STATE OF WA	ASHINGTON T OF CORRECTIONS	APPLICABILITY PRISON/REENTRY/FIELD FACILITY/SPANISH MANUAL		
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POLIC	Y	TITLE EXTRAORDINARY MEDICAL PLACEMENT		PLACEMENT

### **REVIEW/REVISION HISTORY:**

Effective:	12/10/01
Revised:	2/3/05
Revised:	7/11/08
Revised:	12/13/10
Revised:	4/14/21
Revised:	3/27/25

## SUMMARY OF REVISION/REVIEW:

Major changes. Read carefully!

## **APPROVED:**

Signature on file

**TIM LANG**, Secretary Department of Corrections

3/3/25

Date Signed

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### **REFERENCES:**

DOC 100.100 is hereby incorporated into this policy; <u>RCW 9.94A.728</u>; DOC 280.500 Records Management for Individuals; DOC 320.400 Risk and Needs Assessment Process; DOC 350.200 Transition and Release; DOC 350.255 Registration Notification; DOC 380.450 Electronic Monitoring; DOC 390.300 Victim Services; DOC 420.080 Escape from Partial Confinement (RESTRICTED); DOC 420.110 Escorted Leaves and Furloughs

### POLICY:

I. The Department has established criteria and procedures for the Extraordinary Medical Placement (EMP) of incarcerated individuals in an alternative care setting.

#### DIRECTIVE:

- I. General Requirements
  - A. EMP may be considered when all of the following conditions exist:
    - 1. The individual has been assessed by 2 physicians, and is:
      - a. Affected by a permanent/degenerative medical condition, or
      - b. In ill health and expected to die within 6 months.
    - 2. Because of the medical condition, the individual poses a low risk to the community, does not pose a threat to public safety, and likely will not be a threat in the future.
    - 3. Granting the EMP is expected to result in a cost savings to the State.
  - B. EMP will not be considered:
    - 1. For individuals serving life without the possibility of parole, requesting outof-state placement, or who have been identified as persistent offenders per RCW 9.94A.030.
    - 2. When there is an absence of resources in the community to provide necessary care for the individual (e.g., funding, approved placement options, community/family sponsor).
  - C. The EMP Coordinator will:
    - 1. Collaborate with the appropriate tribal liaison, if applicable.

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- 2. Track and document referrals, decisions, and placements in the individual's electronic file.
- 3. Facilitate EMP referrals with Health Services and the Headquarters Classification Unit.
- II. Referral
  - A. Anyone, including a community member, may submit an EMP referral to the EMP Coordinator using <u>WA-DOC Extraordinary Medical Placement Referral</u>.
    - 1. The EMP Coordinator/designee will initiate the referral on behalf of a requesting incarcerated individual.
    - 2. An individual who has mental health concerns may be referred at any time to receive a mental health evaluation by a psychologist/psychiatrist based on the current diagnosis.
  - B. Health services employees/contract staff will compile a referral packet, including:
    - 1. DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information,
    - 2. DOC 13-593 Medical Screening for Extraordinary Medical Placement, and
    - 3. Additional documentation related to the individual's current medical condition and prognosis (e.g., recent history, physical limitations, mental health needs).
  - C. The FMD/designee and the Chief Medical Officer (CMO)/designee will review the referral packet to determine if the individual meets the medical criteria. If the CMO/designee determines the medical criteria:
    - 1. Has not been met, the EMP Coordinator will notify the incarcerated individual and, if a release of information is available, referring person of the decision in writing.
      - a. Subsequent requests may be reviewed if there is a change in health.
    - 2. Has been met, the EMP Coordinator will forward the EMP referral packet to the Headquarters Community Screening Committee (HCSC) for review.
  - D. The HCSC will complete DOC 14-148 Extraordinary Medical Placement Classification Review. Input may be obtained from the following:

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- 1. Clinical Nurse Specialist(s)
- 2. Victim Services Program
- 3. Chief Medical Officer/designee
- 4. End of Sentence Review Committee
- 5. Law Enforcement Notification Program
- 6. Graduated Reentry Administrator
- 7. Indeterminate Sentence Review Board (Board), if applicable
- 8. Others as determined by the HCSC Chair
- E. If the HCSC approves plan development, the:
  - 1. Individual must meet any conditions before final review.
  - 2. HCSC Chair/designee will request an urgent assessment be conducted per DOC 320.400 Risk and Needs Assessment Process.
  - 3. EMP Coordinator/designee will develop a preliminary plan for transfer to EMP, in coordination with the case manager, Nurse Desk, Psychiatric Social Worker or health services reentry employee/contract staff, and appropriate stakeholders, and:
    - a. Determine the individual's decision-making ability.
      - 1) If needed, the EMP Coordinator/designee will assist with establishing a guardian or Durable Power of Attorney.
    - b. Facilitate resources, funding, and referrals to meet the individual's clinical and daily living needs.
    - c. Request investigation of the transfer plan and placement location.
    - d. Ensure the sponsor signs DOC 14-025 Responsibilities of Extraordinary Medical Placement Sponsors.
  - 4. FMD/designee will:
    - a. Provide medical updates to the EMP Coordinator if the individual's medical condition changes. Individuals may be reassessed if needed.
    - b. Conduct a final review using DOC 13-593 Medical Screening for Extraordinary Medical Placement to verify the individual continues to meet the medical criteria.

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- F. When the individual has an approved transfer plan and any conditions have been met, the EMP Coordinator/designee will resubmit the referral packet to the HCSC for final review if the individual is still eligible.
- G. If the HCSC recommends final approval:
  - 1. The HCSC Chair will forward the referral to the following for review:
    - a. Deputy Secretary
    - b. Appropriate Assistant Secretary for Prisons
    - c. Assistant Secretary for Reentry
    - d. Assistant Secretary for Community Corrections
    - e. Assistant Secretary for Health Services
    - f. Board Chair/designee, if applicable
  - 2. Recommendations from HCSC and stakeholders will be forwarded to the Secretary for final approval/denial.
- H. If approved, signed copies of the Secretary's final approval letter and any placement conditions will be forwarded to appropriate employees.
  - 1. The Headquarters Classification Unit will update the transfer order in the individual's electronic file.
- I. The EMP Coordinator/designee will notify the individual and, if a release of information is available, referring person of the final decision. The notification will be in writing if the EMP is denied.
- III. Transfer to Electronic Monitoring
  - A. Approved individuals will be placed on electronic monitoring per DOC 380.450 Electronic Monitoring at the Department's expense, unless electronic monitoring equipment interferes with the function of medical equipment or results in loss of funding for medical care.
    - 1. Notifications will be conducted before transferring to partial confinement per DOC 390.300 Victim Services.
  - B. The case manager will:
    - 1. Develop a community placement plan with recommendations for the number, frequency, and types of contacts based on the individual's mobility and risk to the community.

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- a. An in-person contact will be conducted at least once per month.
- b. If the individual is not on electronic monitoring, contacts will be conducted weekly as determined by the Graduated Reentry Administrator and HCSC.
- 2. Impose conditions using DOC 02-361 Partial Confinement Conditions and any applicable Board conditions.
- C. Upon transfer to electronic monitoring:
  - 1. The central file and health record will be transferred per DOC 280.500 Records Management for Individuals.
  - 2. Law enforcement will be notified per DOC 350.255 Registration Notification. The case manager will ensure registration has been completed once the individual has been placed at the EMP residence.
- D. The Nurse Desk/Clinical Nurse Specialist and case manager will monitor the individual's medical condition and behavior in the community.
  - 1. The EMP Coordinator/designee will be notified if there are any concerns, escapes per DOC 420.080 Escape from Partial Confinement (RESTRICTED), or an approved furlough per DOC 420.110 Escorted Leaves and Furloughs.
- IV. Compliance and Administrative Termination/Revocation
  - A. If the individual is alleged to no longer be compliant with EMP conditions, a multidisciplinary team may administratively terminate EMP when the:
    - 1. Placement location no longer meets the needs of the individual through no fault of their own, or
    - 2. Individual's behavior requires an alternative placement (e.g., community risk, individual requests removal from EMP).
  - B. The multidisciplinary team will include:
    - 1. Nurse Desk
    - 2. EMP Coordinator/designee
    - 3. Graduated Reentry Administrator
    - 4. Classification and Case Management Administrator/designee

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- C. If the individual's medical condition improves, the EMP Coordinator/designee will request a clinical review be conducted by the CMO/designee. The CMO/ designee will notify the Classification and Case Management Administrator/ designee if the individual no longer meets the medical criteria.
- D. The Classification and Case Management Administrator/designee will submit a revocation letter to the Secretary for approval/denial. If revoked:
  - 1. Signed copies of the revocation letter and any placement conditions will be forwarded to the appropriate employees.
  - 2. The case manager and Nurse Desk will arrange transportation to the receiving facility.
- V. Release/Death
  - A. Release plans will be submitted for individuals per DOC 350.200 Transition and Release.
    - 1. Upon the individual's earned release date, the case manager will notify the EMP Coordinator and Classification and Case Management Administrator that the individual will be released from confinement.
  - B. In the event of an individual's death while on EMP status, the:
    - 1. Case manager will advise the following within 2 business days:
      - a. Secretary
      - b. Correctional Records Supervisor where the individual is housed
      - c. Regional Correctional Records Supervisor/Manager
      - d. Victim Services Program
      - e. Headquarters Classification Unit
      - f. EMP Coordinator
      - g. Nurse Desk
      - h. Board Chair/designee, if applicable
    - 2. Regional Correctional 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.

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## **ATTACHMENTS:**

None

### **DOC FORMS:**

DOC 02-361 Partial Confinement Conditions

DOC 13-407 Extraordinary Medical Placement Authorization for Exchange of Health Information

DOC 13-593 Medical Screening for Extraordinary Medical Placement DOC 14-025 Responsibilities of Extraordinary Medical Placement Sponsors

DOC 14-148 Extraordinary Medical Placement Classification Review