POLICY

EXTRAORDINARY MEDICAL PLACEMENT

REVIEW/REVISION HISTORY:

Effective: 12/10/01
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Revised: 7/11/08
Revised: 12/13/10

SUMMARY OF REVISION/REVIEW:

Numerous changes. Read carefully!

APPROVED:

Signature on file

ELDON VAIL, Secretary
Department of Corrections

11/4/10

Date Signed
POLICY

EXTRAORDINARY MEDICAL PLACEMENT

REFERENCES:

DOC 100.100 is hereby incorporated into this policy; RCW 9.94A.728; DOC 350.200 Offender Transition and Release; DOC 350.500 End of Sentence Review/Sexually Violent Predator Civil Commitment; DOC 460.130 Violations and Hearings

POLICY:

I. The Department may allow for the Extraordinary Medical Placement (EMP) of offenders in an alternative care setting in lieu of total or partial confinement to minimize health care costs and treatment to the State. The Department has established criteria and procedures to refer, screen, place, and monitor offenders who are eligible for extraordinary medical placement.

II. The Secretary has the discretion per RCW 9.94A.728, upon recommendation of the Headquarters Community Screening Committee (HCSC), to grant an EMP for offenders, including Indeterminate Sentence Review Board (ISRB) cases and offenders serving mandatory sentences.

III. The Secretary has the authority to revoke an EMP at any time.

DIRECTIVE:

I. Exclusions for Consideration

A. EMP will not be considered:

1. For offenders subject to the death penalty or serving life without the possibility of parole.

2. When there is an absence of resources in the community to provide necessary care for the offender, including funding, a receiving facility/site, or family support, if appropriate.

3. If the offender poses a high risk to the community.

II. Referral Initiation

A. The Assistant Secretary for Health Services and the Offender Programs and Classification Administrator will each designate staff responsible for coordinating extraordinary medical placement.

B. Referral for EMP can be made to the Health Services or the Classification EMP Coordinator by anyone, including:
1. An offender,
2. A family member,
3. An attorney,
4. Facility correctional staff, or
5. Health care staff.

C. EMP may be considered when all of the following conditions exist:

   1. The offender has a medical condition that is serious enough to require costly care or treatment,
   2. Granting the EMP will result in a cost savings to the State,
   3. The offender poses a low risk to the community because s/he is physically incapacitated due to age or a medical condition,
   4. The offender is expected to be physically incapacitated at the time of placement, and
   5. Based on the relevant facts provided to the HCSC and medical/mental health staff, the offender is considered low risk to cause harm in the community.

III. Screening

   A. The Health Services EMP Coordinator will ensure the following health care criteria are met or will be met by the time EMP is referred to the Secretary:

      1. The offender has been determined to be seriously ill and has an illness, disease, or other medical condition that is debilitating and/or incapacitating.
      2. The offender poses low risk to the community because s/he is incapacitated due to the medical condition, either physically or mentally, rendering him/her unable or unlikely to:

         a. Engage in activities of daily living without assistance,
         b. Perform gainful employment, and
         c. Participate in criminal behavior.

      3. The offender requires costly care or treatment.
      4. There is adequate community support to meet the offender's needs, including a funding source.
B. If it is determined the case does not meet the medical criteria, the Health Services EMP Coordinator will draft a letter and inform the offender as well as the individual referring the offender for EMP.

C. If it is determined the case meets the medical criteria, the Health Services EMP Coordinator will:

1. Obtain medical and mental health information.
2. Complete DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information and include a copy in the packet sent to the Classification EMP Coordinator.
3. Contact community support and potential sponsor, and discuss with them their responsibilities. When possible, the release location should be within the county of origin.
4. Send the EMP referral to the:
   a. Assigned Classification Counselor,
   b. Law Enforcement Notification Program Manager/designee,
   c. Victim Services Program, and
   d. Classification EMP Coordinator.

D. When the EMP referral is received, the Classification EMP Coordinator will request:

1. The Assignment Office in the catchment area to assign a Community Corrections Officer (CCO).
2. The assigned Correctional Counselor forward an Offender Release Plan based on the EMP referral to the Assignment Officer in the area of the placement within 24 hours, excluding weekends and holidays. The Offender Release Plan will include instructions to the assigned CCO to contact the Health Services and Classification EMP Coordinators for a briefing on the offender’s condition and possible concerns about the placement.
3. A mental health evaluation prepared by a psychologist or psychiatrist, obtained through the primary care practitioner, if the offender is designated as seriously mentally ill or an Offender Re-entry Community Safety Program participant.
4. A completed Custody Facility Plan based on a Facility Risk Management Team meeting. The Custody Facility Plan will address completion of the
Department's criminal conviction record, risk and needs assessments, and an overview of the offender’s current adjustment, infraction, behavior, community resources, county of origin, and any other factor relevant to consideration for extraordinary medical placement. If a proposed placement sponsor/address is available, the Counselor/CCO will provide this to the Health Services and Classification EMP Coordinators via the Custody Facility Plan.

E. When the CCO has been assigned, the Health Services EMP Coordinator will:

1. Work with the assigned Counselor to complete the community plan.
2. Evaluate proposed living arrangements/housing for appropriateness with the assigned CCO.
3. Assist in identifying funding sources for health care and living needs.
4. Contact the proposed sponsor to make an appointment for an on-site preliminary evaluation of the placement with the CCO.
   a. The assigned CCO must complete the placement investigation within 48 hours of the appointment/meeting, excluding weekends and holidays, unless otherwise specified in the placement referral.
5. Review the sponsor responsibilities with the proposed sponsor and ensure the sponsor reads and signs DOC 14-025 Responsibilities of Extraordinary Medical Placement Sponsors.
6. Confirm the Chief Medical Officer has approved the referral to the HCSC.

IV. Consideration

A. Once initial screening is completed and approved by both the Health Services and Classification EMP Coordinators, the Health Services EMP Coordinator will submit the case for consideration by the HCSC. The EMP packet will include:

1. Formal HCSC Decision cover sheet,
2. EMP referral covering offender medical assessment, plan and placement elements, and recommended conditions for placement,
3. Memo from the Chief Medical Officer indicating the offender meets the medical criteria for EMP consideration,
4. Criminal history,
5. Pre-sentence Investigation Report for instant offense, if available, and
6. Any response/input from Victim Services and/or Law Enforcement Notification.
B. The HCSC will review the request and input from Health Services, Classification, Victim Services, and Law Enforcement Notification and make a decision/recommendation. The request will not be forwarded for further consideration unless the HCSC recommends approval.

1. If the HCSC denies EMP, the facility Health Care Manager and the offender’s Counselor/facility CCO will be provided with the reasons for denial in writing and given direction about whether the offender is eligible to reapply.
   a. Facility staff will notify the offender of the decision, which will be followed by a written notice to the offender and referring individual from the Headquarters Classification Unit.

2. If the HCSC recommends conditional approval, the offender may not be placed in the community until all conditions for the EMP have been met.
   a. The facility Health Care Manager will provide medical updates to the Health Services EMP Coordinator as the offender’s condition changes.
   b. When the conditions have been met and the offender’s health status has deteriorated to the point where s/he meets the criteria for EMP, the Health Services EMP Coordinator will resubmit the case to the HCSC for review.

3. If the HCSC recommends approval, the EMP packet with an approval letter will be forwarded to the Offender Programs and Classification Administrator for review and comment.

V. Decision

A. The Offender Programs and Classification Administrator will forward the EMP packet with the HCSC’s recommendation for approval to the Assistant Secretary for Prisons, who may deny the EMP or forward it to the Secretary for approval. Only the Secretary can approve EMP.

1. If denied, the facility Health Care Manager and the offender’s Counselor/facility CCO will be provided with reasons for denial in writing and given direction about whether the offender is eligible to reapply.

2. If approved, the offender will be placed according to the approved EMP plan.
B. Facility staff will notify the offender of the decision, which will be followed by a written notice to the offender and referring individual from the Headquarters Classification Unit.

C. Signed copies of the Secretary’s approval letter and any placement stipulations will be forwarded to the:

1. Facility,
2. End of Sentence Review Committee,
3. Correctional Records Supervisor where the offender is assigned,
4. Assistant Secretary for Prisons or designee,
5. Supervising CCO,
6. Headquarters Classification for scanning,
7. Health Services and Classification EMP Coordinators, and
8. EMP sponsor.

VI. Offender Placement

A. The approval letter authorizing the offender’s placement, signed by the Secretary or designee, is required prior to the placement at the EMP residence.

B. Community safety/monitoring stipulations will include:

1. Development of an Offender Supervision Plan with recommendations for minimum number, frequency, and types of contacts by the supervising CCO.

2. Electronic monitoring at the Department’s expense, required by the Secretary per RCW 9.94A.728, unless electronic monitoring equipment interferes with the function of the offender’s medical equipment or results in loss of funding for the medical care.

3. Other conditions deemed appropriate by the CCO.

C. Offenders placed in the community who are required to register with local law enforcement will have photos and registration documentation completed prior to the placement.

D. Designated facility staff will notify the Health Services and Classification EMP Coordinators and will update the electronic file.

E. The central file and offender health record will be placed with the Regional Records Supervisor.
F. The CCO can request a medical evaluation from the Health Services EMP Coordinator at any time.

G. The Health Services EMP Coordinator will continue to monitor the medical condition of the offender.

VII. Compliance with Conditions

A. If the offender is alleged to have violated his/her conditions, a hearing will be conducted and sanctions may be imposed per DOC 460.130 Violations and Hearings.

B. If the CCO recommends revocation, s/he will make that recommendation to the Secretary.

C. The Secretary may revoke the EMP at any time and the offender will be returned to total confinement. Reasons may include, but will not be limited to:
   1. The offender violates the terms of the extraordinary medical placement, or
   2. The offender regains health or his/her health condition improves to the point that s/he may be a risk to the community.

VIII. Release/Death

A. Upon the offender’s Earned Release Date, the supervising CCO will verify the release plan and will advise the facility Correctional Records Supervisor and Regional Records Supervisor to update the electronic and legal file. The CCO will also send an email message to the Health Services and Classification EMP Coordinators to update them regarding the new status.

B. If the offender dies while on EMP status, the supervising CCO will advise the facility Correctional Records Supervisor, Regional Records Supervisor, Victim Services, and the Health Services and Classification EMP Coordinators within 48 hours, excluding weekends and holidays. The Regional Records Supervisor will ensure all legal notifications, electronic file updates, and other processing requirements are completed.

DEFINITIONS:

Words/terms appearing in this policy may be defined in the glossary section of the policy manual.

ATTACHMENTS:

None
DOC FORMS:

DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information
DOC 14-025 Responsibilities of Extraordinary Medical Placement Sponsors