PURPOSE: To outline the scope of infirmary care for inmates of the Texas Department of Criminal Justice.

POLICY:

I. Infirmary care within the Texas Department of Criminal Justice is provided at designated sites. Each facility maintains written or electronic documentation of the scope of medical and nursing care provided at the infirmary.

II. Infirmary beds are utilized for inmates who need inpatient care for an illness, injury or diagnosis that requires observation and/or medical management but does not require admission to an acute care hospital.

III. Admission to and discharge from said facilities are by physician or mid-level practitioner order.

IV. Each infirmary meets the following criteria:

   A. a physician or mid-level practitioner is available on a 24 hour basis. Mid-level practitioner practices and procedures are consistent with approved clinical protocols

   B. nursing services are under the direction of a full-time registered nurse who is available on a 24 hour basis

   C. qualified health care personnel are on duty 24 hours per day

   D. specific nursing care procedures are dictated by a manual of nursing care that is current

   E. inmates are within sight or sound of a qualified health care provider at all times

V. A separate inpatient record is maintained on all individuals admitted to the infirmaries.

VI. Admission to and discharge from infirmary health care is coordinated through the Utilization Review/Utilization Management Department.
VII. The required frequency of evaluations/assessments and documentation will be included in the facility process manual/addendum.

VIII. For inmates receiving infirmary care who are considered at risk for suicide or self-harm, Crisis Management should be ordered but transfer to Crisis Management should be held by provider order until the inmate is medically stable. Refer to CMHC policy G-53.1 “Suicide Prevention Plan” for details regarding the implementation of Constant and Direct Observation (CDO) pending transfer to Crisis Management, which is initiated by security in response to the provider order for Crisis Management.

Reference: ACA Performance Standard & Expected Practice 4-4352