

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 03/18/2015	NUMBER: G-51.3
	Replaces: 5/12/2014	
	Formulated: 8/87 Reviewed: 01/16	Page 1 of 2

ADMISSION HEALTH APPRAISALS FOR OFFENDERS WITH PHYSICAL DISABILITIES

PURPOSE: To describe the procedures for admission health appraisals and referrals of offenders with physical disabilities to the Assistive Disability Services (ADS), Prosthetic and/or Orthotic Clinic.

POLICY:

I. Referral of offenders to ADS.

A. Offenders received at TDCJ intake facilities exhibiting any of the following conditions will be referred to ADS. Medical staff at intake facilities will notify the Office of Health Services Liaison (HSL) for assistance with the transfer of the offender to a facility that can meet his/her needs. The following conditions constitute reason for referral.

1. Upper or lower limb amputation(s) **with or without** prosthesis
2. Spinal cord injury, neuromuscular or musculoskeletal condition, or any condition requiring an orthotic or wheelchair to perform independent gait or activities of daily living.
3. Closed or open head injury resulting in brain damage with any level of functional loss.
4. Significant or profound hearing loss that requires the use of American Sign Language for communicating
5. Legally or totally blind or progressive degenerative eye disorder, e.g., diabetic retinopathy, glaucoma, retinitis pigmentosa, etc.
6. Debilitating speech impairment
7. Stroke with significant neurological impairment
8. Peripheral plexus or nerve injury/disease resulting in significant neurological impairment
9. Severe venous stasis with chronic edema and/or ulceration
10. Severe burns or scarring producing significant physical impairment

Offenders unable to independently perform activities of daily living cannot be housed in general population and should be referred to the appropriate university's utilization review/management department for inpatient placement.

B. If during the health appraisal, an offender exhibits one of the above identified conditions, the examining physician or mid-level practitioner will designate the offender as an offender with a physical disability and provide minimum diagnostic information specifying the disabling condition and the offender's current or anticipated functional impairments. This information is to be noted on the Problems list in the electronic medical record (EMR). The proper alert codes are to be updated to reflect patient's medical condition on the MEDI screen through the Health Summary for Classification (HSM-18).

C. Offenders who are Vision, Hearing, or Speech Impaired

Upon completion of the admission health appraisal, the facility health administrator (TTUHSC)/practice manager (UTMB) or designee will e-mail the ADS Program Manager and HSL with the offender's name, TDCJ number, current unit of assignment and diagnosis. HSL

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will work with ADS program staff and TDCJ Classification and Records Office to get the offender assigned to a facility that can meet his/her needs. The ADS Program Manager may request the provider complete Attachment A of this policy if additional information is required. Interpreter services will be provided by ADS for offenders who communicate using American Sign Language.

D. Offenders with Physical Disabilities

Upon completion of the admission health appraisal, the facility health administrator (TTUHSC)/practice manager (UTMB) or designee will immediately e-mail the ADS Clinical Program Director at Jester III and HSL with the offender’s name, TDCJ number, current unit of assignment and diagnosis. HSL will work with ADS program staff and TDCJ Classification and Records Office (CRO) to get the offender assigned to a facility that can meet his/her needs. The ADS Clinical Program Director may request the provider complete Attachment B of this policy if additional information is required.

E. Offenders with a spinal cord injury at T6 or above will be housed in a temperature-controlled (66 – 86 degrees) environment throughout the diagnostic process and at facility of assignment. Offenders will be transported in an air-conditioned vehicle when necessitated by elevated environmental temperatures.

F. HSL and ADS will work together and advise CRO of offenders who are disabled and unable to complete the standard diagnostic process at an intake facility and should be transferred to a sheltered program to complete processing.

G. All offenders identified as having a disability will be appropriately coded as outlined in the ADS Manual and this information will be forwarded to the ADS Program Manager.

Reference: Assistive Disability Program Manual
 ACA Standard 4-4375 Protheses and Orthodontic Devices (Non-Mandatory)
 ACA Standard 4-4404 Transfer (Non-Mandatory)