



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
PRISON
FACILITY/SPANISH MANUAL

REVISION DATE
2/6/25

PAGE NUMBER
1 of 5

NUMBER
DOC 610.110

POLICY

TITLE
TRANSFER OF INDIVIDUALS FOR HEALTH REASONS

REVIEW/REVISION HISTORY:

Effective: 12/15/89	Revised: 5/14/09
Revised: 10/4/99	Revised: 3/26/12
Revised: 7/24/03	Revised: 12/1/12
Revised: 8/16/06	Revised: 12/22/14
Revised: 12/22/06 AB 06-01	Revised: 6/3/22
Revised: 11/26/07	Revised: 2/6/25

SUMMARY OF REVISION/REVIEW:

II.A., II.C.3. - Added clarifying language
 Removed II.A.4. that the receiving facility may appeal a transfer decision through the Superintendent/designee
 Added II.A.6. that designated employees will attend the transfer conference and assist with the coordination of care between the sending and receiving facilities
 Added II.B.1. that health services employees will be provided with a list and coordinate care for individuals with a PULHES "P" code of 3 and higher and approved for transfer
 Added II.C.4.b. that the sending practitioner will complete a discharge/transfer summary when a patient is transferring from one facility inpatient unit to another

APPROVED:

Signature on file

MARYANN CURL, MD, MS
 Chief Medical Officer

12/17/24

 Date Signed

Signature on file

DAVID FLYNN, MPA
 Assistant Secretary for Health Services

12/20/24


 Date Signed

Signature on file

CHERYL STRANGE, Secretary
 Department of Corrections

1/9/25

 Date Signed

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REFERENCES:


DOC 100.100 is hereby incorporated into this policy; DOC 300.380 Classification and Custody Facility Plan Review; DOC 420.110 Escorted Leaves and Furloughs; DOC 640.020 Health Records Management; Mental Health Transfer Procedure

POLICY:


- I. The Department has established guidelines governing the intersystem and intrasystem transfer of individuals for health reasons.
- II. Urgent/emergent transfers for mental health reasons, transfers of individuals to and from Mental Health Residential Treatment Units, and transfers of individuals with PULHES “S” codes of 3 or higher will be made per DOC 300.380 Classification and Custody Facility Plan Review and the Mental Health Transfer Procedure located under Health Services on the Department’s internal website.
- III. Custodial procedures will be followed per DOC 420.110 Escorted Leaves and Furloughs.

DIRECTIVE:

- I. Determination of Need for Transfer
 - A. The facility Health Services Manager/designee and/or Facility Medical Director (FMD)/designee will determine if an individual’s condition requires an emergent or non-emergent transfer to another facility.
 - B. Transfer decisions will be based on the following:
 1. Required medical, mental health, or dental treatment is beyond the scope of the current facility’s resources.
 2. Availability of required services or treatment prescribed or identified by the responsible practitioner.
 3. Availability of required living accommodations.
 4. Medical indications that transfer would worsen the condition.
- II. Transfer Procedure
 - A. Non-Emergent Transfers for Medical Reasons

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1. To initiate a non-emergent transfer, the FMD/designee will bring the information to a weekly medical inter-facility transfer conference call.
 - a. A Headquarters classification employee will participate in the conference call to help determine the appropriateness of the transfer based on custody level and facility resources.
 2. The Chief Medical Officer/designee will consult with the FMDs/designees to determine the most medically appropriate placement, method of transfer, and any special requirements for the individual.
 3. The sending and receiving FMDs/designees will notify the respective facility Health Service Managers, who will notify their respective Superintendents/designees and other appropriate employees/contract staff of the transfer.
 4. If the proposed receiving facility wishes to appeal a transfer decision, the Superintendent/designee must present the appeal to the Assistant Secretary for Prisons/designee and Chief Medical Officer/designee for joint resolution.
 5. If an individual is serving a de facto life sentence or life without parole, transfer must be approved by the appropriate Prison Deputy Assistant Secretary/designee.
 6. The Health Services Quality Assurance Manager and Administration Program Manager will attend the transfer conference and assist with tracking transfer requests and coordination of care between sending and receiving facilities.
- B. Non-Emergent Transfers for Classification and Custody Reasons
1. Health services employees at the sending facility will be provided a list of individuals with a PULHES “P” code of 3 or higher who are approved for transfer and will facilitate coordination of care with Health Services at the receiving facility.
- C. Emergent Transfers
1. Individuals in need of immediate health services beyond the resources available in the facility, as determined by the primary healthcare provider, will be transferred under applicable security requirements to a facility where the services are available.

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2. Emergent transfers will be approved by creating a transfer order in the electronic file at the request of authorized facility employees/contract staff.
 3. The requesting clinician or Health Services Manager/designee will communicate only relevant details of the health-related emergency and the proposed time of transfer to the Transport Officers.
 4. Authorized health services employees/contract staff from the sending facility will communicate necessary clinical information to appropriate health services employees/contract staff at the receiving facility.
 - a. When possible, if the transfer requires infirmary care and is likely to be long term (i.e., longer than 30 days), the individual will not be transferred to Washington Corrections Center (WCC).
 - b. When a patient is transferring from one facility inpatient unit to another, the sending medical practitioner will complete DOC 13-070 Infirmary/Extended Observation Unit Discharge/Transfer Summary prior to the transfer.
- D. The health record will be transferred with the individual per DOC 640.020 Health Records Management.

III. Return of Individual to Sending Facility

- A. Unless otherwise specified, an individual who is transferred to another facility for health services that are expected to last less than 6 months will be returned to the sending facility when care/treatment is completed.
- B. If the health services are expected to last more than 6 months, further classification action must be initiated at the facility where the individual is being treated per DOC 300.380 Classification and Custody Facility Plan Review.
- C. A transfer order will be initiated in the electronic file to return the individual to the sending facility when a health clearance is given.
- D. The health record will be transferred with the individual per DOC 640.020 Health Records Management.

IV. Custody Status

- A. If a transfer is for health reasons only and likely to last less than 6 months, the individual's custody designation will remain the same as when the individual transferred from a Level 2 facility to one with a higher custody level.



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DEFINITIONS:

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

ATTACHMENTS:

None

DOC FORMS:

DOC 13-070 Infirmary/Extended Observation Unit Discharge/Transfer Summary