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D54 Safeguarding Prisoner Patients and Forensic Staff Orientation at Hospitals

Anthony N. Potter, MS*, Forsyth Medical Center, 3333 Silas Creek Parkway, Winston-Salem, NC 27103

After attending this presentation, attendees will be familiar with the medical and legal issues surrounding the treatment of prisoner patients and the training of forensic staff (defined by The Joint Commission as law enforcement and corrections officers, and contract guards). Specific attention will be given to the prevention of escapes, and compliance with The Joint Commission standards and Centers for Medicare and Medicaid Services (CMS) Conditions of Participation.

This presentation will impact the forensic science community by focusing attention on the risks of treating prisoner patients in a general hospital environment, the need for adequate training of both forensic staff and hospital clinical and security personnel, and the consequences of failure to do so.

In recent years, the number of attempted and successful prisoner escapes from general hospitals has increased significantly. This is due to the closure of many correctional medical facilities due to budgetary reductions, and the increasing number of prisoners receiving external medical care. The presence of prisoners in a general hospital environment presents significant risks to the hospital's patients, visitors, physicians, and employees. These risks can be minimized, and the opportunity for escape limited, by the effective training of both forensic staff and hospital clinical and security personnel.

Hospitals, other than correctional medical facilities, are not configured or staffed to provide medical care for persons in custody. While the responsibility for ensuring their custody resides with the criminal justice agency having jurisdiction, a prisoner's presence and treatment present many standards-compliance issues that must be addressed. Both The Joint Commission and the Centers for Medicare and Medicaid Services (CMS) require that hospitals provide the same standards of care for the treatment of prisoners that are required for all other patients. The use of law enforcement or correctional restraints (handcuffs, shackles, etc.), patient privacy issues (including the presence of law enforcement or corrections officers during treatment), the configuration of patients' rooms used by prisoners, and compliance with hospital policies (visitation, telephone usage, etc.) are all potential conflicts that must be addressed. Failure to do so may result in sanctions when a prisoner's hospital stay is evaluated using tracer methodology by The Joint Commission, CMS, or state regulatory agency.

Because of the wide diversity of local, state, and federal agencies bringing prisoners to hospitals for treatment, each hospital must develop a detailed policy for the training of forensic staff (defined by The Joint Commission as external law enforcement and corrections officers, or contract security personnel) that includes subjects mandated by The Joint Commission. This policy should be reviewed and approved in advance by the heads of all local, state, and federal agencies involved. In addition, the hospital should prepare a handout for forensic staff detailing this policy, and obtain each officer's signature as documentary evidence that they have read and will comply with its provisions. Such evidence is frequently required during a Joint Commission survey, or CMS or state audit. One of the most effective ways to train law enforcement and corrections officers in a hospital's prisoner patient policy is to have it included in the curriculum of the local training academy, or incorporated into local agencies' in-service training programs.

While responsibility for the prisoner rests with the agency having custody, hospital clinical staff and especially security officers must be thoroughly familiar with prisoner patient procedures so that they do not inadvertently compromise the prisoner's security. In addition to briefing law enforcement or corrections officers on hospital policies and procedures, security officers should monitor the prisoner and forensic staff while in the hospital, and immediately report any policy violations or other problems so they can be immediately addressed.

This presentation will include distribution of a template for a hospital policy on prisoner patients and the orientation of forensic staff, as well as a manual for distribution to law enforcement and corrections officers and a shorter handout for use when an officer brings a person in custody to the emergency department for treatment.

Prisoner Patient, Forensic Staff, Hospital