medical fitness for specific job duties.

2. Periodic Health Assessments:

a. Conduct periodic health assessments for inmate workers based on the nature of their work and associated health risks, in accordance with recognized healthcare standards.

b. Assessments may include medical history, physical examinations, and relevant screening tests.

3. Occupational Health Risks:

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a. Identify and assess occupational health risks associated with specific work assignments, including exposure to hazardous materials, physical demands, and potential injuries.

b. Develop and implement preventive measures to mitigate identified risks.

4. Safety Training and Education:

a. Provide safety training and education to inmate workers to raise awareness of workplace hazards and promote safe work practices.

b. Ensure that inmates are informed of their rights related to workplace safety.

5. Injury and Illness Reporting:

a. Establish procedures for the prompt reporting of work-related injuries, illnesses, or health concerns by inmate workers.

b. Ensure that injured or ill inmates receive appropriate medical care and follow-up.

6. Record Keeping:

a. Maintain accurate records of health assessments, medical surveillance, and healthcare provided to inmate workers.

b. Records shall be kept confidential and in accordance with applicable privacy laws.

7. Communication with Facility Authorities:

a. Collaborate with correctional facility authorities to ensure the appropriate management and safety of inmate workers.

b. Coordinate the transfer of inmate workers to medical facilities when necessary for evaluation or treatment.

8. Continuous Improvement:

a. Periodically review and evaluate the effectiveness of the medical surveillance program for inmate workers.

b. Implement improvements and updates to enhance occupational health and safety.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the medical surveillance and healthcare provision for inmate workers. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Suicide Prevention and Intervention**

Policy Statement:

Reserve Health is dedicated to ensuring the safety and well-being of inmates within correctional facilities, with a particular focus on suicide prevention and intervention. This policy outlines our commitment to identifying individuals at risk of self-harm, implementing preventive measures, and providing timely and appropriate intervention and support in compliance with applicable laws, regulations, and recognized healthcare standards.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the prevention and intervention of suicide and self-harm among inmates within correctional facilities. It aims to provide a safe and supportive environment, identify and assess individuals at risk, and deliver timely and effective intervention and support services.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in suicide prevention and intervention efforts.

Policy Guidelines:

# 1. Risk Assessment:

a. Conduct comprehensive risk assessments of all inmates during the intake process to identify those at risk of suicide or self-harm.

b. Periodically reassess inmates' risk levels based on changes in their mental health, behavior, or circumstances.

2. Screening and Monitoring:

a. Implement regular screenings for signs of suicidal ideation, self-harm, or depression among inmates.

b. Maintain close monitoring of inmates on suicide watch or at heightened risk of self-harm.

# 3. Training and Education:

a. Provide training to correctional staff and healthcare providers on recognizing warning signs of suicide, self-harm, and mental health crises.

b. Equip staff with de-escalation techniques and communication skills to interact with at-risk inmates.



# 4. Emergency Response:

a. Establish emergency response protocols for immediate intervention in cases of suspected suicide attempts or self-harm incidents.

b. Ensure that staff are trained in CPR and first aid for prompt response to medical emergencies.

5. Suicide Prevention Programs:

a. Develop and implement suicide prevention programs that include counseling, crisis intervention, and access to mental health professionals.

b. Promote awareness and encourage inmates to seek help when needed.

6. Communication with Facility Authorities:

a. Collaborate closely with correctional facility authorities to identify and manage at-risk inmates and share vital information to prevent self-harm.

b. Coordinate with facility staff for the safety and supervision of inmates on suicide watch.

7. Documentation and Reporting:

a. Maintain accurate and confidential records of suicide risk assessments, interventions, and follow-up care.

b. Report all suicide attempts, self-harm incidents, or suspected suicidal ideation to facility authorities and regulatory agencies as required by law.

# 8. Follow-Up Care:

a. Ensure that inmates who have attempted suicide or engaged in self-harm receive appropriate medical and mental health care.

b. Develop post-incident care plans to support inmates in their recovery.

9. Support Services:

a. Provide access to mental health services, counseling, and crisis intervention to at-risk inmates.

b. Offer emotional and psychological support to inmates who have experienced suicidal ideation or self-harm incidents.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:



All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in suicide prevention and intervention efforts. Failure to adhere to these guidelines may result in disciplinary actions.

Company Policy: Contraception Management

Policy Statement:

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the management of contraception in correctional facilities, promoting reproductive health and ensuring compliance with relevant healthcare standards.

Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may be involved in the management of contraception for inmates.

Policy Guidelines:



# **Company Policy: Communication of Health Needs of Patients**

# Policy Statement:

Reserve Health is committed to facilitating effective communication regarding the health needs of patients within correctional facilities. This policy outlines our dedication to promoting transparent and secure channels of communication among healthcare providers, facility staff, patients, and relevant authorities while safeguarding patient privacy and complying with applicable laws and regulations.

# Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the communication of health needs and information related to patients within correctional facilities. It aims to ensure that essential healthcare information is shared promptly and accurately to support the well-being of patients and maintain the quality of healthcare services.

# Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and are involved in the communication of health needs and information regarding patients.

# Policy Guidelines:

1. Patient Privacy and Confidentiality:

a. Protect the privacy and confidentiality of patients' health information in accordance with applicable laws, including the Health Insurance Portability and Accountability Act (HIPAA).

b. Share patient information only with authorized individuals involved in the patient's care or as required by law.

# 2. Health Records Management:

a. Maintain accurate and up-to-date health records for all patients within correctional facilities.

b. Ensure that records are securely stored and accessible only to authorized personnel.

# 3. Secure Communication:

a. Utilize secure and confidential channels of communication, such as encrypted email systems and secure messaging platforms, to share patient information when necessary.

b. Avoid discussing sensitive patient information in common areas where it may be overheard.



# 4. Patient Consent:

a. Obtain informed and voluntary consent from patients before sharing their health information with external parties, including family members, legal representatives, or other healthcare providers.

b. Document patient consent in their medical records.

# 5. Emergency Notifications:

a. In the event of a medical emergency involving a patient, promptly notify facility authorities and relevant healthcare personnel.

b. Coordinate with facility staff to ensure the immediate response to medical emergencies.

6. Communication with Facility Staff:

a. Collaborate closely with correctional facility staff to share important health information, including medication administration, treatment plans, and urgent medical concerns.

b. Ensure that facility staff are informed of any special medical needs or accommodations required for patients.

# 7. Transfer of Care:

a. When patients are transferred to or from correctional facilities, communicate relevant health information, medical records, and treatment plans to ensure continuity of care.

b. Ensure that transfer processes comply with legal and healthcare standards.

8. Language and Communication Barriers:

a. Address language and communication barriers that may impede the effective exchange of health information.

b. Provide interpreter services or language assistance as needed to facilitate communication with patients.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the secure and confidential communication of health needs and information regarding patients. Failure to adhere to these guidelines may result in disciplinary actions.





# **Company Policy: Patient Safety**

#### Policy Statement:

Reserve Health is committed to ensuring the safety and well-being of all patients under our care within correctional facilities. This policy outlines our dedication to maintaining a culture of patient safety, implementing best practices, and complying with applicable laws and regulations to prevent harm and promote a safe healthcare environment.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for patient safety within correctional facilities. It aims to minimize the risk of adverse events, errors, and injuries, prioritize patient safety, and provide a framework for continuous improvement in healthcare delivery.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and are involved in the care of patients.

Policy Guidelines:

# 1. Patient-Centered Care:

a. Provide patient-centered care that respects the rights, dignity, and autonomy of each individual.

b. Involve patients in their care decisions and encourage them to communicate their concerns and preferences.

# 2. Patient Identification:

a. Implement strict protocols for verifying patient identity using at least two patient identifiers before any care or treatment is administered.

b. Ensure accurate and consistent patient identification across all healthcare records and documentation.

3. Effective Communication:

a. Foster open and effective communication among healthcare providers, staff, and patients to enhance care coordination and prevent misunderstandings.

b. Encourage the reporting of patient safety concerns and incidents without fear of retaliation.

4. Medication Safety:



a. Maintain safe medication practices, including accurate prescription, dispensing, administration, and documentation of medications.

b. Educate patients about their medications, including potential side effects and interactions.

5. Infection Prevention and Control:

a. Adhere to strict infection prevention and control practices to minimize the risk of healthcare-associated infections (HAIs).

b. Educate healthcare providers and staff on proper hand hygiene, isolation precautions, and the use of personal protective equipment (PPE).

# 6. Fall Prevention:

a. Implement fall prevention measures, including risk assessments and interventions, to protect patients from injuries related to falls.

b. Ensure that patients at risk of falls receive appropriate care and monitoring.

# 7. Emergency Preparedness:

a. Develop and maintain emergency response and preparedness plans to address medical emergencies and natural disasters.

b. Conduct regular drills and training exercises to ensure healthcare providers are wellprepared for emergency situations.

#### 8. Patient Education:

a. Provide patients with educational materials and information related to their healthcare, treatment options, and health promotion.

b. Support patients in making informed decisions about their care and managing their health.

# 9. Quality Improvement:

a. Establish mechanisms for ongoing quality improvement initiatives to identify areas of improvement and implement corrective actions.

b. Promote a culture of continuous learning and patient safety improvement.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively contribute to patient safety efforts. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Elder Abuse Prevention and Reporting**

Policy Statement:

Reserve Health is committed to preventing and addressing elder abuse within correctional facilities where elderly individuals are under our care. This policy outlines our dedication to creating a safe and respectful environment for elderly patients, educating staff, promptly identifying and reporting signs of elder abuse, and complying with all applicable laws and regulations.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for preventing and addressing elder abuse among elderly individuals in correctional facilities. It aims to protect the rights, dignity, and well-being of elderly patients and ensure that all staff are aware of their responsibilities in preventing and responding to elder abuse.

Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and may interact with elderly patients.

#### Policy Guidelines:

1. Respect for Elderly Patients:

a. Treat all elderly patients with respect, dignity, and empathy, recognizing their unique needs and vulnerabilities.

b. Encourage staff to engage in compassionate and person-centered care for elderly patients.

2. Education and Training:

a. Provide education and training to all staff on recognizing the signs of elder abuse, including physical, emotional, financial, and neglectful abuse.

b. Ensure that staff are aware of their reporting obligations and the procedures for reporting suspected abuse.

#### 3. Prevention Measures:

a. Implement measures to prevent elder abuse, including enhanced supervision, regular monitoring, and clear communication channels for patients to report concerns.



b. Encourage elderly patients to share any mistreatment or concerns with healthcare providers or facility staff.

4. Identification and Reporting:

a. Healthcare providers and staff shall promptly identify and report any signs or suspicions of elder abuse to appropriate authorities, such as facility administrators and law enforcement, as required by law.

b. Encourage a culture of reporting, where staff feel comfortable reporting any concerns without fear of retaliation.

5. Collaboration with Authorities:

a. Collaborate with facility administrators, regulatory agencies, and law enforcement as necessary to investigate and address allegations of elder abuse.

b. Ensure that any investigations are conducted impartially and thoroughly.

6. Support for Victims:

a. Provide support and medical care to elderly patients who have been victims of abuse, including appropriate medical evaluations and psychological support.

b. Offer information on available resources and legal options to victims.

7. Documentation:

a. Maintain accurate and detailed records of suspected elder abuse incidents, including observations, reports, and actions taken.

b. Ensure that documentation complies with legal requirements and healthcare standards.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively contribute to the prevention and reporting of elder abuse. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Employee Safety in the Provision of Health Care**

Policy Statement:

Reserve Health is committed to ensuring the safety and well-being of our employees who provide medical and mental health care within correctional facilities. This policy outlines our dedication to creating a secure work environment, minimizing risks, and complying with all applicable laws and regulations to protect the safety of our staff while delivering quality healthcare services to inmates.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for employee safety while providing medical and mental health care in correctional facilities. It aims to identify potential risks, implement safety measures, and promote a culture of safety among all employees.

# Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities and are involved in the delivery of medical and mental health care to inmates.

# Policy Guidelines:

# 1. Risk Assessment:

a. Conduct regular risk assessments to identify potential safety hazards and risks within correctional facilities.

b. Assess the specific risks associated with providing medical and mental health care to inmates.

# 2. Training and Education:

a. Provide comprehensive safety training and education to all employees, including orientation on security protocols, de-escalation techniques, and emergency response procedures.

b. Ensure that staff are trained to recognize and respond to potential security threats.

# 3. Security Measures:

a. Implement security measures, including access controls, alarm systems, and surveillance cameras, to enhance the safety of healthcare staff within correctional facilities.

b. Collaborate closely with correctional facility security personnel to address safety concerns.



4. Personal Protective Equipment (PPE):

a. Ensure that healthcare providers have access to and use appropriate PPE as required to minimize exposure to infectious diseases and other potential hazards.

b. Provide training on the proper use and disposal of PPE.

5. Patient Management:

a. Implement strategies for managing potentially aggressive or disruptive patients, including the use of verbal de-escalation techniques and restraint when necessary and in accordance with relevant regulations.

b. Maintain a safe distance and establish escape routes when assessing or treating potentially volatile patients.

#### 6. Emergency Response:

a. Develop and practice emergency response plans for various scenarios, including medical emergencies, security breaches, and natural disasters.

b. Conduct regular drills to ensure that staff are prepared to respond effectively to emergencies.

7. Communication and Reporting:

a. Encourage open communication among staff to report safety concerns, incidents, or potential risks promptly.

b. Ensure that incidents and concerns are documented and addressed in accordance with internal policies.

#### 8. Support and Counseling:

a. Provide access to counseling and support services for employees who have experienced traumatic incidents or emotional stress related to their work.

b. Promote a culture of peer support and mental health awareness.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

#### Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in maintaining their safety while delivering medical and mental health care within correctional facilities. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medical Staff Credentials**

Policy Statement:

Reserve Health is dedicated to ensuring that all medical staff providing healthcare services within correctional facilities possess the necessary qualifications, credentials, and competency to deliver safe and high-quality care to inmates. This policy outlines our commitment to maintaining rigorous credentialing standards, complying with applicable regulations, and upholding the highest standards of professional competence and ethical conduct.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the credentialing of medical staff, including physicians, nurses, nurse practitioners, physician assistants, and other healthcare professionals. It aims to verify the qualifications and competency of healthcare providers to deliver healthcare services in correctional facilities.

#### Scope:

This policy applies to all medical staff employed or contracted by Reserve Health who provide healthcare services within correctional facilities.

#### Policy Guidelines:

1. Eligibility and Qualifications:

a. All medical staff must possess appropriate education, licensure, and qualifications to practice in their respective roles within the correctional healthcare setting.

b. Verify the credentials and qualifications of medical staff before employment or contracting.

2. Licensure and Certification:

a. Ensure that all medical staff maintain current and valid licenses or certifications required for their specific roles and the jurisdiction in which they practice.

b. Regularly verify the status of licenses and certifications to ensure compliance.

3. Education and Training:

a. Support ongoing education and training for medical staff to enhance their knowledge and skills.

b. Encourage participation in continuing education, professional development, and relevant certifications.



4. Background Checks:

a. Conduct comprehensive background checks, including criminal background checks and credential verifications, for all medical staff prior to hiring or contracting.

b. Monitor and update background checks as required by applicable regulations.

5. Competency Assessment:

a. Establish a process for assessing and verifying the clinical competence of medical staff, including skills assessments, evaluations, and peer reviews.

b. Regularly review and assess the performance of medical staff to ensure ongoing competency.

# 6. Health Screenings:

a. Require medical staff to undergo health screenings as needed to ensure their fitness for duty and to minimize the risk of transmission of infectious diseases.

b. Ensure that medical staff are up to date on required vaccinations and immunizations.

7. Documentation and Record-Keeping:

a. Maintain accurate and up-to-date records of medical staff credentials, including licensure, certifications, education, and training.

b. Keep records confidential and in compliance with applicable privacy laws.

8. Recredentialing and Renewal:

a. Establish a recredentialing process to periodically review and update the credentials of medical staff.

b. Ensure timely renewal of licenses, certifications, and other required credentials.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the credentialing process to ensure that medical staff possess the necessary qualifications and competence to provide healthcare services within correctional facilities. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Clinical Performance Enhancement**

Policy Statement:

Reserve Health is dedicated to delivering high-quality healthcare services to inmates within correctional facilities while adhering to the National Commission on Correctional Health Care (NCCHC) standards. This policy outlines our commitment to continuous clinical performance enhancement, maintaining compliance with NCCHC guidelines, and fostering a culture of excellence and improvement among our healthcare providers.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the ongoing clinical performance enhancement of healthcare providers working within correctional facilities. It aims to ensure that all healthcare services are delivered at the highest standards of quality, safety, and ethical conduct in accordance with NCCHC requirements.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the delivery of healthcare services within correctional facilities.

#### Policy Guidelines:

# 1. NCCHC Compliance:

a. Ensure that all healthcare services provided within correctional facilities comply with the current NCCHC standards and guidelines.

b. Stay informed of any updates or revisions to NCCHC standards and incorporate them into our clinical practice.

#### 2. Performance Assessments:

a. Conduct regular assessments of healthcare providers' clinical performance, including skills, competencies, and adherence to best practices.

b. Use evidence-based methods, such as peer reviews and clinical audits, to assess and evaluate clinical performance.

# 3. Professional Development:

a. Support and encourage ongoing professional development for healthcare providers, including participation in continuing education, training, and certification programs.

b. Ensure that healthcare providers stay current with advancements in correctional healthcare.



4. Clinical Guidelines and Protocols:

a. Establish and maintain clinical guidelines, protocols, and standard operating procedures (SOPs) for the provision of healthcare services within correctional facilities.

b. Ensure that healthcare providers adhere to these guidelines and protocols consistently.

5. Quality Improvement Initiatives:

a. Develop and implement quality improvement initiatives to identify areas for enhancement and monitor the effectiveness of clinical care processes.

b. Encourage staff to actively participate in quality improvement activities.

6. Clinical Documentation:

a. Maintain accurate and complete clinical documentation, including patient assessments, treatment plans, and medical records, in compliance with NCCHC standards.

b. Regularly audit clinical documentation for accuracy and compliance.

# 7. Peer Reviews:

a. Conduct regular peer reviews to assess and improve clinical performance.

b. Utilize peer feedback and recommendations to identify areas for improvement and implement necessary changes.

# 8. Patient Safety:

a. Prioritize patient safety and implement measures to prevent medical errors, infections, and adverse events.

b. Encourage reporting of safety concerns and incidents to facilitate proactive improvements.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC requirements, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively contribute to clinical performance enhancement efforts in accordance with NCCHC standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Provision of Health Training to Officers**

Policy Statement:

Reserve Health is committed to ensuring that officers working in correctional facilities are provided with essential health training to promote the safety, well-being, and overall health of both officers and inmates. This policy outlines our dedication to offering relevant health education and training programs, aligning with the specific needs and challenges faced in correctional environments.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the provision of health training to officers working in correctional facilitys or correctional facilitys. It aims to enhance officers' understanding of health-related issues, equip them with essential knowledge and skills, and promote a collaborative approach to maintaining a healthy and safe environment within the correctional setting.

#### Scope:

This policy applies to all officers and staff working in correctional facilitys or correctional facilitys where Reserve Health provides healthcare services.

#### Policy Guidelines:

1. Training Needs Assessment:

a. Conduct periodic assessments to identify the specific health-related training needs of officers working in correctional facilitys or correctional facilitys.

b. Use the assessment findings to develop and customize training programs accordingly.

# 2. Health Education Programs:

a. Develop and offer health education programs that address key health topics relevant to correctional environments, such as infectious disease prevention, mental health awareness, substance abuse, and first aid.

b. Ensure that health education programs are evidence-based, culturally sensitive, and tailored to the needs of the target audience.

# 3. Training Delivery:

a. Deliver health training through various formats, including in-person sessions, e-learning modules, workshops, and printed materials.



b. Utilize qualified trainers and subject matter experts to facilitate training sessions.

#### 4. Access to Resources:

a. Provide officers with access to credible health resources, including written materials, videos, and online platforms, to support ongoing learning and reference.

b. Maintain an up-to-date library of health-related materials within the correctional facility or correctional facility.

5. Collaboration with Healthcare Providers:

a. Foster collaboration between officers and healthcare providers to ensure that officers have a basic understanding of healthcare procedures and can support healthcare staff when necessary.

b. Encourage communication between officers and healthcare providers to address healthrelated concerns promptly.

6. Emergency Response Training:

a. Offer training in emergency response, including basic life support (BLS) and first aid, to enable officers to provide immediate assistance in medical emergencies.

b. Ensure that officers are aware of emergency protocols and their roles in responding to health crises.

7. Evaluation and Feedback:

a. Evaluate the effectiveness of health training programs through assessments, surveys, and feedback from officers.

b. Use evaluation results to improve and update training content and methods as needed.

8. Compliance with Regulations:

a. Ensure that all health training programs and materials comply with relevant regulations, laws, and guidelines.

b. Maintain records of training completion and compliance.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

#### Compliance:

All officers and staff working in correctional facilitys or correctional facilitys are expected to comply with this policy and actively participate in health training programs to enhance their knowledge and skills. Failure to adhere to these guidelines may result in disciplinary actions.





# **Company Policy: Medication Administration Training**

Policy Statement:

Reserve Health is dedicated to ensuring the safe and effective administration of medications to patients within correctional facilities. This policy outlines our commitment to providing comprehensive medication administration training to healthcare providers, ensuring their competence in administering medications in accordance with best practices and relevant regulations.

# Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the training of healthcare providers in medication administration. It aims to ensure that all personnel responsible for administering medications are adequately trained, knowledgeable about medication safety, and capable of delivering quality healthcare services.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the administration of medications within correctional facilities.

# Policy Guidelines:

1. Training Program Development:

a. Develop and maintain a comprehensive medication administration training program that aligns with best practices, evidence-based guidelines, and applicable laws and regulations.

b. Ensure that the training program is regularly reviewed and updated to reflect current standards.

# 2. Training Content:

- a. Include the following topics in the medication administration training program:
  - Medication safety protocols
  - Medication dosage calculation
  - Routes of administration
  - Proper medication storage and handling
  - Recognizing and responding to medication side effects and adverse reactions
  - Documentation and record-keeping

b. Address specific considerations for different medication types, such as controlled substances and psychotropic medications.



# 3. Qualified Instructors:

a. Appoint qualified instructors who are knowledgeable in medication administration and have experience in correctional healthcare settings.

b. Ensure that instructors are up-to-date with training content and methodologies.

# 4. Training Methods:

a. Deliver medication administration training through a variety of methods, including classroom instruction, hands-on skills practice, simulation exercises, and e-learning modules.

b. Provide opportunities for healthcare providers to ask questions and seek clarification during training sessions.

# 5. Competency Assessments:

a. Conduct competency assessments to evaluate healthcare providers' proficiency in medication administration skills, including dosage calculations and proper techniques.

b. Require healthcare providers to achieve a passing score on competency assessments to demonstrate their readiness for medication administration.

# 6. Ongoing Education:

a. Promote ongoing education and professional development in medication administration, encouraging healthcare providers to stay updated on medication-related best practices.

b. Offer refresher courses and advanced training as needed to address evolving healthcare needs.

# 7. Documentation and Records:

a. Maintain accurate and up-to-date records of medication administration training, including attendance, assessments, and certifications.

b. Ensure that healthcare providers' training records are readily accessible for verification.

# 8. Regulatory Compliance:

a. Ensure that all aspects of medication administration training comply with applicable regulations, including those set forth by state licensing boards and accreditation bodies.

b. Regularly review training content and procedures to align with changing regulations.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:



All employees and contractors of Reserve Health who are involved in medication administration are expected to comply with this policy and actively participate in medication administration training to maintain their competence in delivering safe and effective healthcare services. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medical Diets in Correctional Facilities**

Policy Statement:

Reserve Health is committed to providing appropriate medical diets to inmates within correctional facilities where we provide healthcare services. This policy outlines our dedication to coordinating with external food service providers to ensure that inmates with specific medical dietary requirements receive the necessary nutritional support in compliance with relevant regulations and standards.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the provision of medical diets to inmates with documented medical conditions that require specialized dietary interventions. It aims to ensure that inmates' medical dietary needs are met safely, consistently, and in accordance with healthcare standards, while collaborating with external food service providers.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the assessment, prescription, monitoring, and oversight of medical diets within correctional facilities where external food service providers are responsible for meal preparation.

#### Policy Guidelines:

1. Assessment and Documentation:

a. Conduct thorough assessments of inmates' medical conditions and dietary needs to determine eligibility for medical diets.

b. Ensure that all medical dietary interventions are documented in the inmate's health record, specifying the dietary restrictions and required modifications.

2. Prescription and Authorization:

a. Only authorized healthcare providers within Reserve Health may prescribe medical diets for inmates.

b. Prescriptions for medical diets should include clear instructions regarding dietary restrictions, modifications, and any necessary supplements.

3. Collaboration with Food Service Providers:



a. Collaborate closely with external food service providers to communicate inmates' medical dietary requirements.

b. Ensure that food service providers have access to relevant medical dietary orders and dietary plans.

4. Menu Planning and Meal Preparation:

a. Work with food service providers to plan menus that accommodate the dietary restrictions and preferences of inmates with medical diets.

b. Ensure that meals are prepared and served in compliance with prescribed dietary requirements.

5. Training and Education:

a. Provide training and education to food service staff on the preparation and service of medical diet meals.

b. Foster a collaborative environment where healthcare providers and food service staff communicate effectively to meet the needs of inmates.

6. Monitoring and Evaluation:

a. Regularly monitor the implementation of medical diets to ensure compliance with healthcare provider orders and dietary plans.

b. Review and assess the nutritional status and health outcomes of inmates on medical diets and make necessary adjustments as required.

7. Feedback and Communication:

a. Encourage open communication between healthcare providers and food service providers to address any concerns, issues, or modifications needed for medical diets.

b. Maintain a system for documenting and addressing feedback and requests related to medical diets.

8. Quality Assurance:

a. Establish quality assurance mechanisms to verify the quality, safety, and compliance of medical diets with relevant regulations and standards.

b. Continuously improve medical diet services through regular audits and assessments.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:



All employees and contractors of Reserve Health involved in the provision of medical diets within correctional facilities are expected to comply with this policy and actively participate in ensuring that inmates' medical dietary needs are met appropriately. Failure to adhere to these guidelines may result in disciplinary actions.



## **Company Policy: Hunger Strike Policy**

### Policy Statement:

Reserve Health recognizes the importance of addressing hunger strikes among inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to managing hunger strikes in a manner that prioritizes the health, safety, and well-being of inmates, complies with ethical principles and relevant regulations, and ensures a coordinated response between healthcare and correctional authorities.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the healthcare department's response to hunger strikes within correctional facilities. It aims to safeguard the health of inmates engaging in hunger strikes, promote open communication, and address their concerns while complying with ethical principles and legal obligations.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the healthcare provision within correctional facilities and may encounter inmates engaging in hunger strikes.

### Policy Guidelines:

### 1. Recognition and Reporting:

a. Ensure that all healthcare providers are trained to recognize and report signs of inmates engaging in a hunger strike promptly.

b. Establish clear reporting channels to inform correctional authorities and other relevant personnel.

### 2. Assessment and Monitoring:

a. Conduct thorough medical assessments of inmates participating in a hunger strike to evaluate their physical and mental health, including vital signs, weight, and hydration status.

b. Establish regular monitoring schedules to track changes in inmates' health throughout the hunger strike period.

### 3. Informed Consent:

a. Ensure that inmates engaging in a hunger strike have access to information about the potential risks and consequences of their actions.

b. Encourage open and transparent communication with inmates to obtain their informed consent for medical assessments and interventions.



4. Medical Care and Interventions:

a. Provide appropriate medical care and interventions to address the health effects of hunger strikes, including dehydration, electrolyte imbalances, and potential complications.

b. Respect inmates' autonomy and choices while advocating for their best interests in cases of deteriorating health.

5. Ethical Considerations:

a. Adhere to ethical principles, including the principles of beneficence and non-maleficence, when making medical decisions related to hunger strikes.

b. Seek guidance from medical ethics committees or ethics consultations when complex ethical issues arise.

6. Communication and Collaboration:

a. Maintain open and regular communication with correctional authorities, legal representatives, and relevant stakeholders throughout the hunger strike.

b. Collaborate with correctional authorities to address any security concerns while ensuring the provision of necessary medical care.

#### 7. Documentation and Records:

a. Maintain accurate and comprehensive medical records of all assessments, interventions, and communications related to inmates participating in a hunger strike.

b. Document the inmate's medical condition, any refusals of medical care, and the rationale for medical decisions.

### 8. Review and Evaluation:

a. Conduct a thorough review and evaluation of the healthcare department's response to each hunger strike, identifying areas for improvement and lessons learned.

b. Use evaluation findings to refine policies and procedures related to hunger strikes.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, ethical principles, and regulations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health involved in healthcare provision within correctional facilities are expected to comply with this policy and actively participate in the healthcare department's response to hunger strikes, prioritizing the health and safety of



inmates while adhering to ethical principles and legal obligations. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Patient Escort Policy for Providing Healthcare Services**

Policy Statement:

Reserve Health is committed to ensuring the safety and security of both healthcare providers and inmates while delivering healthcare services within correctional facilities. This policy outlines our dedication to maintaining a safe environment during patient escorts, adhering to security protocols, and upholding the highest standards of patient care in correctional settings.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for patient escorts during the provision of healthcare services within correctional facilities. It aims to ensure the safety, dignity, and well-being of patients and healthcare providers while complying with relevant security measures and regulations.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in providing healthcare services within correctional facilities and may require patient escorts.

Policy Guidelines:



# **Company Policy: Emergency Services**

#### Policy Statement:

Reserve Health is committed to ensuring the safety and well-being of all individuals within correctional facilities where we provide healthcare services. This policy outlines our dedication to providing timely and effective emergency medical services, coordinating with correctional authorities, and adhering to the highest standards of care in correctional emergency situations.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the provision of emergency medical services within correctional facilities. It aims to ensure a prompt and organized response to medical emergencies, protect the health and safety of inmates and staff, and maintain compliance with relevant regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in providing emergency medical services within correctional facilities.

#### Policy Guidelines:

1. Emergency Response Team:

a. Establish and maintain an emergency response team composed of trained healthcare providers with expertise in emergency medicine.

b. Ensure that the team is available around the clock to respond to medical emergencies.

2. Emergency Equipment and Supplies:

a. Maintain fully stocked emergency medical kits and equipment in designated locations within the correctional facility.

b. Regularly inspect and replace expired or depleted supplies to ensure readiness.

3. Emergency Communication:

a. Establish efficient communication protocols to facilitate the rapid notification of the emergency response team and correctional authorities in the event of a medical emergency.

b. Ensure that communication devices are readily accessible and operational at all times.

4. Emergency Assessment and Triage:

a. Conduct immediate assessments and triage of medical emergencies to determine the severity of the situation and prioritize care.



b. Provide appropriate medical interventions based on the nature and severity of the emergency.

5. Coordination with Correctional Authorities:

a. Collaborate closely with correctional authorities and security personnel to ensure a safe and secure environment during medical emergencies.

b. Comply with correctional facility security protocols while providing emergency services.

6. Transport and Transfer:

a. Arrange for the transport and transfer of patients to external medical facilities when necessary for advanced care.

b. Coordinate with external medical facilities to ensure a seamless transfer process.

7. Documentation and Reporting:

a. Maintain accurate and comprehensive documentation of all medical emergencies, assessments, interventions, and outcomes.

b. Report all medical emergencies, as well as actions taken, to correctional authorities and relevant stakeholders.

8. Training and Drills:

a. Provide regular training and drills to healthcare providers and correctional staff to ensure readiness for medical emergencies.

b. Review and evaluate the effectiveness of emergency response procedures through periodic drills.

### 9. Quality Assurance:

a. Establish quality assurance mechanisms to evaluate the quality and timeliness of emergency medical services.

b. Continuously improve emergency response procedures based on evaluation findings.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices for emergency medical services in correctional settings. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in the provision of emergency medical services within correctional facilities,



ensuring the safety and well-being of all individuals involved. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Telemedicine and Telepsychiatry Services**

Policy Statement:

Reserve Health is committed to providing accessible and high-quality healthcare services to inmates within correctional facilities. This policy outlines our dedication to utilizing telemedicine and telepsychiatry as viable means of healthcare delivery, ensuring that inmates receive timely medical and psychiatric care, and adhering to the highest standards of care in correctional telehealth services.

### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the implementation and utilization of telemedicine and telepsychiatry services within correctional facilities. It aims to improve the accessibility and efficiency of healthcare delivery while maintaining the highest standards of patient care, confidentiality, and compliance with applicable regulations.

### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in providing telemedicine and telepsychiatry services within correctional facilities.

### Policy Guidelines:

1. Telehealth Services:

a. Reserve Health may utilize telemedicine and telepsychiatry services to provide medical and psychiatric care to inmates when deemed appropriate and within the scope of licensure and regulations.

b. Telehealth services shall be delivered by qualified and licensed healthcare providers.

## 2. inmate Consent:

a. inmates shall have the option to consent to or decline telehealth services.

b. Healthcare providers shall inform inmates about the nature and benefits of telehealth services and address any questions or concerns.

3. Privacy and Confidentiality:

a. Ensure that all telehealth consultations and communications are conducted in a private and secure environment, complying with the Health Insurance Portability and Accountability Act (HIPAA) and other relevant privacy regulations.

b. Utilize secure and encrypted communication platforms for telehealth consultations.



### 4. Emergency Situations:

a. In the event of a medical or psychiatric emergency, telehealth providers shall coordinate with on-site personnel to ensure appropriate and timely care for the inmate.

b. Emergency protocols and communication procedures shall be in place and readily accessible.

5. Informed Consent for Telepsychiatry:

a. For telepsychiatry services, inmates shall be provided with additional information regarding the use of technology in psychiatric assessments and treatment.

b. Informed consent for telepsychiatry services shall address any potential limitations and alternative options for care.

#### 6. Technical Support:

a. Provide technical support to ensure the proper functioning of telehealth equipment and systems.

b. Address technical issues promptly to minimize disruptions in healthcare delivery.

### 7. Training and Licensing:

a. Ensure that healthcare providers involved in telemedicine and telepsychiatry services are adequately trained and licensed to practice within the jurisdiction.

b. Verify the credentials and qualifications of telehealth providers regularly.

8. Quality Assurance:

a. Establish quality assurance mechanisms to evaluate the quality and effectiveness of telehealth services.

b. Continuously improve telehealth procedures based on evaluation findings and feedback.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and technological advancements in telehealth. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health involved in the provision of telemedicine and telepsychiatry services within correctional facilities are expected to comply with this policy and adhere to the established guidelines to ensure the accessibility and quality of healthcare services for inmates. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: inmate Screening**

#### **Policy Statement:**

Reserve Health is dedicated to ensuring the health and well-being of inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to conducting comprehensive and systematic inmate screenings upon intake, transfer, and at regular intervals, in accordance with applicable regulations, to identify medical, mental health, and substance use disorders and to provide timely and appropriate healthcare interventions.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting inmate screenings in correctional facilities. It aims to identify medical, mental health, and substance use disorders, enabling timely and appropriate healthcare interventions, while ensuring compliance with relevant regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in conducting inmate screenings within correctional facilities.

#### Policy Guidelines:

1. Screening Upon Intake:

a. Conduct a comprehensive health screening upon the intake of each inmate, including a review of medical history, physical examination, and mental health assessment.

b. Identify any immediate medical or mental health needs and ensure prompt intervention and treatment.

2. Substance Use Assessment:

a. Screen inmates for substance use disorders, including alcohol and drug use, during the intake process.

b. Implement standardized screening tools and assessments to identify substance use disorders.

3. Mental Health Assessment:

a. Administer mental health assessments to identify inmates with mental health disorders or those at risk of self-harm or harm to others.

b. Utilize validated screening tools to assess mental health conditions.



4. Transfer Screenings:

a. Conduct health screenings when inmates are transferred between correctional facilities or units.

b. Ensure that medical and mental health records are transferred with the inmate to provide continuity of care.

5. Regular Health Screenings:

a. Establish a schedule for regular health screenings of inmates throughout their incarceration.

b. Screen for chronic medical conditions, communicable diseases, and mental health concerns during these assessments.

6. Emergency Medical and Mental Health Referrals:

a. Refer inmates identified with urgent medical or mental health needs to appropriate healthcare providers promptly.

b. Ensure that inmates receive timely and necessary medical or mental health care, including emergency care when required.

7. Confidentiality and Privacy:

a. Maintain strict confidentiality of inmate health information and screening results in accordance with applicable laws and regulations.

b. Ensure that screening discussions and assessments are conducted in private settings.

8. Documentation and Reporting:

a. Document the results of all inmate screenings, including medical, mental health, and substance use assessments, in their health records.

b. Report identified health concerns to the appropriate healthcare providers for further evaluation and intervention.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in conducting inmate screenings within correctional facilities are expected to comply with this policy and actively participate in the systematic screening of inmates to identify and address medical, mental health, and substance use disorders. Failure to adhere to these guidelines may result in disciplinary actions.





# **Company Policy: inmate Transfer Screening Policy**

**Policy Statement:** 

Reserve Health is dedicated to ensuring the continuity of healthcare services and the safety and well-being of inmates during transfers within correctional facilities where we provide healthcare services. This policy outlines our commitment to conducting comprehensive inmate transfer screenings, addressing medical and mental health needs, and facilitating safe transitions between correctional facilities.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting inmate transfer screenings during transfers between correctional facilities. It aims to assess and address the medical, mental health, and healthcare continuity needs of inmates, ensuring the safety and appropriate healthcare interventions.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in conducting inmate transfer screenings within correctional facilities.

#### Policy Guidelines:

1. Transfer Screening Requirements:

a. Conduct inmate transfer screenings when an inmate is being transferred between correctional facilities, units, or levels of care.

b. Ensure that transfer screenings are completed for all inmates undergoing transfers.

#### 2. Screening Components:

a. Perform a comprehensive health screening, including a review of the inmate's medical history, current medical conditions, prescribed medications, and known mental health concerns.

b. Assess the inmate's current mental health status and identify any mental health needs or risks.

#### 3. Continuity of Care:

a. Ensure that the inmate's medical and mental health records, including medication lists, are transferred with them to the receiving facility.

b. Provide the receiving facility with a summary of the inmate's healthcare needs, including any ongoing treatments, diagnoses, or health concerns.



4. Medication Management:

a. Verify the accuracy of the inmate's medication regimen and ensure that they have a sufficient supply of prescribed medications for the duration of the transfer.

b. Coordinate with the receiving facility's healthcare providers to continue the inmate's medication management.

5. Communication with Receiving Facility:

a. Establish clear communication channels with the receiving facility's healthcare providers to share relevant health information and coordinate care.

b. Share transfer screening findings and healthcare plans with the receiving facility's healthcare team.

#### 6. Specialized Care Considerations:

a. Identify inmates with specialized healthcare needs or chronic conditions that require ongoing monitoring or care.

b. Develop a plan for specialized care, including any necessary medical equipment or accommodations.

7. Emergency Medical and Mental Health Referrals:

a. If a transfer screening identifies urgent medical or mental health needs, arrange for immediate intervention and care, and inform the receiving facility.

b. Ensure that inmates receive timely and necessary medical or mental health care, including emergency care when required.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health involved in conducting inmate transfer screenings within correctional facilities are expected to comply with this policy and actively participate in ensuring the continuity of healthcare services and the safety of inmates during transfers. Failure to adhere to these guidelines may result in disciplinary actions.



## **Company Policy: Initial Health Assessment**

### Policy Statement:

Reserve Health is committed to providing comprehensive initial health assessments to inmates within correctional facilities where we provide healthcare services. This policy outlines our dedication to conducting thorough and standardized initial health assessments, identifying medical and mental health needs, and promoting the well-being of inmates while complying with the National Commission on Correctional Health Care (NCCHC) standards and other applicable regulations.

### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting initial health assessments for inmates upon admission to a correctional facility. It aims to identify and address medical and mental health conditions, assess healthcare needs, and promote the safety and well-being of inmates in compliance with NCCHC standards.

### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in conducting initial health assessments within correctional facilities.

### Policy Guidelines:

1. Screening Upon Admission:

a. Conduct a comprehensive initial health assessment for each inmate upon admission to the correctional facility.

b. Ensure that initial assessments are completed promptly and consistently for all incoming inmates.

2. Health History and Medical Records:

a. Review the inmate's health history, including known medical conditions, prescribed medications, allergies, and prior healthcare encounters.

b. Obtain and review any available medical records or information from the inmate's previous healthcare providers.

## 3. Physical Examination:

a. Perform a systematic physical examination, including vital signs, to assess the inmate's overall health and detect any medical concerns.

b. Identify any signs of injury or trauma and document them appropriately.



4. Mental Health Assessment:

a. Assess the inmate's mental health status, including any history of psychiatric disorders, suicidal ideation, or self-harm.

b. Use validated screening tools to identify potential mental health concerns.

5. Substance Use Assessment:

a. Screen inmates for substance use disorders, including alcohol and drug use, and assess withdrawal symptoms as necessary.

b. Utilize standardized screening tools to identify substance use issues.

#### 6. Continuity of Care:

a. Ensure that the inmate's healthcare information is documented accurately and transmitted to the facility's healthcare team.

b. Collaborate with the facility's healthcare providers to develop a care plan that addresses identified medical and mental health needs.

7. Medication Management:

a. Verify the accuracy of the inmate's medication regimen and ensure that they receive any prescribed medications in a timely manner.

b. Establish medication management protocols to maintain treatment continuity.

### 8. Infection Control:

a. Screen for communicable diseases and implement appropriate infection control measures to protect the health of inmates and staff.

b. Follow NCCHC guidelines and regulations related to infection control practices.

### 9. Confidentiality and Privacy:

a. Maintain strict confidentiality of inmate health information and screening results, following HIPAA and NCCHC standards.

b. Ensure that all health assessments and discussions are conducted in private settings.

10. Documentation and Reporting:

a. Document the results of the initial health assessment, including medical, mental health, and substance use assessments, in the inmate's health records.

b. Report identified health concerns and treatment plans to the facility's healthcare team.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices in correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



Compliance:

All employees and contractors of Reserve Health involved in conducting initial health assessments within correctional facilities are expected to comply with this policy and actively participate in ensuring the comprehensive assessment of inmate health needs while adhering to NCCHC standards and other applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Mental Health Screening**

### Policy Statement:

Reserve Health is committed to addressing the mental health needs of inmates within correctional facilities where we provide healthcare services. This policy outlines our dedication to conducting systematic and standardized mental health screenings, identifying mental health concerns, and ensuring timely and appropriate mental healthcare interventions while complying with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting mental health screenings for inmates within correctional facilities. It aims to identify mental health conditions, assess mental healthcare needs, and promote the well-being of inmates while adhering to applicable laws, regulations, and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in conducting mental health screenings within correctional facilities.

#### Policy Guidelines:

### 1. Screening Upon Admission:

a. Conduct a systematic and comprehensive mental health screening for each inmate upon admission to the correctional facility.

b. Ensure that mental health screenings are completed promptly and consistently for all incoming inmates.

2. Standardized Screening Tools:

a. Utilize standardized and validated mental health screening tools to assess inmates' mental health status.

b. Follow established protocols for the administration and interpretation of these screening tools.

### 3. Clinical Interviews:

a. Conduct clinical interviews with inmates to gather additional information about their mental health history, current symptoms, and any treatment history.

b. Use the information obtained through clinical interviews to assess the severity of mental health concerns.



### 4. Mental Health History:

a. Review any available mental health records or information from the inmate's previous mental healthcare providers.

b. Document known mental health diagnoses, medications, and any prior mental health treatment.

#### 5. Risk Assessment:

a. Assess inmates for suicide risk, self-harm, or harm to others during mental health screenings.

b. Implement safety protocols and interventions for inmates at risk of self-harm or harm to others.

6. Substance Use Assessment:

a. Screen inmates for co-occurring substance use disorders and assess the impact of substance use on their mental health.

b. Coordinate care with substance use treatment providers as needed.

#### 7. Continuity of Care:

a. Ensure that inmates identified with mental health concerns have their mental health information documented accurately and transmitted to the facility's mental health team.

b. Collaborate with the facility's mental health providers to develop a care plan that addresses identified mental health needs.

8. Confidentiality and Privacy:

a. Maintain strict confidentiality of inmate mental health information, following applicable laws and regulations.

b. Ensure that all mental health screenings and discussions are conducted in private settings.

9. Documentation and Reporting:

a. Document the results of mental health screenings and assessments in the inmate's mental health records.

b. Report identified mental health concerns and treatment plans to the facility's mental health team.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in correctional mental healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



Compliance:

All employees and contractors of Reserve Health involved in conducting mental health screenings within correctional facilities are expected to comply with this policy and actively participate in ensuring the systematic assessment of inmate mental health needs while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Oral Care**

Policy Statement:

Reserve Health is dedicated to providing comprehensive oral care services to inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to maintaining oral health, preventing oral diseases, and promoting proper oral hygiene practices among inmates.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for delivering oral care services to inmates within correctional facilities. It aims to promote and maintain oral health, prevent oral diseases, and ensure that inmates receive appropriate oral healthcare.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in delivering oral care services within correctional facilities.

### Policy Guidelines:

1. Oral Health Assessments:

a. Conduct oral health assessments as part of the initial health assessment for each inmate upon admission to the correctional facility.

b. Ensure that periodic oral health assessments are conducted as part of routine healthcare examinations.

### 2. Oral Health Education:

a. Provide oral health education to inmates, including information on proper oral hygiene practices, nutrition, and the importance of regular dental care.

b. Encourage inmates to take responsibility for their oral health and seek dental care when necessary.

### 3. Dental Care Access:

a. Facilitate access to dental care services for inmates, including routine check-ups, restorative procedures, and emergency dental care.

b. Schedule and coordinate dental appointments for inmates based on their oral health needs.

4. Oral Hygiene Supplies:



a. Ensure that inmates have access to basic oral hygiene supplies, including toothbrushes, toothpaste, dental floss, and mouthwash.

b. Distribute these supplies regularly and replace them as needed.

### 5. Preventive Measures:

a. Implement preventive measures to reduce the risk of oral diseases among inmates, such as dental cleanings, fluoride treatments, and sealant applications.

b. Encourage inmates to participate in preventive dental care programs.

6. Dental Emergencies:

a. Respond promptly to dental emergencies, including toothaches, dental trauma, and infections.

b. Arrange for timely and appropriate dental interventions, including extractions or restorative procedures, as required.

## 7. Infection Control:

a. Adhere to infection control protocols and standards to prevent the transmission of infectious diseases during oral care procedures.

b. Follow NCCHC guidelines for infection control in dental settings.

8. Dental Records and Documentation:

a. Maintain accurate and complete dental records for each inmate, documenting all oral health assessments, treatments, and referrals.

b. Ensure that dental records are confidential and accessible only to authorized personnel.

### 9. Compliance with NCCHC Standards:

a. Adhere to NCCHC standards and guidelines related to oral care within correctional facilities.

b. Stay updated on NCCHC standards and incorporate any relevant updates into oral care practices.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices in correctional oral care. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in delivering oral care services within correctional facilities are expected to comply with this policy and actively participate in promoting oral health, preventing oral diseases, and providing appropriate oral healthcare to



inmates, while adhering to NCCHC standards and applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Standing Orders from Providers**

#### Policy Statement:

Reserve Health acknowledges the importance of efficient and safe healthcare delivery in correctional facilities where we provide services. This policy outlines our commitment to establishing and following clear guidelines and procedures for the implementation and oversight of standing orders from qualified healthcare providers, ensuring that inmates receive timely and appropriate medical care while adhering to applicable regulations and standards.

#### Purpose:

The purpose of this policy is to establish a framework for the use of standing orders provided by qualified healthcare providers within correctional facilities. It aims to improve the efficiency of healthcare delivery, enhance patient access to care, and ensure that standing orders are administered safely and appropriately while adhering to relevant regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the administration and oversight of standing orders within correctional facilities.

#### Policy Guidelines:

1. Definition of Standing Orders:

a. Standing orders are pre-approved medical orders issued by qualified healthcare providers for specific medical conditions or situations.

b. Standing orders are intended to streamline the provision of medical care, especially in urgent or routine situations.

2. Qualified Healthcare Providers:

a. Standing orders may only be issued by qualified healthcare providers, including physicians, nurse practitioners, and physician assistants, in accordance with their scope of practice and licensure.

b. The issuance of standing orders must comply with applicable state and federal regulations.

3. Approval and Implementation:

a. Standing orders must be approved by the facility's medical director or designee before implementation.

b. Standing orders should be reviewed and updated periodically to ensure their relevance and compliance with current medical standards.



### 4. Authorized Personnel:

a. Only authorized healthcare personnel within the facility are permitted to administer medications or treatments based on standing orders.

b. Authorized personnel must have the appropriate training and licensure to execute standing orders safely and accurately.

#### 5. Patient Assessment:

a. Prior to the administration of any medication or treatment based on standing orders, authorized personnel must conduct a patient assessment to verify the appropriateness of the order for the individual inmate.

b. Patient assessments should consider the inmate's medical history, allergies, and current health status.

#### 6. Documentation and Reporting:

a. All actions taken based on standing orders must be documented accurately in the inmate's medical record, including the date, time, medication or treatment administered, and the name of the administering healthcare provider.

b. Any adverse reactions or unexpected outcomes must be promptly reported and documented as per facility protocols.

### 7. Oversight and Quality Assurance:

a. Standing orders should be subject to ongoing oversight and quality assurance reviews to ensure their effectiveness and safety.

b. Periodic audits and evaluations of standing order utilization should be conducted to identify areas for improvement.

### 8. Compliance with Regulations:

a. All standing orders and their administration must comply with federal, state, and local regulations, as well as relevant healthcare standards.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health involved in the administration and oversight of standing orders within correctional facilities are expected to comply with this policy and actively



participate in the safe and appropriate administration of standing orders while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medication Verification**

### Policy Statement:

Reserve Health is dedicated to ensuring the safe and accurate administration of medications to inmate patients within correctional facilities where we provide healthcare services. This policy outlines our commitment to establishing robust procedures for medication verification, including medication administration checks, double-checks, and documentation, to prevent medication errors, promote patient safety, and comply with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for verifying and administering medications to inmate patients. It aims to ensure that medications are administered accurately, prevent medication errors, protect patient safety, and maintain compliance with applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the verification and administration of medications to inmate patients within correctional facilities.

#### Policy Guidelines:

1. Medication Verification Process:

a. Medication verification is a critical step in the medication administration process and must be conducted for every medication dose administered to an inmate patient.

b. Verify the inmate's identity using two patient identifiers (e.g., name and date of birth) before medication administration.

#### 2. Prescription Verification:

a. Ensure that each medication dose corresponds to a valid prescription or medical order issued by a qualified healthcare provider.

b. Verify the accuracy of medication orders, including medication name, dosage, route, frequency, and any special instructions.

#### 3. Medication Label Review:

a. Examine the medication label to confirm that it matches the medication order and includes the correct medication name, strength, and expiration date.

b. Ensure that the medication label is legible and in good condition.



4. Patient Allergies and Medication History:

a. Review the inmate patient's known allergies and medication history to prevent potential allergic reactions or drug interactions.

b. Cross-reference this information with the medication order to confirm safety.

#### 7. Documentation:

a. Document medication administration and verification in the inmate patient's medical record, including the date, time, medication name, dosage, route, and the names of the healthcare providers involved.

b. Note any medication refusals or missed doses in the inmate patient's record.

8. Medication Storage and Security:

a. Ensure that medications are stored securely, in accordance with facility protocols, to prevent unauthorized access or tampering.

b. Conduct periodic inspections of medication storage areas to assess security and integrity.

9. Training and Competency:

a. Provide training to healthcare personnel involved in medication verification and administration to ensure competency and adherence to established procedures.

b. Conduct periodic competency assessments and refresher training as needed.

10. Medication Error Reporting:

a. Encourage healthcare personnel to report any medication errors, near-misses, or adverse reactions promptly and through the facility's incident reporting system.

b. Implement corrective actions and share lessons learned to prevent future errors.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in medication verification and administration within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

### Compliance:

All employees and contractors of Reserve Health involved in the medication verification and administration process for inmate patients are expected to comply with this policy and actively participate in ensuring the safe and accurate administration of medications while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Timely Initiation of Medication**

#### Policy Statement:

Reserve Health is dedicated to providing timely and appropriate healthcare services to inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to ensuring the timely initiation of medication for eligible inmate patients and promoting the well-being of inmates while complying with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for initiating medications in a timely manner for eligible inmate patients. It aims to ensure that inmates receive necessary medications promptly, consistent with their medical needs, and in compliance with NCCHC standards and relevant regulations.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the initiation of medications for inmate patients within correctional facilities.

#### Policy Guidelines:

#### 1. Prescription Initiation:

a. Medication initiation shall be based on valid and authorized medical prescriptions or orders issued by qualified healthcare providers within the scope of their licensure.

b. Medication orders must be clear, accurate, and complete, including medication name, dosage, route, frequency, and any special instructions.

#### 2. Timely Medication Initiation:

a. Medications shall be initiated promptly upon the issuance of a valid prescription or medical order, in accordance with the inmate's medical condition and the prescribed schedule. Generally, this should be under 8 hours.

b. Delays in medication initiation shall be minimized, and every effort shall be made to provide medications within the prescribed timeframes.

#### 3. Medication Administration Checks:

a. Prior to medication initiation, authorized healthcare personnel shall conduct medication verification checks, as outlined in the Medication Verification Policy.

b. Medication verification checks are essential to ensure patient safety and medication accuracy.



4. Emergency Medication Initiation:

a. In cases of medical emergencies requiring immediate medication administration, healthcare providers shall initiate the medication without delay.

b. Emergency medications shall be administered promptly to address life-threatening conditions.

#### 5. Documentation:

a. All medication initiation activities, including the date, time, medication name, dosage, route, and the names of administering healthcare providers, shall be documented accurately in the inmate patient's medical record.

b. Any delays in medication initiation or changes to the prescribed regimen shall be documented with a rationale.

6. Medication Delivery:

a. Medications shall be stored securely and transported safely to prevent tampering or unauthorized access.

b. Adequate measures shall be in place to ensure the safe delivery of medications to the inmate patient.

#### 7. Pharmacy Services:

a. Reserve Health shall establish a pharmacy service system that supports the timely initiation of medications, including the availability of required medications and a process for obtaining them.

b. Pharmacy services shall be in compliance with applicable regulations.

### Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices in medication initiation within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

#### Compliance:

All employees and contractors of Reserve Health involved in the initiation of medications for inmate patients are expected to comply with this policy and actively participate in ensuring the timely and appropriate initiation of medications while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Release Medication for Discharged inmates**

Policy Statement:

Reserve Health is committed to ensuring the safe and appropriate release of medications to inmates upon their discharge from correctional facilities where we provide healthcare services. This policy outlines our dedication to establishing clear guidelines and procedures for the timely release of medications, promoting continuity of care, and complying with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to establish a framework for the safe and seamless release of medications to inmates upon their discharge from correctional facilities. It aims to ensure that discharged inmates receive their prescribed medications to maintain their health and well-being, with strict adherence to applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the release of medications to inmates upon discharge from correctional facilities.

### Policy Guidelines:

### 1. Prescription Verification:

a. Medication release shall be based on valid and authorized medical prescriptions or orders issued by qualified healthcare providers within the scope of their licensure.

b. Medication orders must be clear, accurate, and complete, including medication name, dosage, route, frequency, and any special instructions.

#### 2. Medication Release Process:

a. Medications shall be submitted to a designated pharmacy upon the inmate's discharge.

### 3. Patient Education:

a. inmates shall receive instructions on the proper administration of their medications upon release.

b. inmates shall be informed about the importance of medication adherence, potential side effects, and the need for follow-up care.

4. Prescription Refills and Continuity of Care:



a. inmates with ongoing medication needs shall receive a sufficient supply of medications to cover their immediate post-release period.

b. inmates shall be informed about the need to seek follow-up care with a community healthcare provider to address their ongoing medication needs.

c. No refill of discharge medications will be provided.

d. Except in the most extreme circumstances, no controlled substances will be prescribed at discharge.

5. Documentation:

a. All medication release activities, including the date, time, medication details, inmate identification, and the names of healthcare providers involved, shall be documented accurately.

b. Any discrepancies or issues related to medication release shall be documented and addressed promptly.

6. Medication Disposal:

a. Any unused or discontinued medications shall be disposed of in accordance with facility and regulatory guidelines.

b. Disposal shall be conducted safely and securely to prevent misuse or environmental contamination.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in the release of medications to discharged inmates within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in the release of medications to inmates upon discharge from correctional facilities are expected to comply with this policy and actively participate in ensuring the safe and appropriate release of medications while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Infirmary-Level Care**

Policy Statement:

Reserve Health is dedicated to providing high-quality infirmary-level care to inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to establishing clear guidelines and procedures for the assessment, treatment, and management of inmates requiring infirmary-level care while ensuring compliance with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to ensure that inmates in need of infirmary-level care receive appropriate and timely medical attention and support. This policy aims to establish guidelines for the assessment, treatment, and management of inmates with acute or complex medical conditions within the correctional facility while adhering to applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the provision of infirmary-level care to inmates within correctional facilities.

## Policy Guidelines:

1. Definition of Infirmary-Level Care:

a. Infirmary-level care refers to medical care provided to inmates with acute or complex medical conditions that require a higher level of clinical attention, monitoring, and specialized treatment.

b. Infirmary-level care may include the management of severe illnesses, infectious diseases, post-surgical recovery, and other medically intensive conditions.

2. Qualified Healthcare Providers:

a. Infirmary-level care shall be administered by qualified healthcare providers, including physicians, nurse practitioners, physician assistants, and registered nurses, within the scope of their licensure.

b. Healthcare providers must be adequately trained and experienced in managing acute medical conditions.

3. Assessment and Admission Criteria:

a. inmates in need of infirmary-level care shall be assessed promptly to determine their eligibility based on medical need and clinical criteria.



b. Admission criteria for infirmary-level care shall be clearly defined and include medical assessments, vital signs, and clinical observations.

4. Individualized Care Plans:

a. inmates admitted to infirmary-level care shall have individualized care plans developed based on their medical needs.

b. Care plans shall include treatment goals, medication administration, nursing care, monitoring schedules, and any necessary interventions.

5. Medical Equipment and Resources:

a. Infirmary-level care units shall be equipped with necessary medical equipment and resources to support the treatment of acute and complex medical conditions.

b. Adequate staffing levels shall be maintained to ensure patient safety and care.

## 6. Continuity of Care:

a. inmates receiving infirmary-level care shall be provided with appropriate follow-up care and transition plans as needed.

b. Coordination of care with community healthcare providers shall be facilitated for postrelease medical needs.

## 7. Documentation and Reporting:

a. All assessments, treatments, and interventions in the infirmary-level care unit shall be documented accurately and promptly in the inmate's medical record.

b. Any adverse events, changes in condition, or incidents shall be reported and documented according to facility protocols.

8. Quality Assurance and Review:

a. Infirmary-level care units shall undergo regular quality assurance reviews to assess the quality and effectiveness of care.

b. Any identified issues or areas for improvement shall be addressed promptly.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in infirmary-level care within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in the provision of infirmary-level care to inmates within correctional facilities are expected to comply with this policy and actively



participate in ensuring the safe and appropriate care of inmates with acute or complex medical conditions while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Medication Supervised Withdrawal**

**Policy Statement:** 

Reserve Health is dedicated to providing safe and effective medication-supervised withdrawal services to inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to establishing clear guidelines and procedures for the assessment, treatment, and management of inmates requiring supervised withdrawal, while ensuring compliance with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to ensure that inmates in need of supervised withdrawal from substances receive appropriate and compassionate care that prioritizes their safety, well-being, and successful withdrawal. This policy aims to establish guidelines for the assessment, treatment, and management of inmates undergoing supervised withdrawal within the correctional facility while adhering to applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the provision of medication-supervised withdrawal services to inmates within correctional facilities.

## Policy Guidelines:

1. Definition of Medication Supervised Withdrawal:

a. Medication supervised withdrawal refers to the medically managed process of assisting inmates in safely and comfortably discontinuing substance use under the guidance of qualified healthcare providers.

b. Supervised withdrawal may include the use of medications to alleviate withdrawal symptoms and manage cravings.

## 2. Qualified Healthcare Providers:

a. Medication supervised withdrawal shall be administered by qualified healthcare providers, including physicians, nurse practitioners, and registered nurses, within the scope of their licensure.

b. Healthcare providers must have training and experience in addiction medicine or withdrawal management.

3. Assessment and Eligibility:

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a. inmates in need of supervised withdrawal shall be assessed promptly to determine their eligibility based on substance use history, withdrawal symptoms, medical history, and clinical criteria.

b. Eligibility criteria for supervised withdrawal shall be clearly defined.

4. Individualized Treatment Plans:

a. inmates admitted for supervised withdrawal shall have individualized treatment plans developed based on their substance use history and withdrawal symptoms.

b. Treatment plans shall include medication administration schedules, monitoring protocols, and any necessary interventions.

5. Medication Administration:

a. Medications may be used to manage withdrawal symptoms, reduce cravings, and support the inmate's comfort during the withdrawal process.

b. Medication selection and dosing shall be determined by qualified healthcare providers based on the inmate's needs and medical evaluation.

6. Monitoring and Support:

a. inmates undergoing supervised withdrawal shall be closely monitored for withdrawal symptoms, vital signs, and overall well-being.

b. Supportive care, including psychological and social support, shall be provided to address the emotional and psychological aspects of withdrawal.

7. Safety Protocols:

a. Protocols for responding to medical emergencies or severe withdrawal symptoms shall be in place, and all healthcare personnel involved shall be trained in their implementation.

b. Emergency medications and equipment shall be readily available.

8. Documentation and Reporting:

a. All assessments, treatments, and interventions related to supervised withdrawal shall be documented accurately and promptly in the inmate's medical record.

b. Any adverse events, changes in condition, or incidents shall be reported and documented according to facility protocols.

9. Quality Assurance and Review:

a. Medication-supervised withdrawal services shall undergo regular quality assurance reviews to assess the quality and effectiveness of care.

b. Any identified issues or areas for improvement shall be addressed promptly.

Monitoring and Review:



This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in medication-supervised withdrawal within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health involved in the provision of medicationsupervised withdrawal services to inmates within correctional facilities are expected to comply with this policy and actively participate in ensuring the safe and effective management of inmates undergoing supervised withdrawal while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Use of Narcan for Suspected or Possible Opiate Overdose**

#### Policy Statement:

Reserve Health is committed to ensuring the safety and well-being of inmates and staff within correctional facilities where we provide healthcare services. This policy outlines our dedication to establishing clear guidelines and procedures for the administration of Narcan (naloxone) in cases of suspected or possible opiate overdose, with a primary focus on saving lives, ensuring proper training, and adhering to relevant regulations and standards.

#### Purpose:

The purpose of this policy is to provide guidance on the appropriate and timely use of Narcan to reverse the effects of opiate overdose and prevent fatalities within the correctional facility. It aims to establish protocols for the administration of Narcan, ensure staff training, and promote compliance with all applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who may encounter situations involving suspected or possible opiate overdose within correctional facilities.

#### Policy Guidelines:

#### 1. Narcan Administration:

a. Narcan (naloxone) shall be readily available within the correctional facility for use in the event of a suspected or possible opiate overdose.

b. Narcan may be administered by ANY staff members who have received proper training in its use.

#### 2. Identification of Opiate Overdose:

a. Staff members shall be trained to recognize the signs and symptoms of opiate overdose, which may include extreme drowsiness, unresponsiveness, shallow or absent breathing, and pinpoint pupils.

b. Any suspected or possible opiate overdose shall be treated as a medical emergency.

#### 3. Protocols for Narcan Administration:

a. Narcan shall be administered promptly when opiate overdose is suspected or possible.

b. The appropriate dosage and administration route shall be determined by qualified healthcare providers based on the inmate's condition and medical evaluation.



c. Healthcare providers and trained staff shall be prepared to administer repeat doses if necessary.

#### 4. Documentation and Reporting:

a. All instances of Narcan administration shall be documented accurately and promptly in the inmate's medical record.

b. Any adverse events, changes in condition, or incidents related to Narcan administration shall be reported and documented according to facility protocols.

#### 5. Follow-Up Care:

a. inmates who have received Narcan due to a suspected or possible opiate overdose shall receive appropriate follow-up care, including medical assessments and monitoring.

b. The underlying cause of the overdose shall be investigated, and interventions to address substance abuse issues may be initiated.

c. A drug screen shall be obtained for all patients who have received Narcan after stabilization. The patients identifying information, date, time, and result should be documented in the patient's medical record. If staff is unable to safely obtain a drug screen in a timely manner, a record of the failed attempt and circumstances preventing completion should be documented in the patient's medical record.

6. Training and Education:

a. Staff members authorized to administer Narcan shall receive proper training in its use, including recognizing opiate overdose symptoms, dosing, administration techniques, and safety precautions.

b. Training programs shall be regularly updated to reflect current best practices.

## 7. Storage and Expiration:

a. Narcan shall be stored securely in accordance with facility protocols to prevent unauthorized access or tampering.

b. Expired Narcan shall be replaced promptly to ensure the availability of effective medication.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in the use of Narcan within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health who may encounter situations involving suspected or possible opiate overdose within correctional facilities are expected to comply with



this policy and actively participate in the safe and effective administration of Narcan while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Care of Pregnant Females**

Policy Statement:

Reserve Health is dedicated to providing comprehensive and compassionate healthcare services to pregnant females in correctional facilities where we provide healthcare services. This policy outlines our commitment to establishing clear guidelines and procedures for the assessment, prenatal care, and management of pregnant inmates, ensuring their well-being, safety, and compliance with the National Commission on Correctional Health Care (NCCHC) standards and relevant regulations.

Purpose:

The purpose of this policy is to ensure that pregnant inmates receive appropriate and timely prenatal care, medical attention, and support throughout their pregnancy while incarcerated. This policy aims to establish protocols for the assessment, treatment, and management of pregnant females within the correctional facility, promoting their health and the health of their unborn children and adhering to NCCHC standards and applicable regulations.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the provision of healthcare services to pregnant females within correctional facilities.

#### Policy Guidelines:

1. Pregnancy Assessment:

a. Pregnant inmates shall be identified and assessed promptly upon admission to the correctional facility.

b. Pregnancy testing and medical evaluations shall be conducted as part of the initial intake process.

#### 2. Prenatal Care:

a. Pregnant inmates shall receive timely and appropriate prenatal care throughout their pregnancy.

b. Prenatal care shall include medical assessments, prenatal vitamins, ultrasounds, and necessary screenings.

#### 3. Individualized Care Plans:

a. Pregnant inmates shall have individualized care plans developed based on their medical history, pregnancy status, and medical needs.



b. Care plans shall include a schedule of prenatal visits, medical interventions, and any necessary restrictions.

#### 4. Safety and Security:

a. Pregnant inmates shall be provided with appropriate safety and security measures, ensuring their protection and well-being during their pregnancy.

b. Any concerns related to the safety and security of pregnant inmates shall be addressed promptly.

5. Medication Management:

a. Medications prescribed to pregnant inmates shall be carefully evaluated for safety during pregnancy.

b. Pregnant inmates shall receive appropriate medication management to ensure the wellbeing of both the mother and the unborn child.

## 6. Nutritional Support:

a. Pregnant inmates shall have access to a nutritionally balanced diet that meets their specific dietary needs during pregnancy.

b. Adequate nutrition shall be provided to support fetal development.

#### 7. Labor and Delivery:

a. Pregnant inmates shall receive appropriate care and support during labor and delivery, which may include access to medical facilities or off-site hospital care, as needed.

b. Medical staff shall be prepared to manage potential complications during childbirth.

## 8. Postpartum Care:

a. Postpartum care shall be provided to pregnant inmates after childbirth to address their physical and emotional needs.

b. Appropriate follow-up care and support shall be arranged as necessary.

#### 9. Documentation and Reporting:

a. All assessments, treatments, interventions, and care provided to pregnant inmates shall be documented accurately and promptly in the inmate's medical record.

b. Any adverse events, changes in condition, or incidents related to pregnancy shall be reported and documented according to facility protocols.

## 10. Quality Assurance and Review:

a. The quality of prenatal care and outcomes for pregnant inmates shall undergo regular review to assess compliance with NCCHC standards and the effectiveness of care.

b. Any identified issues or areas for improvement shall be addressed promptly.

Monitoring and Review:



This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices in the care of pregnant females within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services to pregnant females within correctional facilities are expected to comply with this policy and actively participate in ensuring the well-being and safety of pregnant inmates while adhering to applicable regulations and NCCHC standards. Failure to adhere to these guidelines may result in disciplinary actions.

Company Policy: Response to Sexual Abuse/Assault for Patients

## Policy Statement:

Reserve Health is committed to ensuring the safety, well-being, and dignity of all patients within correctional facilities where we provide healthcare services. This policy outlines our dedication to establishing clear guidelines and procedures for responding to sexual abuse or assault incidents involving patients while adhering to the Prison Rape Elimination Act (PREA) standards, relevant regulations, and best practices.

## Purpose:

The purpose of this policy is to provide guidance on how Reserve Health staff should respond promptly and effectively to any reported or suspected incidents of sexual abuse or assault involving patients in correctional facilities. This policy aims to ensure the safety, support, and appropriate medical care of victims while complying with PREA standards, regulations, and ethical principles.

## Scope:

This policy applies to all employees and contractors of Reserve Health who may become aware of or be involved in responding to incidents of sexual abuse or assault involving patients within correctional facilities.

Policy Guidelines:

1. Prevention and Training:



a. Reserve Health staff shall receive training on recognizing and preventing sexual abuse and assault in the correctional setting.

b. Training shall include awareness of risk factors, signs, and reporting procedures.

2. Reporting and Immediate Response:

a. Any staff member who becomes aware of, suspects, or is informed of an incident of sexual abuse or assault involving a patient shall report it immediately to the appropriate facility authorities.

b. In the case of a medical emergency or immediate threat to the patient's safety, healthcare staff shall provide prompt medical care and call for assistance as needed.

3. Preservation of Evidence:

a. In cases of reported sexual abuse or assault, efforts shall be made to preserve physical evidence, such as clothing or biological samples, as appropriate.

b. Evidence shall be handled according to facility protocols and in coordination with law enforcement, as required.

4. Medical Assessment and Treatment:

a. Victims of sexual abuse or assault shall receive a prompt and comprehensive medical assessment by qualified healthcare providers.

b. Treatment shall be provided as necessary, including addressing physical injuries, sexually transmitted infections (STIs), pregnancy concerns, and emotional support.

5. Victim Support and Confidentiality:

a. Victims of sexual abuse or assault shall be treated with sensitivity, compassion, and respect for their privacy and dignity.

b. Confidentiality shall be maintained to the extent permitted by law, with disclosures made only to those with a legitimate need to know.

6. Reporting to Authorities:

a. Incidents of sexual abuse or assault involving patients shall be reported to the appropriate facility authorities, as required by PREA and facility policies.

b. Coordination with law enforcement agencies shall be facilitated as needed.

7. Documentation:

a. All assessments, treatments, interventions, and incidents related to sexual abuse or assault shall be documented accurately and promptly in the patient's medical record.

b. Any breach of this policy or noncompliance with reporting requirements shall also be documented.

8. Follow-Up Care and Referrals:



a. Victims of sexual abuse or assault shall be provided with appropriate follow-up care, which may include additional medical assessments, counseling, and support services.

b. Referrals to mental health professionals or victim advocacy services shall be made as necessary.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with PREA standards, evolving healthcare standards, regulations, laws, and best practices in responding to sexual abuse or assault incidents involving patients within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in responding to incidents of sexual abuse or assault involving patients while adhering to PREA standards, regulations, and ethical principles. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Care of the Terminally Ill**

Policy Statement:

Reserve Health is dedicated to providing compassionate and comprehensive end-of-life care to terminally ill inmates within correctional facilities where we provide healthcare services. This policy outlines our commitment to establishing clear guidelines and procedures for the assessment, treatment, and management of terminally ill inmates, ensuring their comfort, dignity, and support during their final days while adhering to relevant regulations and standards.

Purpose:

The purpose of this policy is to ensure that terminally ill inmates receive appropriate and empathetic end-of-life care that prioritizes their comfort, quality of life, and dignity during their stay in the correctional facility. This policy aims to establish protocols for the assessment, treatment, and management of terminally ill inmates while promoting compliance with all applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who are involved in the provision of healthcare services to terminally ill inmates within correctional facilities.

#### **Policy Guidelines:**

1. Identification of Terminally Ill inmates:

a. Terminally ill inmates shall be identified through medical assessments, consultations, and medical history reviews.

b. inmates with a prognosis of a terminal illness with a limited life expectancy shall be considered eligible for end-of-life care.

## 2. Individualized Care Plans:

a. Terminally ill inmates shall have individualized care plans developed based on their medical condition, prognosis, and end-of-life goals.

b. Care plans shall include pain and symptom management, psychosocial support, spiritual support, and any necessary interventions.

3. Pain and Symptom Management:

a. Adequate pain and symptom management shall be provided to ensure the comfort and well-being of terminally ill inmates.



b. Medications and interventions for pain and symptom control shall be administered as needed and monitored closely.

4. Psychosocial and Spiritual Support:

a. Terminally ill inmates shall have access to psychosocial and spiritual support services to address emotional, psychological, and spiritual needs.

b. Support may be provided through counseling, chaplaincy services, or other appropriate means.

## 5. Comfort Measures:

a. Measures shall be taken to enhance the comfort and quality of life for terminally ill inmates, which may include the provision of appropriate bedding, assistive devices, or modifications to their living environment.

b. The dignity and privacy of the inmate shall be respected in all aspects of care.

6. Advance Care Planning:

a. Terminally ill inmates shall be encouraged to engage in advance care planning discussions, including decisions about resuscitation, life-sustaining treatments, and end-of-life wishes.

b. Advance directives shall be respected and followed as legally and ethically appropriate.

## 7. Coordination of Care:

a. Coordination of care shall be established with external hospice or palliative care providers as necessary and in accordance with facility policies and regulations.

b. Coordination shall include seamless transitions of care when necessary.

8. Documentation and Reporting:

a. All assessments, treatments, and interventions related to end-of-life care shall be documented accurately and promptly in the inmate's medical record.

b. Any adverse events, changes in condition, or incidents related to end-of-life care shall be reported and documented according to facility protocols.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices in end-of-life care within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health involved in the provision of end-of-life care to terminally ill inmates within correctional facilities are expected to comply with this policy and



actively participate in ensuring the comfort, dignity, and support of terminally ill inmates while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Verification and Accommodation of Disabilities for Patients**

Policy Statement:

Reserve Health is committed to ensuring that the healthcare needs of all inmate patients within correctional facilities are met, including those with disabilities. This policy outlines our commitment to providing accessible and compliant healthcare services by establishing clear guidelines and procedures for the verification of disabilities, reasonable accommodations, and adherence to the National Commission on Correctional Health Care (NCCHC) standards and relevant regulations.

Purpose:

The purpose of this policy is to ensure that inmate patients with disabilities receive appropriate medical care and reasonable accommodations that promote equal access to healthcare services while incarcerated. This policy aims to establish protocols for verifying disabilities, determining reasonable accommodations, and ensuring compliance with NCCHC standards and applicable regulations.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services to inmate patients within correctional facilities.

#### Policy Guidelines:

1. Verification of Disabilities:

a. Reserve Health shall verify the presence and nature of disabilities through appropriate assessments, medical history reviews, consultations, and documented medical evidence.

b. Disabilities may include, but are not limited to, physical disabilities, sensory impairments, mental health conditions, cognitive impairments, and chronic medical conditions.

2. Communication and Consent:

a. inmate patients shall be informed of their right to request accommodations based on disabilities.

b. Reserve Health shall obtain the informed consent of inmate patients with disabilities before conducting assessments or providing accommodations, when feasible.

#### 3. Individualized Care Plans:

a. inmate patients with disabilities shall have individualized care plans developed based on the nature and severity of their disabilities.



b. Care plans shall address the specific healthcare needs and reasonable accommodations required.

#### 4. Reasonable Accommodations:

a. Reasonable accommodations shall be determined on a case-by-case basis, taking into consideration the nature of the disability, the healthcare services required, and available resources.

b. Reasonable accommodations may include accessible facilities, communication aids, assistive devices, sign language interpreters, modified procedures, or any other accommodations necessary to ensure equal access to healthcare services.

#### 5. Accessible Facilities:

a. Reserve Health shall ensure that healthcare facilities within correctional facilities are accessible to inmates with disabilities, including accessible entrances, examination rooms, and medical equipment.

b. Accommodations shall be made to facilitate the mobility and access of inmates with physical disabilities.

6. Accessible Communication:

a. Communication with inmates with sensory impairments shall be facilitated through the use of appropriate aids or interpreters, as needed.

b. Documents and healthcare information shall be provided in accessible formats, such as large print or Braille, as required.

## 7. Staff Training:

a. Healthcare staff shall receive training on disability awareness, effective communication with inmates with disabilities, and the provision of reasonable accommodations.

b. Training programs shall be regularly updated to reflect current best practices and NCCHC guidelines.

## 8. Documentation and Reporting:

a. All assessments, treatments, interventions, and accommodations related to disabilities shall be documented accurately and promptly in the inmate patient's medical record.

b. Any incidents, grievances, or concerns related to the provision of accommodations shall be reported and documented according to facility protocols.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices in providing accessible healthcare services to inmate patients with disabilities within correctional healthcare.



Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health who provide healthcare services to inmate patients within correctional facilities are expected to comply with this policy and actively participate in ensuring the verification and accommodation of disabilities in compliance with NCCHC standards and applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Durable Medical Equipment (DME)**

Policy Statement:

Reserve Health is dedicated to providing appropriate and effective healthcare services to inmate patients within correctional facilities, including the provision and management of Durable Medical Equipment (DME). This policy outlines our commitment to establishing clear guidelines and procedures for the acquisition, use, maintenance, and tracking of DME while ensuring compliance with relevant regulations and standards.

#### Purpose:

The purpose of this policy is to ensure that inmate patients receive timely access to necessary DME when medically indicated. This policy aims to establish protocols for the procurement, storage, distribution, maintenance, and documentation of DME within correctional healthcare facilities while promoting compliance with applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health involved in the provision and management of DME to inmate patients within correctional facilities.

## Policy Guidelines:

1. DME Assessment and Prescription:

a. The need for DME shall be assessed by qualified healthcare providers based on inmate patient assessments, medical history, and clinical criteria.

b. DME shall only be prescribed when medically necessary.

2. Procurement and Storage:

a. Reserve Health shall ensure the procurement of DME from reputable suppliers and manufacturers.

b. DME shall be stored securely in a designated area within the healthcare facility to prevent damage, theft, or unauthorized use.

3. Distribution and Training:

a. DME shall be distributed to inmate patients as prescribed by healthcare providers.

b. inmate patients receiving DME shall be provided with appropriate training and instructions for safe and effective use.

c. Healthcare staff shall ensure that inmates understand how to properly use and maintain the equipment.



d. Security personnel shall be provided access to prescribed DME for security assessment and approval prior to distribution to the patient.

4. Maintenance and Repairs:

a. DME shall be maintained in good working condition and repaired promptly when damaged or malfunctioning.

b. Routine inspections and maintenance schedules shall be established and followed for all DME.

c. Repairs and maintenance shall be conducted by qualified personnel or external contractors as necessary.

5. Documentation and Tracking:

a. All DME prescriptions, distributions, repairs, and maintenance shall be documented accurately and promptly in the inmate patient's medical record.

b. A log or inventory system shall be maintained to track the status, location, and condition of all DME within the facility.

6. Recovery and Return of DME:

a. inmate patients shall be responsible for the proper care and return of DME when it is no longer needed or upon release from the facility.

b. Procedures for the recovery and sanitation of returned DME shall be established and followed.

7. Disposal of DME:

a. DME that cannot be reused shall be properly disposed of in accordance with applicable regulations and facility policies.

b. Disposal procedures shall ensure the safety and privacy of inmate patients.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, regulations, laws, and best practices in the provision and management of DME within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health involved in the provision and management of DME to inmate patients within correctional facilities are expected to comply with this policy and actively participate in ensuring the appropriate use, maintenance, and tracking of DME while adhering to applicable regulations and standards. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Compliance with NCCHC Standards for Medical Staff's Role in Seclusion and Restraint**

Policy Statement:

Reserve Health is dedicated to providing healthcare services that prioritize the safety, wellbeing, and dignity of inmate patients within correctional facilities. This policy outlines our commitment to adhering to the National Commission on Correctional Health Care (NCCHC) standards and applicable regulations for the use of seclusion and restraint, with a specific focus on the role and responsibilities of medical staff in the assessment, monitoring, and intervention related to seclusion and restraint incidents.

#### Purpose:

The purpose of this policy is to ensure that the use of seclusion and restraint within correctional healthcare facilities is conducted in compliance with NCCHC standards, with a primary focus on minimizing the risk of harm, providing appropriate medical oversight, and protecting the rights and dignity of inmate patients. This policy aims to establish protocols for the involvement of medical staff in seclusion and restraint incidents while promoting compliance with all applicable regulations and standards.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities and may be involved in seclusion and restraint incidents.

## Policy Guidelines:

## 1. NCCHC Compliance:

a. Reserve Health shall fully comply with all NCCHC standards and applicable regulations related to the use of seclusion and restraint in correctional healthcare.

b. All seclusion and restraint practices shall align with NCCHC guidelines and principles.

## 2. Medical Staff's Role:

a. Medical staff shall be responsible for providing medical oversight, assessment, and monitoring of inmate patients during and after seclusion and restraint incidents.

b. Medical staff shall be involved in the decision-making process regarding the use of seclusion and restraint when deemed necessary for medical or safety reasons.



3. Assessment and Authorization:

a. Before the initiation of seclusion or restraint, a qualified medical professional shall assess the inmate patient's physical and mental health status to determine the appropriateness of such interventions.

b. Seclusion or restraint shall only be authorized when it is determined to be medically necessary and in the best interest of the inmate patient.

## 4. Continuous Monitoring:

a. During seclusion and restraint, medical staff shall provide ongoing monitoring of the inmate patient's physical and mental well-being.

b. Vital signs, mental status, and comfort shall be assessed at regular intervals, and any signs of distress or medical complications shall be addressed promptly.

5. Documentation and Reporting:

a. Medical staff shall document all aspects of the seclusion and restraint incident, including the assessment, authorization, monitoring, and any interventions.

b. Any adverse events, changes in condition, or incidents related to seclusion and restraint shall be reported and documented according to facility protocols.

## 6. Medical Intervention and Review:

a. If an inmate patient's medical condition deteriorates or if any medical complications arise during seclusion or restraint, medical staff shall provide appropriate interventions.

b. A prompt medical review shall be conducted following the use of seclusion or restraint to assess the inmate patient's physical and mental well-being and determine the need for continued intervention.

# 7. Debriefing and Training:

a. Medical staff shall participate in debriefing sessions after seclusion and restraint incidents to review the process, identify areas for improvement, and ensure the well-being of the inmate patient.

b. Ongoing training and education shall be provided to medical staff regarding the appropriate use of seclusion and restraint, as well as the recognition of medical issues that may arise during these interventions.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices related to the use of seclusion and restraint within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:



All employees and contractors of Reserve Health involved in the provision of healthcare services within correctional facilities are expected to comply with this policy and actively participate in ensuring the appropriate use of seclusion and restraint while adhering to NCCHC standards and applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Care of inmates in Seclusion**

Policy Statement:

Reserve Health is dedicated to ensuring the humane and appropriate care of inmates placed in seclusion within correctional facilities where we provide healthcare services. This policy outlines our commitment to minimizing risks, preserving human dignity, and promoting compliance with recognized standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the care and monitoring of inmates in seclusion while ensuring their physical and mental well-being. This policy aims to ensure compliance with NCCHC standards and relevant regulations, emphasizing the importance of transparency, oversight, and humane treatment of inmates placed in seclusion.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities and may be involved in the care of inmates in seclusion.

## Policy Guidelines:

## 1. NCCHC Compliance:

a. Reserve Health shall fully comply with all NCCHC standards and applicable regulations related to the care of inmates in seclusion.

b. All seclusion practices shall align with NCCHC guidelines and principles.

#### 2. Medical Assessment:

a. A qualified healthcare provider shall conduct a medical assessment of the inmate placed in seclusion promptly after the initiation of seclusion.

b. The assessment shall address the inmate's physical and mental health, the reason for seclusion, and any immediate medical needs.

## 3. Ongoing Monitoring:

a. inmates in seclusion shall be monitored continuously and at regular intervals by qualified medical or correctional staff.

b. Vital signs, mental status, and physical condition shall be assessed and documented during each monitoring check.



## 4. Environmental Conditions:

a. The seclusion area shall meet acceptable standards for safety, cleanliness, and comfort.

b. Environmental conditions, including temperature, lighting, and ventilation, shall be monitored and maintained at appropriate levels for the inmate's well-being.

## 5. Hydration and Nutrition:

a. inmates in seclusion shall have access to water, and their hydration status shall be assessed and documented during each monitoring check.

b. Nutritional needs shall be addressed based on the duration of seclusion, and appropriate provisions shall be made for the inmate's dietary requirements.

## 6. Communication and Interaction:

a. inmates in seclusion shall have access to communication with qualified staff, including healthcare providers, to address their medical and mental health needs.

b. Efforts shall be made to engage in therapeutic communication and de-escalation techniques when appropriate.

## 7. Documentation and Reporting:

a. All aspects of the seclusion process, including the initial assessment, ongoing monitoring, interventions, and inmate interactions, shall be documented accurately and promptly.

b. Any adverse events, changes in condition, or concerns related to seclusion shall be reported and documented according to facility protocols.

# 8. Review and Oversight:

a. A qualified healthcare provider shall conduct regular reviews of the inmate's seclusion status, including the need for continued seclusion and any medical concerns.

b. A record of seclusion reviews shall be maintained, and a plan for the inmate's release from seclusion shall be documented.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices related to the care of inmates in seclusion within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services within correctional facilities are expected to comply with this policy and actively participate in ensuring the appropriate care and monitoring of inmates in seclusion while adhering to NCCHC



standards and applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.

# **Company Policy: Emergency Psychotropic Medication**

#### **Policy Statement:**

Reserve Health is dedicated to providing appropriate and compliant healthcare services, including the administration of emergency psychotropic medication, to inmates within correctional facilities in cases of severe behavioral and psychiatric emergencies.

## Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the administration of emergency psychotropic medication to inmates in compliance with NCCHC standards. This policy aims to ensure that the use of psychotropic medication in emergency situations is conducted safely, ethically, and within the bounds of relevant regulations while prioritizing the well-being and safety of inmates.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities and may be involved in the administration of emergency psychotropic medication.

## Policy Guidelines:

## 1. NCCHC Compliance:

a. Reserve Health shall fully comply with all NCCHC standards and applicable regulations related to the use of emergency psychotropic medication in correctional healthcare.

b. All practices related to the administration of emergency psychotropic medication shall align with NCCHC guidelines and principles.

## 2. Medical Assessment and Authorization:

a. Only a qualified healthcare provider, such as a licensed psychiatrist or physician, shall authorize the administration of emergency psychotropic medication.

b. The healthcare provider shall conduct a thorough assessment to determine the inmate's need for emergency psychotropic medication based on the severity of the behavioral or psychiatric emergency.



3. Informed Consent and Documentation:

a. Informed consent for the administration of emergency psychotropic medication shall be obtained from the inmate, when feasible, or from a legal guardian or designated surrogate.

b. If informed consent cannot be obtained due to the urgency of the situation, the healthcare provider shall document the reasons for the emergency administration and seek retroactive consent as soon as possible.

#### 4. Medication Administration:

a. Emergency psychotropic medication shall be administered by qualified healthcare professionals in accordance with the authorized prescription.

b. The medication shall be administered through appropriate routes, and the dose shall be determined by the prescribing healthcare provider based on the specific clinical situation.

## 5. Monitoring and Documentation:

a. inmates who receive emergency psychotropic medication shall be closely monitored for any adverse effects, changes in condition, or improvements.

b. All aspects of the administration, monitoring, and inmate response shall be documented accurately and promptly in the inmate's medical record.

#### 6. Follow-Up and Review:

a. After the administration of emergency psychotropic medication, a healthcare provider shall conduct a follow-up assessment to evaluate the inmate's response, the ongoing need for medication, and any potential alternatives or long-term treatment plans.

b. A record of the emergency medication administration and follow-up shall be maintained and reviewed as part of the inmate's healthcare plan.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, NCCHC guidelines, laws, regulations, and best practices related to the administration of emergency psychotropic medication within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services within correctional facilities are expected to comply with this policy and actively participate in ensuring the safe and ethical administration of emergency psychotropic medication while adhering to NCCHC standards and applicable regulations. Failure to adhere to these guidelines may result in disciplinary actions.





# **Company Policy: Informed Consent for inmate Patients in a jail**

Policy Statement:

Reserve Health is dedicated to upholding the rights and dignity of inmate patients within correctional facilities by ensuring that they have the opportunity to provide informed consent for medical and healthcare procedures to the extent possible. This policy outlines our commitment to obtaining and documenting informed consent in compliance with relevant regulations and ethical standards.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for obtaining informed consent from inmate patients for medical and healthcare procedures while respecting their autonomy and rights. This policy aims to ensure that informed consent is obtained ethically, documented appropriately, and that inmates are informed about the nature, risks, benefits, and alternatives of the proposed procedures.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services to inmate patients within correctional facilities and are involved in obtaining informed consent.

#### Policy Guidelines:

1. Informed Consent Process:

a. The informed consent process shall be conducted with respect for the inmate's dignity, privacy, and autonomy.

b. inmates shall be provided with information in a manner that is understandable to them, taking into consideration any language barriers, cognitive impairments, or sensory impairments.

c. The consent process shall allow inmates to ask questions, seek clarification, and express their concerns.

## 2. Authorized Personnel:

a. Only qualified healthcare professionals and authorized personnel shall obtain informed consent from inmates.

b. Authorized personnel shall be trained in the principles of informed consent and ethical communication.

3. Consent Documentation:

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a. Informed consent shall be documented in the inmate patient's medical record.

b. The informed consent form, when used, shall include information about the nature of the procedure, its purpose, potential risks and benefits, alternatives, and any relevant timeframes.

c. inmates shall sign the informed consent form voluntarily when they are able to do so.

## 4. Obtaining Consent for Specific Procedures:

a. Informed consent shall be obtained for specific medical procedures, treatments, surgeries, medications, interventions, and research participation.

b. The consent process shall provide inmates with an opportunity to refuse or withdraw consent at any time without retaliation.

# 5. Emergency Situations:

a. In emergency situations where immediate medical intervention is required to save a life or prevent serious harm, and informed consent cannot be obtained from the inmate, healthcare providers shall act in the inmate's best interest based on medical necessity.

b. Documentation of the emergency situation and the decision to proceed without formal consent shall be completed promptly.

# 6. Revisiting Informed Consent:

a. inmates shall be periodically updated about their medical condition and proposed treatments, and their informed consent shall be revisited as necessary.

b. inmates shall be informed of any significant changes to their treatment plan that may require a new informed consent process.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, ethical principles, regulations, laws, and best practices related to obtaining informed consent from inmate patients within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services to inmate patients within correctional facilities are expected to comply with this policy and actively participate in obtaining and documenting informed consent in a manner that respects the rights and autonomy of inmates. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Right to Refuse Care**

Policy Statement:

Reserve Health recognizes and respects the autonomy and right of patients, including inmates treated at correctional facilities, to make decisions about their own healthcare. This policy outlines our commitment to upholding the right to refuse care while ensuring that patients are provided with appropriate information and support to make informed decisions about their medical treatment.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for respecting and accommodating the right of patients, including inmates in correctional facilities, to refuse medical care or treatment when they have the capacity to do so. This policy aims to promote patient autonomy, protect their rights, and ensure that healthcare decisions are made in an ethical and informed manner.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services to patients within correctional facilities and may encounter situations where patients wish to refuse medical care or treatment.

## Policy Guidelines:

1. Respect for Patient Autonomy:

a. Reserve Health respects the autonomy and right of patients to make informed decisions about their medical care, including the right to refuse care or treatment.

b. All healthcare providers shall approach patients' decisions to refuse care with respect and without coercion.

## 2. Informed Decision-Making:

a. Patients shall be provided with clear, understandable information about their medical condition, the proposed care or treatment, potential risks and benefits, and any available alternatives.

b. Patients shall have the opportunity to ask questions, seek clarification, and discuss their concerns with healthcare providers.

## 3. Capacity Assessment:



a. Healthcare providers shall assess the patient's capacity to make informed decisions about refusing care.

b. Patients who have the capacity to make decisions about their healthcare shall have their decisions respected, even if their choice is to refuse care or treatment.

## 4. Documentation:

a. Refusals of care shall be documented in the patient's medical record, including the patient's rationale for refusing care and any discussions or information provided.

b. If the patient later changes their decision, such changes shall also be documented.

5. Review and Reassessment:

a. Patients who initially refuse care shall have their decisions reviewed and reassessed periodically to ensure that they continue to have the capacity to make informed decisions.

b. Healthcare providers shall offer ongoing support, information, and reassessment to patients who may reconsider their decision to refuse care.

## 6. Emergency Situations:

a. In emergency situations where a patient's life is at risk, and the patient lacks capacity to make informed decisions, healthcare providers shall act in the patient's best interest to provide necessary medical care and treatment.

b. In such cases, documentation of the emergency situation and the decision to provide care without consent shall be completed promptly.

# 7. Notification of Rights:

a. Patients shall be informed of their right to refuse care and of the potential consequences of their decision.

b. Patient education materials regarding the right to refuse care may be provided.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, ethical principles, regulations, laws, and best practices related to respecting the right to refuse care for patients, including inmates, within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services to patients within correctional facilities are expected to comply with this policy and actively respect and accommodate the right of patients to refuse care or treatment, provided they have



the capacity to make informed decisions. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Gender-Affirming Care**

#### Policy Statement:

Reserve Health is committed to providing equitable and inclusive healthcare services to all individuals, including those in correctional facilities, while respecting and affirming their gender identity. This policy outlines our commitment to delivering gender-affirming care in accordance with applicable laws and regulations.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for the provision of gender-affirming care to inmates in correctional facilities, ensuring that their unique healthcare needs related to gender identity are addressed with respect, dignity, and sensitivity.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who provide healthcare services within correctional facilities and may be involved in the delivery of gender-affirming care.

## Policy Guidelines:

1. Respect for Gender Identity:

a. Reserve Health respects and acknowledges the self-identified gender identity of each inmate.

b. Healthcare staff shall use the name and pronouns that align with the inmate's affirmed gender identity.

## 2. Access to Gender-Affirming Care:

a. inmates shall have access to gender-affirming care, including medical, mental health, and support services, as medically indicated and in alignment with recognized standards of care.

b. Gender-affirming care shall be provided without discrimination or prejudice based on gender identity or expression.

## 3. Assessment and Treatment Planning:

a. Healthcare providers shall conduct comprehensive assessments to determine the specific gender-affirming healthcare needs of each inmate.

b. Treatment plans shall be developed in collaboration with the inmate to address their unique healthcare goals and needs.



## 4. Hormone Therapy:

a. inmates who are receiving or seek hormone therapy as part of their gender-affirming care shall have access to appropriate medical evaluations, monitoring, and treatment.

b. Dosages and administration routes shall be determined based on established clinical guidelines.

# 5. Surgical Procedures:

a. inmates seeking elective gender-affirming surgical procedures who are not otherwise experiencing a surgical medical need will not be referred for surgical intervention.

b. Any inmate having previously undergone gender-affriming surgical procedures will be managed appropriately during the post-operative period and be referred to qualified specialists when appropriate including but not limited to any potential surgical complications.

# 6. Mental Health and Support Services:

a. inmates shall have access to mental health services and support, including counseling and peer support, to address the psychosocial aspects of their gender-affirming journey.

b. Supportive and affirming environments shall be promoted within correctional facilities.

# 7. Confidentiality:

a. Information related to an inmate's gender identity and gender-affirming care shall be treated with the utmost confidentiality, in accordance with applicable privacy laws and regulations.

# 8. Training and Education:

a. Healthcare providers shall receive training and education on gender-affirming care, cultural competence, and sensitivity to the unique needs of transgender and gender-diverse individuals.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, and best practices related to gender-affirming care within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health involved in the provision of healthcare services within correctional facilities are expected to comply with this policy and actively participate in providing gender-affirming care with respect, dignity, and sensitivity to the needs of inmates. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Employee Background Checks**

## Policy Statement:

Reserve Health is committed to ensuring a safe and secure working environment for all employees and maintaining the trust and confidence of our clients and patients. This policy outlines our approach to conducting background checks for potential employees and ongoing checks for current employees in accordance with applicable laws and regulations.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting background checks on potential employees during the hiring process and periodically on current employees as part of our commitment to safety, security, and compliance.

#### Scope:

This policy applies to all employees and contractors of Reserve Health, including full-time, parttime, temporary, and contract employees, and covers all aspects of background checks conducted as part of the employment process.

## Policy Guidelines:

1. Types of Background Checks:

a. Reserve Health may conduct background checks as part of the pre-employment screening process. These checks may include, but are not limited to, criminal background checks, employment verification, educational verification, and reference checks.

b. In some cases, ongoing background checks may be conducted on current employees as permitted by applicable laws and regulations.

2. Criminal Background Checks:

a. Criminal background checks may be conducted to assess an applicant's or employee's criminal history.

b. Convictions that are directly related to the position being applied for or held may be considered in the employment decision.

3. Employment and Educational Verification:

a. Employment history and educational qualifications provided by applicants may be verified to ensure accuracy.

b. False or misleading information may result in disqualification from employment or disciplinary action for current employees.



## 4. Reference Checks:

a. Reserve Health may contact provided references to gather information about an applicant's qualifications, work history, and performance.

b. Reference checks are conducted in a professional and respectful manner.

# 5. Consent and Disclosure:

a. Applicants and employees shall be required to provide written consent and authorization for background checks as required by applicable laws.

b. Prior to conducting background checks, applicants and employees shall be informed of the nature and purpose of the checks.

# 6. Confidentiality and Compliance:

a. All information obtained through background checks shall be treated with the utmost confidentiality and in compliance with applicable privacy laws and regulations.

b. Background checks shall be conducted in accordance with federal, state, and local laws and regulations.

# 7. Adverse Actions:

a. If information obtained through a background check results in an adverse employment decision, the applicant or employee shall be provided with a copy of the report and a summary of their rights under the Fair Credit Reporting Act (FCRA) or other applicable laws.

b. Applicants or employees have the right to dispute the accuracy of information in the background report.

# 8. Ongoing Monitoring:

a. Depending on the nature of employment, certain positions may require periodic background checks for continued employment.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving laws, regulations, industry standards, and best practices related to employee background checks. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health involved in the employment and screening process are expected to comply with this policy and ensure that background checks are conducted in a fair, lawful, and respectful manner. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Employee Drug Testing in Medication Discrepancy Situations**

Policy Statement:

Reserve Health is committed to maintaining the highest standards of safety and compliance in the healthcare services we provide. This policy outlines our approach to conducting drug testing for employees in situations involving medication discrepancies, ensuring the safety of our patients and maintaining the integrity of our services.

Purpose:

The purpose of this policy is to establish clear guidelines and procedures for conducting drug testing on employees when there are concerns or discrepancies related to medication handling, administration, or documentation. This policy aims to uphold safety, quality, and compliance standards in our healthcare services.

#### Scope:

This policy applies to all employees and contractors of Reserve Health, including full-time, parttime, temporary, and contract employees, and covers all aspects of drug testing in medication discrepancy situations.

Policy Guidelines:

1. Drug Testing Criteria:

a. Drug testing may be conducted when there is a reasonable suspicion of medication misuse, diversion, or other medication-related discrepancies by an employee.

b. Medication discrepancies may include but are not limited to, unexplained missing medications, incorrect medication documentation, or evidence of tampering with medication.

## 2. Reasonable Suspicion:

a. Reasonable suspicion shall be based on specific observations, behaviors, or circumstances that lead to concerns about an employee's involvement in medication discrepancies.

b. Observations may include unusual behavior, repeated errors in medication administration, or reports from colleagues or patients.

3. Drug Testing Process:

a. Drug testing shall be conducted by a qualified testing facility selected by Reserve Health.



b. The types of drug tests conducted may include urine, blood, or other appropriate testing methods based on the situation.

## 4. Confidentiality:

a. All information related to drug testing, including the reason for testing, results, and related documentation, shall be treated with the utmost confidentiality.

b. Access to drug testing information shall be limited to those with a legitimate need to know, as required by law and for the purpose of investigating the medication discrepancy.

# 5. Consent and Notification:

a. Employees shall be informed of the reason for drug testing and shall provide written consent for the testing.

b. Drug testing shall be conducted promptly and as unobtrusively as possible, while ensuring the integrity of the testing process.

# 6. Return-to-Work Policy:

a. Employees who test negative for controlled substances may be allowed to return to work in accordance with Reserve Health's policies and procedures.

b. Employees who test positive for controlled substances may be subject to disciplinary actions, up to and including termination, in accordance with applicable laws and policies.

# 7. Appeals and Reporting:

a. Employees who believe that drug testing results are incorrect or have concerns about the testing process may have the opportunity to appeal or report such concerns as outlined in Reserve Health's grievance policy.

b. False or malicious reports related to medication discrepancies may result in disciplinary actions.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving laws, regulations, industry standards, and best practices related to employee drug testing in medication discrepancy situations. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in maintaining the safety, integrity, and quality of healthcare services provided. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Prohibition of Impairment in the Workplace**

Policy Statement:

Reserve Health is dedicated to maintaining a safe, productive, and professional work environment for all employees and ensuring the highest standards of patient care. This policy outlines our commitment to prohibiting impairment in the workplace, which includes being under the influence of alcohol, drugs, or any substances that can impair job performance and safety.

## Purpose:

The purpose of this policy is to establish clear guidelines and expectations for employees regarding the prohibition of impairment in the workplace, promoting safety, productivity, and the well-being of all employees and patients.

## Scope:

This policy applies to all employees and contractors of Reserve Health, including full-time, parttime, temporary, and contract employees, and covers all aspects of impairment in the workplace.

## Policy Guidelines:

1. Prohibition of Impairment:

a. Employees are strictly prohibited from reporting to work or performing their job duties while under the influence of alcohol, illegal drugs, or any substances that impair their ability to perform their job safely and effectively.

b. This policy applies to all work-related activities, including but not limited to patient care, administrative tasks, and driving company vehicles.

# 2. Prescription Medications:

a. The appropriate use of prescription medications is allowed in the workplace, provided that the use does not impair job performance and is in accordance with a valid prescription from a licensed healthcare provider.

b. Employees who are prescribed medications that may affect their job performance must inform their supervisor or the HR department to assess any necessary accommodations or temporary work restrictions.

3. Reporting Impairment:

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a. Employees who observe a coworker displaying signs of impairment in the workplace have a responsibility to report their concerns to their immediate supervisor, manager, or the HR department.

b. Reports of impairment will be handled confidentially and investigated as appropriate.

# 4. Drug and Alcohol Testing:

a. Reserve Health may conduct drug and alcohol testing under the following circumstances:

i. Reasonable suspicion of impairment in accordance with a separate reasonable suspicion testing policy.

ii. Post-incident or accident testing as specified in the post-incident and accident testing policy.

b. Refusal to undergo drug and alcohol testing as required by company policy may result in disciplinary actions, up to and including termination.

# 5. Confidentiality:

a. All information related to drug and alcohol testing, including the reason for testing, results, and related documentation, shall be treated with the utmost confidentiality, as required by law.

# 6. Disciplinary Actions:

a. Violations of this policy may result in disciplinary actions, up to and including termination, in accordance with Reserve Health's progressive discipline policy.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving laws, regulations, industry standards, and best practices related to the prohibition of impairment in the workplace. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in maintaining a safe, impairment-free workplace. Failure to adhere to these guidelines may result in disciplinary actions.

Reserve Health is committed to promoting a safe and professional work environment, free from impairment, to ensure the safety and well-being of all employees and patients.



# **Company Policy: Maintenance of Security Clearance**

Policy Statement:

Reserve Health is dedicated to upholding the highest standards of security and confidentiality in the workplace, particularly when dealing with sensitive patient information and compliance with legal and regulatory requirements. This policy outlines our commitment to requiring employees to maintain the necessary security clearance for their roles and the consequences of losing that clearance.

#### Purpose:

The purpose of this policy is to establish clear guidelines and expectations for employees regarding the maintenance of security clearance as a condition of employment. This policy aims to protect sensitive information, maintain compliance, and ensure the integrity of our healthcare services.

#### Scope:

This policy applies to all employees and contractors of Reserve Health, including full-time, parttime, temporary, and contract employees, whose roles require access to secured areas, systems, or sensitive patient information.

#### Policy Guidelines:

1. Security Clearance Requirement:

a. Employees whose roles require access to secured areas, systems, or sensitive patient information are required to obtain and maintain the necessary security clearance as a condition of their employment.

b. The specific level of security clearance required will be determined based on job responsibilities and the nature of the work.

## 2. Security Clearance Process:

a. Reserve Health will facilitate the security clearance process for eligible employees, including initiating background investigations and submitting required documentation to relevant authorities.

b. Employees are responsible for providing accurate and complete information during the security clearance process.

3. Maintenance of Security Clearance:

a. Employees are responsible for complying with all security clearance requirements, including background checks, fingerprinting, periodic reviews, and any ongoing security protocols.

b. Failure to maintain the required security clearance may result in immediate termination of employment.

4. Notification of Clearance Issues:

a. Employees who become aware of any issues that may affect their security clearance status, including criminal charges, legal matters, or other relevant circumstances, must promptly inform their supervisor or the HR department.

b. Failure to report such issues may result in disciplinary actions, up to and including termination.

# 5. Termination for Clearance Loss:

a. If an employee's security clearance is revoked, denied, or not renewed for any reason, the employee will be immediately terminated from their position.

b. Termination due to loss of security clearance will not be subject to the typical notice or severance provisions of employment contracts or policies.

# 6. Confidentiality:

a. All employees are expected to adhere to strict confidentiality regarding their own security clearance status and the status of their colleagues.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving security requirements, laws, regulations, industry standards, and best practices related to the maintenance of security clearance. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively maintain the required security clearance for their roles. Failure to adhere to these guidelines may result in immediate termination.

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# **Company Policy: Restrictions on Personal Electronic Devices**

#### Policy Statement:

Reserve Health recognizes the importance of maintaining a secure and controlled environment within correctional facilities, including restrictions on personal electronic devices. This policy outlines our commitment to restricting staff from bringing computers, tablets, or phones into the correctional facility, with a limited exception for approved medical providers, and provides guidelines for the responsible use and management of such devices.

#### Purpose:

The purpose of this policy is to establish clear guidelines and procedures for managing personal electronic devices within correctional facilities, ensuring safety, security, and compliance with facility rules.

#### Scope:

This policy applies to all inmates, employees, and approved medical providers within correctional facilities where Reserve Health provides healthcare services.

#### Policy Guidelines:

1. Restrictions on Personal Electronic Devices:

a. Staff are strictly prohibited from bringing personal electronic devices, including but not limited to computers, tablets, and phones, into the correctional facility's secure perimeter.

b. This prohibition is in place to maintain security, prevent unauthorized communication, and ensure compliance with facility rules.

2. Exception for Approved Medical Providers:

a. Approved medical providers may be granted an exception to bring in one (1) smartphone for work-related purposes only.

b. The use of the smartphone is limited to medical and healthcare-related tasks and is subject to approval by facility authorities.

## 3. Restrictions on Sharing and Use:

a. Approved medical providers with exceptions must not share their smartphone with any other inmate, staff member, or unauthorized individual.

b. Smartphones provided to approved medical providers may only be used for authorized work-related tasks and are prohibited in common areas.



#### 4. Protocol for Lost or Stolen Devices:

a. In the event of a lost or stolen smartphone, approved medical providers must report the loss or theft immediately to facility authorities and their Reserve Health supervisor.

b. Facility authorities and security personnel will investigate the incident and take appropriate actions, which may include notifying law enforcement if necessary.

#### 5. Security Measures:

a. Approved medical providers shall take necessary security precautions to prevent unauthorized access to the smartphone and to protect sensitive patient information.

b. Password protection, encryption, and any other security measures specified by facility authorities and Reserve Health must be implemented and maintained.

#### 6. Non-Compliance:

a. Any violation of this policy, including unauthorized use or sharing of smartphones, may result in disciplinary actions, including revocation of smartphone privileges, and may be subject to legal consequences.

#### Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving security requirements, laws, regulations, industry standards, and best practices related to the use and management of personal electronic devices within correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All inmates, employees, and approved medical providers are expected to comply with this policy and actively participate in maintaining security and compliance within correctional facilities. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Expectations of Professionalism when Interacting with Security Personnel**

**Policy Statement:** 

Reserve Health is dedicated to providing professional healthcare services within correctional facilities while maintaining a collaborative and respectful working relationship with security personnel. This policy outlines our expectations for professionalism and conduct when interacting with security personnel in the correctional facility setting.

#### Purpose:

The purpose of this policy is to establish clear guidelines and expectations for employees and contractors of Reserve Health regarding professionalism, communication, and collaboration with security personnel in correctional facilities, ultimately contributing to the delivery of quality healthcare services and the safety of all individuals within the facility.

#### Scope:

This policy applies to all employees and contractors of Reserve Health who work within correctional facilities, including full-time, part-time, temporary, and contract employees.

## Policy Guidelines:

1. Respect and Collaboration:

a. All employees and contractors of Reserve Health are expected to treat security personnel with respect and professionalism at all times.

b. Collaboration and effective communication with security personnel are essential to ensuring the safety and security of patients, staff, and visitors.

## 2. Identification and Access:

a. Employees and contractors of Reserve Health shall wear appropriate identification badges and credentials at all times while in the facility.

b. Compliance with facility security procedures, including entry and exit protocols, must be strictly adhered to.

## 3. Communication with Security Personnel:

a. All communication with security personnel shall be clear, concise, and respectful.

b. Employees and contractors shall promptly respond to inquiries or requests for assistance from security personnel when related to patient care or facility safety.



# 4. Conflict Resolution:

a. In the event of conflicts or disagreements between healthcare staff and security personnel, efforts shall be made to resolve the issue through appropriate channels and in a professional manner.

b. Disputes that cannot be resolved amicably shall be escalated to higher authorities for resolution.

# 5. Patient Safety and Security:

a. Employees and contractors shall promptly report any safety or security concerns, incidents, or breaches to facility security personnel and follow facility protocols.

b. Maintaining the safety and security of patients, staff, and visitors is a shared responsibility among healthcare and security personnel.

# 6. Patient Confidentiality:

a. Employees and contractors shall adhere to strict patient confidentiality standards when discussing patient-related matters with security personnel.

b. Patient information shall only be shared on a need-to-know basis and in accordance with applicable laws and regulations.

# 7. Training and Education:

a. Employees and contractors shall receive training and education on interacting professionally and collaboratively with security personnel within the correctional facility setting.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving laws, regulations, industry standards, and best practices related to professionalism and collaboration when interacting with security personnel in correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees and contractors of Reserve Health are expected to comply with this policy and actively participate in maintaining professionalism and collaboration with security personnel within correctional facilities. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Identification and Licensure Badge Requirement for Medical Staff**

#### **Policy Statement:**

Reserve Health is committed to providing high-quality healthcare services within correctional facilities while ensuring transparency and accountability in the identification of medical staff. This policy outlines our requirement for all medical staff to wear a visible name badge that clearly identifies them and their licensure.

#### Purpose:

The purpose of this policy is to establish clear guidelines and expectations for medical staff regarding the wearing of visible identification badges that accurately represent their identity and licensure status. This policy aims to enhance patient safety, improve communication, and promote transparency.

#### Scope:

This policy applies to all medical staff employed or contracted by Reserve Health, including physicians, nurses, physician assistants, nurse practitioners, and other healthcare providers, who provide healthcare services within correctional facilities.

#### Policy Guidelines:

1. Visible Identification Badge:

a. All medical staff members are required to wear a visible identification badge at all times while on duty within correctional facilities.

b. The identification badge shall be prominently displayed and easily visible, either as a clipon badge or worn on a lanyard.

## 2. Content of Identification Badge:

a. The identification badge shall include the following information:

i. The staff member's full name, as it appears on their professional license.

ii. The staff member's licensure or certification title (e.g., MD, RN, PA, NP).

iii. A clear, recent photograph of the staff member.

b. The badge shall be designed and formatted in a manner that ensures legibility and clarity of information.

3. Badge Consistency:



a. Identification badges shall be consistent in format and design among all medical staff members to facilitate easy recognition.

b. Identification badges shall be provided by Reserve Health to ensure uniformity and compliance.

4. Badge Replacement and Maintenance:

a. Medical staff members are responsible for promptly reporting lost, damaged, or stolen identification badges to their immediate supervisor or the HR department.

b. Replacement badges will be issued as needed, and any associated costs may be the responsibility of the staff member.

5. Badge Display:

a. The identification badge shall be worn visibly on the upper chest area and not obstructed by clothing or other items.

b. Staff members are responsible for ensuring that their identification badge is consistently visible and unobstructed during working hours.

# 6. Compliance:

a. All medical staff members are expected to comply with this policy and actively wear their identification badge as specified.

b. Failure to adhere to these guidelines may result in disciplinary actions.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and facility requirements related to identification and licensure badges for medical staff. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



# **Company Policy: Stay-Over Policy for Late Relief Employees**

Policy Statement:

Reserve Health is dedicated to maintaining the continuity and quality of healthcare services, even in situations where relief employees may arrive late for their scheduled shifts. This policy outlines the procedures and expectations for stay-over arrangements when relief employees are delayed.

#### Purpose:

The purpose of this policy is to establish clear guidelines for managing situations when relief employees are late for their scheduled shifts, ensuring that patient care is not compromised and the transition between shifts is conducted smoothly.

#### Scope:

This policy applies to all healthcare employees working within Reserve Health, including fulltime, part-time, temporary, and contract staff.

## Policy Guidelines:

1. Late Relief Employee Notification:

a. Relief employees who anticipate being late for their scheduled shifts must promptly notify their immediate supervisor or manager as soon as they become aware of the delay.

b. Notification should include an estimated arrival time and the reason for the delay.

#### 2. Stay-Over Consideration:

a. Stay-over arrangements may be considered when the delay is expected to be relatively short and the employee's presence is critical for patient care continuity.

b. Stay-over arrangements are at the discretion of the supervisor or manager, considering the impact on patient care and the availability of appropriate accommodations.

3. Responsibilities of the Oncoming Shift:

a. If stay-over arrangements are made, the oncoming shift must be informed of the situation and be prepared to continue patient care.

b. The oncoming shift should review relevant patient information and receive a proper handover that includes information that would have otherwise been shared with the absent employee.

4. Responsibilities of the Offgoing Shift:



a. If stay-over arrangements are made, the oncoming shift must be informed of the situation and how long the stay-over employee will be available in the facility.

b. Stay-over employees should self-monitor for fatigue that may adversely affect patient care.4. Stay-Over Duration:

a. The duration of stay-over will be determined by the supervisor or manager based on the specific circumstances, the estimated delay, and the availability of relief employees.

b. Stay-over should be kept to a minimum to avoid fatigue and overtime costs.

5. Compensation and Overtime:

a. Stay-over time may be compensable based on applicable laws, regulations, and company policies.

b. Overtime compensation, if applicable, will be provided in accordance with company policies and legal requirements.

6. Documentation:

a. Stay-over arrangements, including the reason for the delay and the duration of stay-over, should be documented for record-keeping purposes.

7. Reporting of Delays:

a. Supervisors or managers shall report instances of late relief employees and any resulting stay-over arrangements to the HR department for record-keeping and potential payroll adjustments.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and emerging situations involving late relief employees. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All employees are expected to comply with this policy and actively participate in managing stayover situations when relief employees are late for their scheduled shifts, with a focus on maintaining patient care continuity and quality.



# **Company Policy: Use of Translation and Interpreting Services with Patients**

#### Policy Statement:

Reserve Health is committed to providing effective and culturally sensitive healthcare services to all patients, regardless of their language proficiency. This policy outlines the procedures and expectations for the use of translation and interpreting services when communicating with patients who have limited English proficiency or speak languages other than English.

#### Purpose:

The purpose of this policy is to ensure that all patients have equal access to healthcare services, can fully participate in their care, and understand their treatment plans, rights, and responsibilities. Effective communication through professional translation and interpreting services is essential for achieving this goal.

#### Scope:

This policy applies to all healthcare employees, including physicians, nurses, allied health professionals, and administrative staff, as well as any contracted translation and interpreting service providers working with Reserve Health.

#### Policy Guidelines:

1. Identification of Language Needs:

a. Healthcare staff must assess the language proficiency of each patient during the initial intake process or as soon as it becomes evident that language barriers may affect communication.

b. Patients should be asked about their preferred language for communication.

2. Use of Professional Translation and Interpreting Services:

a. Whenever a patient's language proficiency is limited and may hinder effective communication, professional translation and interpreting services should be promptly arranged.

b. Reserve Health will maintain a list of approved translation and interpreting service providers who are qualified and experienced in healthcare settings.

c. The use of family members, friends, or untrained individuals as interpreters is strongly discouraged except in emergency situations.

#### 3. Cultural Sensitivity:

a. Healthcare staff should be culturally sensitive and respectful of patients' cultural backgrounds and communication preferences.



b. Avoid making assumptions based on a patient's appearance or surname regarding their language proficiency or cultural background.

## 4. Training and Education:

a. Healthcare staff shall receive training on how to effectively utilize translation and interpreting services and cultural competence.

b. Training shall emphasize the importance of patient confidentiality and the role of professional interpreters.

# 5. Documentation:

a. Patient records shall include documentation of the use of translation and interpreting services, including the name of the interpreter, date, and any relevant details regarding the communication.

# 6. Patient Rights:

a. Patients have the right to receive healthcare services in their preferred language and to request translation or interpreting services at any time.

b. Patients should be informed of their rights regarding language access.

# 7. Emergency Situations:

a. In emergency situations where professional interpreters are not immediately available, healthcare staff should use all available means to communicate essential information while ensuring the safety and well-being of the patient.

b. Follow-up communication with professional interpreters should occur as soon as possible.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and cultural competence requirements related to the use of translation and interpreting services with patients. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All healthcare employees are expected to comply with this policy and actively participate in ensuring that patients with limited English proficiency or from diverse language backgrounds receive effective communication support through professional translation and interpreting services.



# **Company Policy: Maintenance of CPR, BLS, and ACLS Certification for Direct Patient Care Staff**

## Policy Statement:

Reserve Health is committed to providing safe and high-quality healthcare services to our patients. This policy outlines the requirements and expectations for all direct patient care staff to obtain and maintain current certifications in Cardiopulmonary Resuscitation (CPR), Basic Life Support (BLS), and Advanced Cardiovascular Life Support (ACLS) to ensure their preparedness to respond effectively in emergency situations.

#### Purpose:

The purpose of this policy is to establish clear guidelines for the initial certification and ongoing maintenance of CPR, BLS, and ACLS certifications for all direct patient care staff. These certifications are essential to ensuring the safety and well-being of patients during life-threatening emergencies.

#### Scope:

This policy applies to all direct patient care staff within Reserve Health, including physicians, nurses, nurse practitioners, physician assistants, and other healthcare providers.

## Policy Guidelines:

## 1. Initial Certification:

a. All direct patient care staff members are required to obtain and provide evidence of current CPR, BLS, and ACLS certifications before commencing their employment.

b. Certifications must be obtained from accredited organizations recognized by relevant healthcare authorities.

## 2. Renewal and Recertification:

a. CPR and BLS certifications must be renewed on a biannual basis or as required by the certifying organization.

b. ACLS certifications must be renewed on a biennial basis or as required by the certifying organization.

c. Staff members are responsible for tracking their certification expiration dates and initiating the recertification process in a timely manner.

d. Reserve Health will provide reminders and support for certification renewal as needed.

3. Proof of Certification:



a. Direct patient care staff members are required to provide proof of their current CPR, BLS, and ACLS certifications to the HR department and their immediate supervisor or manager upon request.

b. Copies of certifications shall be maintained in the employee's personnel file.

# 4. Training and Education:

a. Reserve Health shall facilitate and support staff members in obtaining initial certifications and recertifications by providing access to accredited training programs, courses, and resources.

b. Staff members are encouraged to seek continuing education opportunities to enhance their CPR, BLS, and ACLS knowledge and skills.

# 5. Failure to Maintain Certification:

a. Failure to maintain current CPR, BLS, and ACLS certifications is considered a breach of this policy and may result in disciplinary actions, up to and including termination of employment.

b. In cases where certifications lapse, staff members will be temporarily reassigned to nondirect patient care duties until they regain certification.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and certification requirements related to CPR, BLS, and ACLS for direct patient care staff. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All direct patient care staff members are expected to comply with this policy and actively maintain current CPR, BLS, and ACLS certifications to ensure their readiness to respond effectively in emergency situations.



# **Company Policy: Restriction of Unprofessional Relationships with Patients or inmates**

#### **Policy Statement:**

Reserve Health is committed to maintaining a professional and ethical healthcare environment within correctional facilities. This policy outlines our expectations for all employees to avoid engaging in unprofessional relationships with patients or inmates, which can compromise the integrity of healthcare services and patient safety.

#### Purpose:

The purpose of this policy is to establish clear guidelines for all employees to maintain professional boundaries and conduct themselves in a manner that upholds the highest ethical standards when interacting with patients or inmates within correctional facilities.

#### Scope:

This policy applies to all employees of Reserve Health, including healthcare providers, administrative staff, and support personnel, working within correctional facilities where healthcare services are provided.

#### Policy Guidelines:

1. Maintaining Professional Boundaries:

a. All employees are expected to maintain professional boundaries when interacting with patients or inmates.

b. Inappropriate or unprofessional relationships, including but not limited to personal, romantic, or exploitative relationships, are strictly prohibited.

## 2. Avoiding Favoritism:

a. Employees must avoid showing favoritism or preferential treatment to any patient or inmate.

b. Healthcare decisions and treatment plans should be based solely on medical and clinical considerations.

## 3. Confidentiality and Privacy:

a. Employees are required to adhere to strict patient confidentiality and privacy standards in accordance with applicable laws and regulations.

b. Discussing patient or inmate information outside of the professional healthcare context is prohibited.



## 4. Prohibited Actions:

a. Engaging in actions such as gifts, financial transactions, providing personal contact information, or socializing with patients or inmates outside of the professional healthcare context is strictly prohibited.

b. Employees must avoid any behavior that may be perceived as inappropriate or compromising the professional relationship.

5. Reporting Unprofessional Relationships:

a. If an employee becomes aware of an unprofessional relationship involving a coworker or colleague, they have an obligation to report it to their immediate supervisor, manager, or designated HR personnel.

b. Reports should be made promptly to prevent potential harm to patients or inmates and to address any policy violations.

6. Consequences of Policy Violations:

a. Violations of this policy may result in disciplinary actions, up to and including termination of employment, in accordance with company policies and legal requirements.

b. Violations that may have legal implications, such as harassment or exploitation, may be reported to appropriate authorities.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and ethical guidelines related to maintaining professional boundaries with patients or inmates. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All employees are expected to comply with this policy and actively maintain professional boundaries with patients or inmates within correctional facilities. Failure to adhere to these guidelines may result in disciplinary actions.



# **Company Policy: Interpretation of Discrepancies Between Reserve Health Policies and Facility Policies**

#### **Policy Statement:**

Reserve Health recognizes that employees may encounter situations where there are discrepancies between Reserve Health policies and the policies of the correctional facility within which they work. This policy outlines the procedures for addressing and resolving such discrepancies in a manner that ensures compliance with both Reserve Health policies and facility policies while upholding the highest standards of patient care and safety.

#### Purpose:

The purpose of this policy is to provide guidance to employees on how to interpret and navigate situations where inconsistencies or conflicts exist between Reserve Health policies and those of the correctional facility. This policy aims to promote clarity, compliance, and the delivery of quality healthcare services while maintaining the security and operational requirements of the facility.

#### Scope:

This policy applies to all employees of Reserve Health, including healthcare providers, administrative staff, and support personnel, working within correctional facilities where healthcare services are provided.

#### Policy Guidelines:

1. Awareness of Policy Discrepancies:

a. Employees should be aware of Reserve Health policies as well as the policies and procedures of the correctional facility in which they work.

b. When an employee identifies a discrepancy or conflict between Reserve Health policies and facility policies, they should promptly inform their immediate supervisor or manager.

## 2. Seeking Clarification:

a. Employees encountering policy discrepancies should seek clarification from their immediate supervisor or manager.

b. Supervisors or managers shall provide guidance on how to navigate the situation and ensure compliance with both sets of policies.

3. Prioritizing Patient Care and Safety:



a. In situations where policy discrepancies may compromise patient care or safety, employees are expected to prioritize patient well-being.

b. Employees should follow the course of action that best safeguards patient health and security.

4. Engaging in Dialogue:

a. Employees are encouraged to engage in open and respectful dialogue with facility staff or management to resolve policy discrepancies.

b. Discussions should aim to find mutually agreeable solutions that align with the best interests of patient care, facility security, and Reserve Health policies.

5. Documenting Discrepancies:

a. Employees should document any discrepancies they encounter, including the date, time, individuals involved, and the nature of the discrepancy.

b. Documentation can be used to inform the resolution process and for reference in the event of future questions or concerns.

6. Policy Resolution Process:

a. In cases where policy discrepancies cannot be readily resolved at the employee level, the matter should be escalated to higher levels of management within Reserve Health for further review and resolution.

7. Compliance with Legal and Regulatory Requirements:

a. Employees should always ensure that any actions taken in response to policy discrepancies comply with applicable laws, regulations, and healthcare standards.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and ethical guidelines related to addressing policy discrepancies between Reserve Health policies and facility policies. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All employees are expected to comply with this policy and actively engage in resolving policy discrepancies in a manner that prioritizes patient care, safety, and compliance with both Reserve Health policies and facility policies.



# **Company Policy: Bringing Personal Medication into the jail**

## Policy Statement:

Reserve Health acknowledges the importance of ensuring that individuals in correctional facilities have access to necessary medications while also maintaining security and safety within the facility. This policy outlines the procedures and guidelines for individuals to bring personal medications into the correctional facility under specific circumstances.

#### Purpose:

The purpose of this policy is to provide a clear and structured process for individuals in correctional facilitys to bring and use their personal medications when authorized and necessary for their health and well-being. This policy aims to strike a balance between ensuring access to essential medications and maintaining the security of the detention facility.

#### Scope:

This policy applies to individuals in correctional facilitys who require access to their personal medications and have received authorization to do so in compliance with this policy.

## Policy Guidelines:

## 1. Authorization for Personal Medication:

a. Individuals in correctional facilities may be authorized to bring and use their personal medications if it is determined to be medically necessary by a licensed healthcare provider.

b. Reserve Health preserves the right to request verification from the prescriber when necessary for the safety or security of the facility.

#### 2. Packaging and Labeling:

a. Personal medications must be brought into the correctional facility in their original, pharmacy-labeled containers or blister packaging.

b. Medication containers should clearly display the individual's name, medication name, dosage, and administration instructions.

#### 3. Storage

a. Personal medications will be securely stored along with the employee's personal items and must be locked at all times. Medications shall be stored in a secure location accessible only to authorized personnel.

b. At no time should an employee carry their personal medication with them on their person when clocked in and performing work.



c. At no time should personal employee medication be comingled with patient medication storage.

d. At no time should employees obtain patient medication for personal use.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to bringing personal medications into correctional facilitys. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



# **Company Policy: Reporting and Investigating Medical Errors and Near Misses**

#### Policy Statement:

Reserve Health is committed to providing safe and high-quality healthcare services to all patients. This policy outlines the procedures and expectations for healthcare employees to promptly report and thoroughly investigate medical errors and near misses to improve patient safety, quality of care, and prevent future occurrences.

#### Purpose:

The purpose of this policy is to establish a culture of transparency, accountability, and continuous improvement within Reserve Health by promoting the reporting and thorough investigation of medical errors and near misses. This policy aims to identify root causes, implement corrective actions, and prevent the recurrence of errors to enhance patient safety and the overall quality of care.

#### Scope:

This policy applies to all healthcare employees of Reserve Health, including physicians, nurses, nurse practitioners, physician assistants, and other healthcare providers.

#### Policy Guidelines:

#### 1. Definitions:

a. Medical Error: A medical error is defined as any preventable adverse event or act of commission or omission during healthcare service delivery that results in harm to the patient.

b. Near Miss: A near miss is an event or situation with the potential to cause harm to a patient but did not result in harm due to timely intervention, chance, or other factors.

2. Reporting of Medical Errors and Near Misses:

a. Healthcare employees have an ethical and professional obligation to promptly report any medical error or near miss they witness, discover, or are involved in.

b. Reports should be made through the designated reporting system, which ensures confidentiality and protects employees from retaliation.

#### 3. Investigation Process:

a. All reported medical errors and near misses will be subject to a thorough investigation led by the appropriate personnel.

b. The investigation team will include relevant healthcare professionals, quality assurance personnel, and other staff as needed.



c. Investigations should focus on identifying the root causes of the error or near miss, including system failures, human factors, and communication breakdowns.

4. Documentation and Reporting to Regulatory Authorities:

a. All medical errors and near misses, their investigations, and corrective actions taken will be documented in detail.

b. In cases where reporting to regulatory authorities is required by law or regulation, Reserve Health will fulfill these reporting obligations promptly and accurately.

## 5. Corrective Actions:

a. Corrective actions will be developed and implemented based on the findings of the investigation.

b. Corrective actions may include process improvements, additional training, policy revisions, or other measures aimed at preventing similar errors or near misses in the future.

# 6. Communication with Patients and Families:

a. When a medical error results in harm to a patient, Reserve Health is committed to transparently and compassionately communicating with the patient and their family, providing information about the error, its consequences, and the steps taken to prevent recurrence.

# 7. Feedback and Learning:

a. Reserve Health encourages a culture of learning from medical errors and near misses.

b. Lessons learned from investigations will be shared with healthcare employees to prevent similar occurrences.

## Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to reporting and investigating medical errors and near misses. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All healthcare employees are expected to comply with this policy and actively participate in the reporting and investigation of medical errors and near misses to improve patient safety and the quality of care provided by Reserve Health.



# **Company Policy: Clinical Skills Assessments**

## Policy Statement:

Reserve Health recognizes the importance of maintaining a high standard of clinical competence among its healthcare employees. This policy outlines the procedures and expectations for conducting clinical skills assessments to ensure that healthcare providers possess the necessary clinical skills and competencies to deliver safe and high-quality patient care.

## Purpose:

The purpose of this policy is to establish a structured process for conducting clinical skills assessments, including initial assessments, ongoing evaluations, and remediation plans as needed. This policy aims to support continuous professional development, uphold patient safety, and align with regulatory requirements.

## Scope:

This policy applies to all healthcare employees of Reserve Health, including physicians, nurses, nurse practitioners, physician assistants, and other healthcare providers.

## Policy Guidelines:

## 1. Initial Clinical Skills Assessment:

a. Upon hiring, healthcare employees will undergo an initial clinical skills assessment to determine their clinical competence in accordance with their job responsibilities.

b. The assessment may include clinical simulations, written exams, or other relevant evaluation methods.

c. The results of the initial assessment will be used to tailor onboarding and orientation programs as needed.

2. Ongoing Clinical Skills Evaluation:

a. Ongoing clinical skills evaluations will be conducted at regular intervals, as determined by job roles, regulatory requirements, and best practices.

b. Evaluations may encompass clinical simulations, direct observation, chart reviews, peer assessments, or other relevant methods.

c. Clinical skills evaluations will be documented and maintained in the employee's personnel file.

3. Remediation Plans:



a. In cases where clinical skills assessments reveal deficiencies or areas requiring improvement, a remediation plan will be developed in collaboration with the healthcare employee.

b. The remediation plan will outline specific actions, timelines, and resources necessary to address the identified deficiencies.

c. Progress will be regularly monitored, and additional support or training may be provided as needed.

4. Documentation and Reporting:

a. All clinical skills assessments, evaluations, and remediation plans will be documented in the employee's personnel file.

b. Supervisors and managers will have access to these records to inform decisions related to performance and professional development.

5. Feedback and Learning:

a. Reserve Health encourages a culture of continuous learning and improvement.

b. Healthcare employees are encouraged to use feedback from clinical skills assessments as an opportunity for growth and development.

6. Quality Assurance and Compliance:

a. Clinical skills assessments will align with applicable regulatory requirements, industry standards, and best practices.

b. Reserve Health is committed to maintaining the highest standards of patient care and safety.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to clinical skills assessments. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All healthcare employees are expected to comply with this policy and actively participate in clinical skills assessments and evaluations to maintain and enhance their clinical competence.



# **Company Policy: Obtaining Medical Records from Referrals**

**Policy Statement:** 

Reserve Health is committed to providing comprehensive healthcare services to its patients, which may include referrals to external healthcare providers or specialists. This policy outlines the procedures and expectations for making reasonable attempts to obtain medical records from referred providers to facilitate continuity of care and ensure the highest quality of healthcare delivery.

#### Purpose:

The purpose of this policy is to establish a standardized process for making reasonable and diligent efforts to obtain relevant medical records from referred providers. This policy aims to promote seamless communication, enhance patient safety, and support the continuity of care for all patients receiving services from Reserve Health.

#### Scope:

This policy applies to all healthcare employees of Reserve Health involved in the referral process, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

#### Policy Guidelines:

## 1. Referral Process:

a. When a referral to an external healthcare provider or specialist is deemed necessary for a patient's care, the referring healthcare provider will initiate the referral process.

b. The referring provider should inform the patient of the referral and its purpose, as well as the importance of obtaining relevant medical records for continuity of care.

## 2. Requesting Medical Records:

a. Reserve Health will make reasonable and diligent efforts to obtain the patient's relevant medical records from the referred provider.

b. Requests for medical records will be submitted promptly, following the referral, to the referred provider's authorized point of contact, which may include medical records departments, administrators, or other designated personnel.

## 3. Timely Follow-Up:

a. Reserve Health will establish a timeline for follow-up communications with the referred provider to request the medical records.



b. Follow-up efforts will be made at regular intervals, as necessary, until the records are obtained.

4. Electronic Health Information Exchange:

a. Whenever feasible, Reserve Health will explore and utilize electronic health information exchange (HIE) systems or secure electronic methods to facilitate the timely exchange of medical records.

b. Compliance with relevant data privacy and security standards and regulations will be ensured when using electronic means.

5. Record of Communication:

a. All communication, including written requests, email exchanges, and telephone conversations related to the request for medical records, will be documented and maintained in the patient's medical record.

b. The record of communication will include details such as dates, names of individuals involved, and the status of the request.

#### 6. Patient Consent:

a. In situations where patient consent is required for the release of medical records, Reserve Health will obtain the necessary consent and document it in the patient's medical record.

#### 7. Utilization of Records:

a. Once the medical records are obtained, they will be reviewed and integrated into the patient's healthcare record to support ongoing care and treatment.

b. Relevant information will be shared with the patient to ensure they are well-informed about their medical history and treatment options.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and patient care requirements related to obtaining medical records from referred providers. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

## Compliance:

All healthcare employees are expected to comply with this policy and actively engage in making reasonable attempts to obtain medical records from referred providers to support patient care and continuity of care.



# **Company Policy: Compliance with NCCHC, ACA, and PREA Standards**

#### Policy Statement:

Reserve Health is committed to delivering high-quality healthcare services to individuals in correctional facilities while adhering to the highest standards of care, safety, and compliance. This policy outlines the expectations and procedures for ensuring that all medical care provided in correctional facilitys under Reserve Health's supervision complies with the National Commission on Correctional Health Care (NCCHC), the American Correctional Association (ACA), and the Prison Rape Elimination Act (PREA) standards.

#### Purpose:

The purpose of this policy is to establish a comprehensive framework for compliance with the NCCHC, ACA, and PREA standards to ensure that healthcare services delivered within correctional facilities meet the requirements for patient care, safety, and security. This policy aims to safeguard the well-being of individuals in custody and maintain the highest standards of medical care.

#### Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who provide medical care within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

#### Policy Guidelines:

1. NCCHC, ACA, and PREA Compliance:

a. Reserve Health shall adhere to the guidelines and standards set forth by the NCCHC, ACA, and PREA for the provision of medical care in correctional facilitys.

b. Compliance with these standards is mandatory and non-negotiable.

#### 2. Training and Education:

a. Healthcare employees will receive training and education on the NCCHC, ACA, and PREA standards relevant to their roles and responsibilities.

b. Training will be ongoing to ensure that healthcare providers are up-to-date with any changes in the standards.

#### 3. Clinical Documentation:

a. All medical records and clinical documentation will be maintained in accordance with the NCCHC, ACA, and PREA standards.



b. Documentation will be accurate, complete, and timely to support the provision of care and comply with auditing and reporting requirements.

4. Patient Safety:

a. Reserve Health will actively promote patient safety within correctional facilities by following NCCHC, ACA, and PREA guidelines for safe and effective care.

b. Patient safety incidents and concerns will be promptly reported, investigated, and addressed.

5. PREA Compliance for Sexual Assault Prevention and Response:

a. Reserve Health will fully comply with the PREA standards to prevent, detect, and respond to sexual assault within correctional facilities.

b. Healthcare employees will receive training on identifying and responding to signs of sexual assault, reporting requirements, and victim support.

6. Audit and Monitoring:

a. Internal audits and external reviews will be conducted regularly to assess compliance with NCCHC, ACA, and PREA standards.

b. Corrective actions will be implemented in response to audit findings to achieve and maintain compliance.

7. Communication and Collaboration:

a. Reserve Health will collaborate with correctional facility staff, administrators, and regulatory authorities to ensure alignment with NCCHC, ACA, and PREA standards.

b. Open communication channels will be maintained to address any compliance issues or concerns.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to medical care in correctional facilities.

# Compliance:

Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



# **Company Policy: Direct Observation of Medication Consumption**

Policy Statement:

Reserve Health recognizes the importance of ensuring accurate and safe medication administration for individuals in correctional facilities. This policy outlines the procedures and expectations for implementing direct observation of medication consumption for patients in correctional facilitys under Reserve Health's care to enhance medication compliance, patient safety, and security.

## Purpose:

The purpose of this policy is to establish a standardized process for the direct observation of medication consumption, which is essential in a secure environment such as a correctional facility, to confirm that patients receive their prescribed medications as intended. This policy aims to improve medication adherence, prevent diversion, and ensure the safety and well-being of patients.

## Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who are responsible for administering medications within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

## Policy Guidelines:

1. Direct Observation of Medication Consumption:

a. Medications will be administered under direct observation to patients in correctional facilities whenever feasible and appropriate, as determined by the prescribing healthcare provider.

b. Direct observation will include visually confirming that the patient consumes each medication dose.

## 2. Exceptions to Direct Observation:

a. In cases where direct observation is not feasible, exceptions to direct observation will be documented in the patient's medical record.

#### 3. Training and Competency:

a. Healthcare employees responsible for direct observation of medication consumption will receive training on the correct procedures and best practices for this method of administration.

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b. Competency assessments will be conducted to ensure that healthcare employees are proficient in direct observation techniques.

4. Privacy and Dignity:

a. Direct observation of medication consumption will be conducted with the utmost respect for patient privacy and dignity.

b. Procedures will be in place to minimize discomfort or embarrassment for patients.

# 5. Documentation:

a. All instances of direct observation of medication consumption will be documented in the patient's medical record.

b. Documentation will include the date, time, medication administered, dose, and the name of the healthcare employee who conducted the observation.

# 6. Patient Education:

a. Patients will be educated about the direct observation process and its importance in ensuring proper medication compliance and patient safety.

b. Patients will have the opportunity to ask questions or raise concerns related to the direct observation process.

# 7. Audit and Monitoring:

a. Internal audits and reviews will be conducted periodically to assess compliance with the direct observation policy.

b. Corrective actions will be implemented in response to audit findings to ensure the consistent and appropriate use of direct observation.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to medication administration in correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All healthcare employees affiliated with Reserve Health are expected to comply fully with this policy and actively participate in the direct observation of medication consumption to enhance medication compliance and patient safety within correctional facilities.



# **Company Policy: Conducting Cavity Searches**

#### Policy Statement:

Reserve Health unequivocally prohibits medical staff from conducting cavity searches on inmates. This policy is established to safeguard the ethical, professional, and legal boundaries of medical practice within correctional facilities, uphold the dignity and rights of inmate-patients, and ensure compliance with relevant laws and regulations.

#### Purpose:

The purpose of this policy is to establish a clear and unequivocal stance that medical staff affiliated with Reserve Health shall not conduct cavity searches on inmate-patients under any circumstances. This policy aims to protect the rights, dignity, and privacy of inmate-patients while adhering to the principles of ethical and legal medical practice.

#### Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who provide medical care within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

# Policy Guidelines:

1. Prohibition of Cavity Searches:

a. Medical staff affiliated with Reserve Health shall not conduct cavity searches on inmatepatients.

b. Cavity searches are defined as any physical examination or procedure involving the insertion of any object or instrument into a body cavity, including but not limited to the anal or vaginal cavity.

2. Ethical and Professional Boundaries:

a. Medical staff are bound by ethical principles and professional standards that prohibit invasive procedures that are not medically necessary.

b. The practice of medicine within correctional facilities shall adhere to the same ethical standards as in any other healthcare setting.

3. Legal and Regulatory Compliance:

a. This policy aligns with federal and state laws and regulations that prohibit invasive searches conducted by medical personnel in the absence of a medical necessity.

b. Reserve Health will comply fully with all relevant legal and regulatory requirements.



4. Patient Rights and Dignity:

a. inmate-patients have the right to be treated with dignity, respect, and in accordance with their inherent rights.

b. Medical staff shall not engage in any action that violates the personal rights or dignity of inmate-patients.

5. Reporting and Documentation:

a. Any concerns or incidents related to cavity searches performed by medical staff shall be reported immediately to the appropriate authorities, including facility administrators and regulatory agencies.

b. Detailed records of such reports and actions taken will be maintained in accordance with legal and regulatory requirements.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to medical care in correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All healthcare employees affiliated with Reserve Health are expected to comply fully with this policy and adhere to the prohibition of conducting cavity searches on inmate-patients in all circumstances.



# **Company Policy: Prescribing Non-Essential Special Orders**

# Policy Statement:

Reserve Health is committed to providing healthcare services to patients within correctional facilities efficiently and in compliance with established protocols. This policy outlines the procedures and expectations for prescribing non-essential special orders, such as extra blankets, alternate shoes, or special diets, to ensure responsible use of healthcare resources and maintain patient well-being.

# Purpose:

The purpose of this policy is to establish a framework for healthcare providers to prescribe nonessential special orders only when medically necessary or when they contribute to the wellbeing of the inmate-patient. This policy aims to ensure that non-essential special orders are utilized judiciously and in accordance with the principles of responsible healthcare delivery within correctional facilities.

#### Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who provide medical care within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

# Policy Guidelines:

1. Prescribing Non-Essential Special Orders:

a. Non-essential special orders, including but not limited to extra blankets, alternate shoes, or special diets, should be prescribed judiciously and in accordance with medical necessity or the well-being of the patient.

b. Non-essential special orders that are not medically necessary should be avoided.

# 2. Medical Necessity and Clinical Justification:

a. Healthcare providers are responsible for determining the medical necessity of non-essential special orders based on the patient's clinical condition and needs.

b. Prescribing non-essential special orders should be supported by clinical justification and documented in the patient's medical record.

# 3. Special Diets:

a. Special diets, such as therapeutic diets or dietary modifications, may be prescribed when clinically indicated to manage medical conditions or accommodate dietary restrictions.



b. Healthcare providers will collaborate with dietary services to ensure the appropriate provision of special diets.

# 4. Alternative Solutions:

a. Before prescribing non-essential special orders, healthcare providers should explore alternative solutions or accommodations that may meet the inmate-patient's needs without the need for a special order.

b. Alternative solutions may include directing the inmate to commissary resources, addressing temperature concerns, or accommodating dietary preferences such as religious diets within facility guidelines.

# 5. Documentation:

a. All prescribed non-essential special orders, along with the clinical justification, will be documented in the inmate-patient's medical record.

b. Documentation should include the start and end date, the specific order, and the healthcare provider's signature.

6. Review and Discontinuation:

a. Non-essential special orders should be subject to periodic review to assess their ongoing necessity.

b. When the clinical need for a non-essential special order no longer exists, it should be promptly discontinued and documented.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to prescribing non-essential special orders within correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

Compliance:

All healthcare employees affiliated with Reserve Health are expected to comply fully with this policy and prescribe non-essential special orders judiciously and in accordance with medical necessity or the well-being of inmate-patients within correctional facilities.



# **Company Policy: Identification and Interventions for Vulnerable Populations**

# Policy Statement:

Reserve Health is committed to identifying and providing appropriate interventions for vulnerable populations within correctional facilities to ensure equitable access to healthcare services. This policy outlines the procedures and expectations for the identification and provision of targeted interventions for vulnerable inmate-patients, including those with special healthcare needs or at-risk populations.

#### Purpose:

The purpose of this policy is to establish a structured approach to recognize and address the unique healthcare needs and vulnerabilities of inmate-patients within correctional facilities. This policy aims to ensure that vulnerable populations receive appropriate care and interventions to mitigate health disparities and promote their overall well-being.

#### Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who provide medical care within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

# Policy Guidelines:

1. Identification of Vulnerable Populations:

a. Reserve Health will implement processes for the identification of vulnerable populations within correctional facilities.

b. Vulnerable populations may include, but are not limited to, individuals with chronic medical conditions, mental health concerns, substance use disorders, pregnant inmates, individuals with disabilities, and others at heightened risk.

# 2. Assessment and Care Planning:

a. inmate-patients identified as vulnerable will undergo comprehensive assessments to determine their specific healthcare needs.

b. Care plans will be developed to address the unique healthcare requirements of vulnerable populations.

c. Interdisciplinary collaboration may be necessary to develop and implement effective care plans.

3. Targeted Interventions:



a. Reserve Health will provide targeted interventions and healthcare services tailored to the identified needs of vulnerable populations.

b. Interventions may include specialized medical care, mental health services, medication management, addiction treatment, or other appropriate interventions.

# 4. Equity and Access:

a. Vulnerable populations will be ensured equitable access to healthcare services, regardless of their individual challenges or needs.

b. Reasonable accommodations and modifications will be made to address accessibility barriers, including physical, communication, and sensory challenges.

# 5. Education and Training:

a. Healthcare employees will receive education and training on recognizing and providing care to vulnerable populations.

b. Training will emphasize cultural competence, sensitivity, and the unique healthcare needs of these populations.

# 6. Data Collection and Monitoring:

a. Data on the healthcare outcomes and experiences of vulnerable populations will be collected and analyzed to inform continuous improvement efforts.

b. Monitoring and evaluation will ensure the effectiveness of interventions and the equitable provision of healthcare services.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to identifying and intervening for vulnerable populations within correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All healthcare employees affiliated with Reserve Health are expected to comply fully with this policy and actively participate in the identification and provision of interventions for vulnerable populations within correctional facilities.



# **Company Policy: Management of inmate-Patients with Orthodontic Braces**

#### Policy Statement:

Reserve Health is committed to providing comprehensive healthcare services to inmate-patients, including those with orthodontic braces, while ensuring the safety and well-being of both the inmate-patient and correctional facility staff. This policy outlines the procedures and expectations for the management of inmate-patients who have orthodontic braces on their teeth within the correctional facility.

#### Purpose:

The purpose of this policy is to establish guidelines for the appropriate assessment, care, and management of inmate-patients with orthodontic braces to ensure that their oral health needs are met and that the braces do not pose a risk to the inmate-patient, staff, or security within the correctional facility.

#### Scope:

This policy applies to all healthcare employees and medical providers affiliated with Reserve Health who provide medical care within correctional facilities, including physicians, nurses, nurse practitioners, physician assistants, and administrative staff.

#### Policy Guidelines:

#### 1. Assessment and Documentation:

a. inmate-patients with orthodontic braces will undergo an initial assessment of their oral health status and the condition of their braces.

b. Detailed documentation of the type of braces, condition, and any oral health concerns will be maintained in the inmate-patient's medical record.

#### 2. Orthodontic Care Plan:

a. inmate-patients with orthodontic braces will receive a personalized care plan that addresses their orthodontic needs.

b. The care plan will include any required orthodontic appointments, maintenance instructions, and dietary restrictions, if applicable.

#### 3. Orthodontic Appointments:

a. Reserve Health will facilitate access to orthodontic appointments as required for the inmate-patient's ongoing orthodontic treatment.

b. Transportation to off-site orthodontic providers will be arranged as necessary.



# 4. Oral Hygiene Education:

a. inmate-patients with orthodontic braces will receive education on proper oral hygiene practices, including instructions for cleaning braces and maintaining oral health.

b. Dental hygiene supplies may be provided to support oral care.

5. Dietary Considerations:

a. Dietary restrictions or modifications may be recommended for inmate-patients with orthodontic braces to prevent damage or discomfort.

b. inmate-patients will be informed of any dietary restrictions and provided with appropriate meal alternatives.

# 6. Emergency Care:

a. Protocols will be in place to address emergency situations involving inmate-patients with orthodontic braces, including injury or discomfort.

b. inmate-patients will be informed of how to seek emergency dental care.

7. Security Considerations:

a. Security staff will be informed of the presence of orthodontic braces on inmate-patients to ensure awareness and appropriate response in case of emergencies.

Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to the management of inmate-patients with orthodontic braces within correctional facilities. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.

# Compliance:

All healthcare employees affiliated with Reserve Health are expected to comply fully with this policy and actively participate in the assessment and management of inmate-patients with orthodontic braces to ensure their oral health needs are met while ensuring the safety and security of the correctional facility.



# **Company Policy: Student Learners in Correctional Healthcare**

Policy Statement:

Reserve Health is committed to providing valuable learning opportunities for student learners in the field of healthcare within correctional facilities while maintaining the highest standards of patient care, safety, and security. This policy outlines the procedures and expectations for facilitating educational experiences for student learners within the correctional healthcare environment.

#### Purpose:

The purpose of this policy is to establish guidelines and procedures to ensure that student learners receive appropriate educational experiences and supervision while adhering to the policies, rules, and regulations of the correctional facility. This policy aims to support the professional development of student learners and maintain the safety and well-being of all individuals within the correctional setting.

#### Scope:

This policy applies to all student learners, healthcare employees, and medical providers affiliated with Reserve Health who are involved in facilitating and supervising student learning experiences within correctional facilities.

#### Policy Guidelines:

1. Definition of Student Learners:

a. Student learners may include, but are not limited to, medical students, nursing students, physician assistant students, and other healthcare-related learners who are completing clinical rotations or internships.

b. Student learners are expected to adhere to the policies and guidelines set forth by both the educational institution and Reserve Health.

# 2. Approval and Oversight:

a. All student learners must be approved for placement within correctional facilities through a formal agreement between Reserve Health, the educational institution, and the correctional facility.

b. Reserve Health will designate a qualified preceptor or supervisor to oversee and guide the educational experience of student learners.

3. Orientation and Training:

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a. Student learners will receive orientation and training specific to the correctional healthcare environment, including security protocols, confidentiality, and professional conduct.

b. Training will ensure that student learners understand the unique challenges and responsibilities associated with providing healthcare in a correctional setting.

4. Supervision and Scope of Practice:

a. Student learners will work under the direct supervision of a qualified healthcare provider (preceptor or supervisor) while performing clinical duties within the correctional facility.

b. The scope of practice for student learners will be clearly defined, and they will only perform tasks and procedures for which they have received appropriate training and supervision.

# 5. Patient Consent and Confidentiality:

a. inmates' informed consent for the presence and participation of student learners in their care will be obtained whenever feasible and appropriate.

b. Student learners will adhere to strict patient confidentiality and privacy standards, including compliance with the Health Insurance Portability and Accountability Act (HIPAA).

# 6. Safety and Security:

a. Student learners will comply with all security measures and protocols established by the correctional facility, including searches and access control.

b. The safety and security of student learners and inmates will be a top priority, and any concerns or incidents will be reported promptly.

# 7. Evaluation and Feedback:

a. Student learners will receive regular feedback and evaluations from their preceptors or supervisors to assess their clinical competence and professional development.

b. Educational institutions will provide a mechanism for obtaining feedback from student learners regarding their learning experiences.

# 8. Ethical Conduct:

a. Student learners will conduct themselves with the utmost professionalism, adhering to ethical standards and codes of conduct in both healthcare and the correctional setting.

b. Any breaches of ethics or professionalism will be addressed promptly, and appropriate corrective actions will be taken.

# Monitoring and Review:

This policy shall be periodically reviewed and updated to ensure its alignment with evolving healthcare standards, laws, regulations, industry best practices, and safety requirements related to student learning within correctional healthcare. Any breaches of this policy will be addressed promptly, and corrective actions will be taken to prevent future violations.



Compliance:

All student learners, healthcare employees, and medical providers affiliated with Reserve Health are expected to comply fully with this policy and actively participate in the education and supervision of student learners within the correctional healthcare environment.



# Policy: Requirement for Providers to Maintain an Unrestricted DEA License

Policy Statement:

Reserve Health is committed to ensuring that all of its healthcare providers who hold a Drug Enforcement Administration (DEA) license maintain an unrestricted and valid license in accordance with federal regulations and state laws. This policy outlines the requirement for all Reserve Health providers to possess and maintain an unrestricted DEA license as a condition of employment or contract.

Purpose:

The purpose of this policy is to:

1. Ensure compliance with federal and state regulations governing the prescribing and administration of controlled substances.

2. Safeguard patient safety and the integrity of the healthcare services provided by Reserve Health.

3. Maintain the highest standards of professionalism and ethical conduct among healthcare providers.

Policy Details:

1. Eligibility for Employment or Contract:

a. All healthcare providers seeking employment or contract with Reserve Health must possess a valid and unrestricted DEA license.

b. The DEA license must be obtained in the state where the healthcare provider practices or where they are authorized to prescribe and administer controlled substances.

2. Initial Verification of DEA License:

a. Reserve Health's Human Resources Department or Credentialing Committee will verify the DEA license status of all potential providers during the hiring or contracting process.

b. Verification will include checking the DEA license against the DEA database and confirming its validity and unrestricted status.

3. Ongoing Monitoring:

a. Reserve Health will establish a system for ongoing monitoring of the DEA licenses of all healthcare providers.

b. Providers will be required to provide proof of their current DEA license during the credentialing and recredentialing processes.



c. Healthcare providers must promptly report any changes in their DEA license status to the Medical Director and Human Resources.

4. Consequences of License Restrictions or Revocation:

a. Healthcare providers who have their DEA licenses restricted, suspended, or revoked for any reason must notify Reserve Health immediately.

b. Reserve Health will assess the impact of the license restriction or revocation on the provider's ability to perform their duties and responsibilities.

c. Depending on the circumstances, Reserve Health may take appropriate action, which may include suspension, termination, or modification of the provider's duties.

# 5. Record Keeping:

a. Reserve Health will maintain accurate records of healthcare providers' DEA licenses, verification, and any actions taken related to license restrictions or revocations.

Review and Revision:

This policy will be reviewed periodically to ensure it aligns with current federal and state regulations, as well as industry standards.



# **Company Policy: Prohibition of Gender Exams**

# 1. Purpose

This policy outlines the guidelines and procedures for medical evaluations and exams conducted on inmates by Reserve Health Staff. It specifically addresses the prohibition of performing visual inspections or exams for the sole purpose of identifying an inmate's biological gender.

#### 2. Scope

This policy applies to all medical staff and healthcare providers responsible for conducting medical evaluations and exams on inmates within correctional facilities.

#### 3. Policy Statement

Reserve Health is committed to providing inmates with respectful, humane, and genderaffirming healthcare services that align with applicable laws, regulations, and ethical standards. In accordance with this commitment, visual inspections or exams for the sole purpose of identifying an inmate's biological gender are strictly prohibited.

#### 4. Gender-Affirming Care

a. Medical evaluations and exams conducted on inmates will focus on addressing specific healthcare needs, regardless of an individual's gender identity or expression.

b. Healthcare providers will treat all inmates with dignity, respect, and without discrimination based on gender identity, gender expression, or transgender status.

c. When assessing an inmate's healthcare needs, medical staff will use information provided by the inmate regarding their self-identified gender, pronouns, and preferred name. The use of legal documentation or physical characteristics to determine gender identity will not be utilized.

d. inmates will have the right to decline specific medical evaluations or exams that are not medically necessary or consistent with their healthcare needs.

#### 5. Training

Medical staff and healthcare providers within Reserve Health will receive appropriate training on the principles of gender-affirming care and the prohibition of visual inspections or exams for the sole purpose of identifying biological gender.

#### 6. Reporting and Accountability

a. Any violation of this policy by medical staff or healthcare providers should be promptly reported to the Health Services Administrator for investigation.

b. Violations of this policy may result in disciplinary action in accordance with Reserve Health policies and procedures.



# 7. Review and Updates

This policy will be reviewed annually or as necessary to ensure compliance with relevant laws and evolving best practices in the field of correctional healthcare.

# 8. Compliance

All personnel within Reserve Health are expected to adhere to this policy. Failure to comply with this policy may result in disciplinary action.



# **Company Policy: Correctional Facility Medication Formulary Policy**

#### **Policy Statement**

[Correctional Facility Name] is committed to providing all inmates with high-quality, evidencebased pharmaceutical care. This medication formulary policy is designed to ensure the availability of safe, effective, and cost-efficient medications, thereby promoting the optimal health outcomes of the inmate population. The policy outlines the procedures for selecting medications for inclusion in the formulary and the mechanisms for procurement, administration, and review of these medications.

#### Purpose

The purpose of this policy is to:

- Ensure access to necessary medications for the inmate population.
- Establish guidelines for selecting and using medications based on safety, efficacy, and costeffectiveness.
- Promote the rational use of medications through evidence-based practices.
- Define the roles and responsibilities of healthcare professionals involved in medication management.
- Facilitate the continuous review and updating of the formulary to reflect changes in medication therapy standards and inmate healthcare needs.

#### Scope

This policy applies to all healthcare and administrative staff involved in the medication management process within [Correctional Facility Name], including pharmacists, physicians, nurses, and procurement staff.

# Formulary Management

1. Formulary Committee: A Formulary Committee shall be established, comprising healthcare professionals from various disciplines, including pharmacy, medicine, nursing, and administration. This committee oversees the formulary system, including the selection, procurement, utilization, and evaluation of medications.

2. Selection of Medications: Medications shall be selected based on a thorough review of evidence for their safety, efficacy, and cost-effectiveness. Consideration will be given to the specific healthcare needs of the inmate population.

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3. Non-Formulary Requests: A process shall be established to consider non-formulary medication requests when a prescriber believes a formulary alternative is clinically inappropriate for a specific inmate.

4. Medication Procurement: Medication procurement shall follow federal and state regulations, ensuring that medications are obtained from reputable sources. Competitive bidding and bulk purchasing agreements may be utilized to manage costs.

5. Medication Administration: Medications shall be administered by qualified healthcare professionals in accordance with established protocols and inmate-specific orders. The rights of medication administration (right patient, right medication, right dose, right time, right route, and right documentation) must be adhered to at all times.

6. Medication Storage and Security: Medications shall be stored securely and in accordance with manufacturer recommendations to ensure their integrity. Access to medications shall be restricted to authorized personnel.

7. Education and Training: Healthcare staff involved in medication management shall receive ongoing education and training on formulary policies, medication administration, and any changes to the formulary.

8. Quality Assurance and Improvement: The Formulary Committee shall regularly review medication utilization patterns, inmate health outcomes, and new developments in medication therapy to ensure the formulary remains current and effective.

9. inmate Education: inmates shall receive appropriate medication education, including intended use, expected benefits, potential side effects, and adherence to prescribed therapies.

# Implementation and Review

The [Designated Health Authority] is responsible for implementing this policy, monitoring compliance, and facilitating regular reviews by the Formulary Committee to ensure the medication formulary meets the evolving needs of the inmate population and reflects the latest clinical practice standards.

# Compliance

Compliance with this policy is mandatory for all staff involved in medication management. Violations of the policy may result in disciplinary action and will be addressed promptly to maintain the integrity of the medication management system.



# **Company Policy: Correctional Facility Oral Care Policy**

# **Policy Statement**

This policy establishes guidelines for providing dental care services within Correctional Facility's managed by Reserve Health, aiming to ensure that all inmates have access to dental care that meets or exceeds the standards recommended by the National Commission on Correctional Health Care (NCCHC). Our commitment is to provide comprehensive dental services that address emergency, preventive, and routine care needs, ensuring oral health promotion and the management of dental diseases.

# Objectives

- To ensure timely access to dental care for all inmates.
- To provide preventive, routine, and emergency dental services in compliance with community standards.
- To integrate dental care services with the facility's overall health care program.
- To promote oral health education among the inmate population.

# Scope

This policy applies to all dental care services provided within [Correctional Facility Name], including in-house dental staff and external dental care providers.

# **Dental Care Services**

1. Access to Care: inmates will have access to dental services based on a clinically approved prioritization system, ensuring that emergency, urgent, and routine care needs are met timely and efficiently.

2. Screening and Evaluation: All inmates will undergo a dental screening as part of the facility's intake process, with a comprehensive dental evaluation scheduled after that to identify immediate care needs and plan for ongoing dental care.

3. Preventive Services: Dental care programs will include preventive services such as oral hygiene education, dental cleanings, fluoride treatments, and the provision of dental hygiene materials.

4. Treatment Services: Dental treatment services will include but are not limited to extractions, restorations, endodontic therapy, periodontal therapy, and managing oral infections and pain. Services will be provided in a manner consistent with community standards of care.



5. Emergency Dental Care: The facility will ensure 24/7 access to emergency dental care for managing acute oral pain, infections, trauma, and other conditions requiring immediate attention.

6. Informed Consent: inmates will receive information regarding the risks, benefits, and alternatives to proposed dental treatments, and informed consent will be obtained before the commencement of any treatment.

7. Documentation: All dental encounters, including screenings, evaluations, treatments, and inmate education, will be documented in the inmate's health record in accordance with legal and professional standards.

8. Staff Qualifications: Dental services will be provided by qualified dental professionals who are licensed and credentialed in accordance with state and federal regulations.

9. Continuous Quality Improvement: The dental care program will participate in the facility's continuous quality improvement process, reviewing and analyzing dental health outcomes to identify opportunities for improvement.

10. Collaboration with Medical Care: The dental care team will collaborate closely with the medical care team to ensure comprehensive care for inmates, particularly for those with chronic conditions that may impact or be impacted by oral health.

# **RH Proprietary and Confidential Information Removed**



# **Critical Clinical Event Reporting Form**

Facility Name:
Date and Time of Event:
Location of Event:
Patient Information:
- Patient Name:
- Medical Record Number (if applicable):
- Date of Birth:
- Gender:
- Unit/Department:
- Attending Healthcare Provider:

Description of the Event:

Describe the critical clinical event, including what happened, how it happened, and any contributing factors or circumstances. Be concise but provide sufficient detail for a clear understanding of the event.

Immediate Actions Taken:

Outline the actions clinical staff took to address the critical event, ensure patient safety, and mitigate harm. Include any interventions, treatments, or notifications made.



Witnesses (if any):

List the names and roles of any witnesses to the critical event.

Attachments (if applicable):

Attach any relevant documents, images, or records that provide additional context or information about the event.

Follow-Up Actions and Recommendations:

Detail any actions that have been taken or are planned as follow-up to the critical event, including investigations, root cause analysis, corrective actions, and staff training. Also, provide recommendations for preventing similar events in the future.



Signature and Date:

- Reporting Staff Member: \_\_\_\_\_

- Date: \_\_\_\_\_

Review and Approval:

- Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ - Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

# **RH Proprietary and Confidential Information Removed**



# Standard Operating Procedure: Standard Sliding Scale for Regular Insulin

Before Meals (Preprandial):

- Blood Glucose Level 150-199 mg/dL: 2 units of regular insulin.
- Blood Glucose Level 200-249 mg/dL: 4 units of regular insulin.
- Blood Glucose Level 250-299 mg/dL: 6 units of regular insulin.
- Blood Glucose Level 300-349 mg/dL: 8 units of regular insulin.
- Blood Glucose Level 350-399 mg/dL: 10 units of regular insulin.
- Blood Glucose Level 400-449 mg/dL: 12 units of regular insulin.
- Blood Glucose Level >450 mg/dL: Call Provider.

- Regular insulin is typically given 30-45 minutes before meals to allow for proper blood glucose control.



# **Standard Operating Procedure:** Continuous Quality Improvement (CQI) Chart Review Form

Date of Review: \_\_\_\_\_

Reviewer Name:	
----------------	--

Date of	Service:	

# **Section 1: Patient Information**

- 1. Age: \_\_\_\_\_
- 2. Gender: \_\_\_\_\_
- 3. Admission Date: \_\_\_\_\_
- 4. Primary Diagnosis: \_\_\_\_\_
- 5. Secondary Diagnoses (if applicable):

# **Section 2: Clinical Documentation**

- 1. History and Physical Examination:
  - Completeness: 
    Complete 
    Incomplete
  - Comments: \_\_\_\_\_

2. Progress Notes:

- Regularity:  $\Box$  Regular  $\Box$  Irregular
- Clarity:  $\Box$  Clear  $\Box$  Unclear
- Comments: \_\_\_\_\_

3. Medication Orders:

- Appropriateness: 

  Appropriate 
  Inappropriate
- Documentation of Allergies:  $\Box$  Documented  $\Box$  Not Documented
- Comments: \_\_\_\_\_
- 4. Laboratory & Diagnostic Tests:
  - Timeliness: 

    Timely

    Delayed
  - Relevance:  $\Box$  Relevant  $\Box$  Not Relevant



- Comments: \_\_\_\_\_

# **Section 3: Treatment and Care**

- 1. Adherence to Treatment Guidelines:
  - Adherence Level:  $\Box$  High  $\Box$  Moderate  $\Box$  Low
  - Comments: \_\_\_\_\_
- 2. Patient Outcomes:
  - Improvement in Condition:  $\Box$  Improved  $\Box$  Unchanged  $\Box$  Worsened
  - Comments: \_\_\_\_\_
- 3. Safety and Risk Management:
  - Adverse Events: 
    None 
    Minor 
    Major
  - Comments: \_\_\_\_\_

# **Section 4: Compliance and Ethics**

- 1. Confidentiality and Privacy Adherence:
  - Level of Adherence: □ High □ Moderate □ Low
  - Comments: \_\_\_\_\_
- 2. Compliance with Legal and Ethical Standards:
  - Compliance Level:  $\Box$  Compliant  $\Box$  Non-Compliant
  - Comments: \_\_\_\_\_

# Section 5: Reviewer's Summary and Recommendations

- Summary of Findings:
- Recommendations for Improvement:
  - \_\_\_\_\_\_

-\_\_\_\_\_

Reviewer's Signature:	
-----------------------	--

Date: \_\_\_\_\_



# Appendix E: Disaster Plan Development

This framework will be used to develop a site-specific disaster plan for Gaston County jail and Annex.

#### I. Introduction

*Objective:* To ensure the provision of uninterrupted healthcare services during and after a disaster, prioritizing life-saving interventions, chronic disease management, and psychological support.

*Scope:* This plan covers medical department operations within the central facility and the detached annex.

#### **II. Command and Control**

*Medical Command Structure:* Integrate medical leadership within the jail's incident command system, designating a Medical Incident Commander responsible for healthcare decisions during a disaster.

*Communication:* Detail specific communication protocols for the medical department, including emergency contact methods for off-site medical facilities and public health agencies.

#### **III. Risk Assessment and Preparedness**

*Vulnerability Analysis:* Conduct a thorough analysis of potential risks to healthcare services, including supply chain disruptions, power outages, and increased demand for medical care.

*Resource Inventory:* Maintain an updated inventory of medical supplies, pharmaceuticals, and equipment necessary for emergency response. Ensure redundancy in critical items.

#### **IV. Response Procedures**

*Triage and Emergency Care:* Implement triage protocols to prioritize care based on the severity of conditions, ensuring the most critical receive immediate attention. Adapt these protocols for different disaster scenarios.

*Chronic Disease Management:* Develop contingency plans for the continued management of chronic conditions, including secure storage and administration of medication, even in the event of an evacuation.



*Infection Control:* Establish enhanced infection control measures to prevent the spread of communicable diseases, particularly in the case of pandemics or biological hazards.

*Mental Health Support:* Outline procedures for providing immediate psychological support and crisis intervention, recognizing the increased stress and anxiety caused by disasters.

# V. Recovery and Continuity

*Healthcare Service Restoration:* Plan for the rapid restoration of full healthcare services, including strategies for dealing with backlogs of routine care postponed during the disaster.

*Post-Disaster Health Surveillance:* Initiate surveillance for post-disaster health conditions, including injuries, infectious diseases, and mental health issues, to guide recovery efforts and prioritize resources.

# VI. Training and Exercises

*Specialized Training:* Provide disaster-specific training for medical staff, including emergency medical care, mental health interventions, and operation of emergency equipment.

*Simulation Exercises:* Regularly conduct simulation exercises focused on the medical department's response to various disaster scenarios, evaluating both clinical and logistical capabilities.

# VII. Plan Maintenance and Review

*Continuous Improvement:* Incorporate lessons learned from drills, actual events, and new best practices into the disaster plan on an ongoing basis.

*Engagement with External Partners:* Regularly update agreements and protocols with external healthcare facilities, emergency medical services, and public health departments to ensure coordinated disaster response.

# **VIII. Annexes**

*Emergency Protocols:* Provide detailed emergency protocols for mass casualty incidents, infectious disease outbreaks, and supply chain disruptions.

*Staffing Plan:* Include a disaster staffing plan that outlines roles, responsibilities, and shifts during extended emergency operations, ensuring that medical care remains available 24/7.