



RHODE ISLAND DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE

	POLICY NUMBER: 18.50-5 DOC	EFFECTIVE DATE: 07/22/19	PAGE 1 OF 2
	SUPERSEDES: 18.50-4 DOC	DIRECTOR: Please use BLUE ink. 	
SECTION: HEALTH CARE		SUBJECT: INFIRMARY CARE	
AUTHORITY: Rhode Island General Laws (RIGL) § 42-56-10 (22), Powers of the director			
REFERENCES: The most recent version of RIDOC Policies 18.17 DOC, Credentialing Physicians and Physician Extenders ; 18.34, Non-Emergency Care ; NCCHC standard J-G-03 and P-F-02 (essential), Infirmary Care			
INMATE / PUBLIC ACCESS?		<input checked="" type="checkbox"/> YES	
AVAILABLE IN SPANISH?		<input checked="" type="checkbox"/> NO	

I. **PURPOSE:**

To establish infirmaries for all inmates to care for those inmates who are not in need of hospitalization or placement in a licensed nursing care facility, but who have an illness or diagnosis that requires observation and/or management by health care providers at a level of care higher than that provided in housing units.

II. **POLICY:**

- A. All inmates have access to separate male and female infirmary facilities for medical, dental, mental health, nursing, and related health services to address health care problems whose care may be managed but require a higher level of care than possible in housing units.
- B. Infirmary services may include isolation, observation, first aid, nursing care, pre-operative preparation status and limited post-operative care.
- C. Infirmary care is not used as an alternative to hospital-level acute care services.

- D. Admission to and discharge from the infirmiry shall occur only on the orders of a clinician permitted to issue such orders by credentials or scope of practice.

III. **DEFINITIONS:**

1. Infirmiry - location of specific beds (or housing) close to the nurses' station where observation/care is provided around the clock.
2. Inmate Boarders - inmates housed in the infirmiry but not considered infirmiry patients. An inmate may be a "boarder" if placed in the infirmiry area by security staff. Boarders in the infirmiry area are there for housing purposes, not for health care (i.e., as deemed necessary by security).

IV. **PROCEDURES:**

General Standards for Infirmiry Care

1. Nursing Supervisors are responsible for staffing the infirmiry with nursing staff according to the number of inmates, severity of their illnesses, and the range of medical, nursing, mental health, and related health services required to care for each inmate.
2. A member of the nursing staff must always be available to assist infirmiry inmates.
3. Admissions may be initiated by all licensed and credentialed medical staff.
4. The infirmiry provider is responsible for ensuring each inmate has an individualized care plan.
5. The infirmiry clinician and nurse are responsible for the discharge process, ensuring a follow-up plan is in place as needed, and documentation.