201—50.15(356,356A) Medical services. The jail administrator shall establish a written policy and procedure to ensure that prisoners have the opportunity to receive necessary medical attention for the prisoners' objectively serious medical and dental needs that are known to the jail staff. A serious medical need is one that has been diagnosed by a physician or physician associate as requiring treatment or is one that is so obvious that even a layperson would easily recognize the necessity for a physician's or physician associate's attention. The plan shall include a procedure for emergency care. Responsibility for the costs of medical services and products remains that of the prisoner as allowed by Iowa Code section 356.7. However, no prisoner will be denied necessary medical services, dental service, medicine or prostheses because of a lack of ability to pay. Medical and dental prostheses shall be provided only for the serious medical needs of the prisoner as determined by a licensed health care professional. Cosmetic or elective procedures need not be provided.

50.15(1) *Medical resources.* Each jail shall have a designated medical practitioner, which may include a hospital or clinic staffed by licensed physicians, licensed osteopathic physicians or physician associates, designated for the medical supervision, care and treatment of prisoners as deemed necessary and appropriate. Medical practitioners shall be available on a 24-hour basis.

50.15(2) *Trained staff.*

a. All staff who administer medication shall be trained in accordance with the Iowa state sheriffs' and deputies' association medication training program or other recognized medication administration course.

b. At least one staff member on duty at the jail shall be currently trained in first aid (or the equivalent) and CPR.

50.15(3) *Prisoner involvement.* No prisoner shall be involved in any phase of delivery of medical services.

50.15(4) *First-aid kits.* A first-aid kit approved by qualified medical personnel shall be available to staff (no policy required).

50.15(5) *Chemical control agents.* A prisoner affected by a chemical control agent shall be offered a medical examination and appropriate treatment as soon as reasonable.

50.15(6) *Screening upon admission.*

a. Any person who is obviously injured, ill or unconscious shall be examined by qualified medical personnel before being admitted to a jail.

b. Prisoners suspected of having a contagious or communicable disease shall be separated from other prisoners until examined by qualified medical personnel.

c. As a part of the admission procedure, a medical history intake form shall be completed for each person admitted to the jail. The intake procedure shall include screening for potential self-injury or potential suicide. Jail staff with actual knowledge that there is a substantial risk that a prisoner intends to commit suicide shall take reasonable measures to abate that risk. The jail shall have a written suicide prevention plan. Essential elements of the plan shall include annual training to recognize the potential for suicide, communication between staff, appropriate housing and intervention procedures.

d. During times when there is no means of immediate access to the district court, a person arrested on a charge constituting a simple misdemeanor and believed by the arresting officer/agency to be mentally ill, and because of that illness is likely to physically injure the person's self or others, shall be admitted to the jail only after the arresting officer/agency has demonstrated a reasonable effort to comply with the emergency hospitalization procedure, as provided in Iowa Code section 229.22. The jail shall have a written plan to provide prisoners access to services for the detection, diagnosis and treatment of mental illness. The plan shall include a mental health screening process at admission.

e. Prisoners shall be provided with information on how they can obtain necessary medical attention, and the agency's policy and procedure shall also reflect this.

50.15(7) *Medication procedures.*

a. Written policies and procedures pertaining to providing medication shall be established.

b. All prescription medicine shall be securely stored and inventory control practiced. Inventory control shall include documentation of all medication coming into the jail and the amount of medication returned or destroyed when a prisoner is released.

c. A written procedure for recording the taking or administering of all medications shall be established.

Prescription medication, as ordered by a medical practitioner or licensed dentist, shall be provided in accordance with the directions of the prescribing medical practitioner or dentist. Prisoners with medication from a personal medical practitioner or dentist may be evaluated by a medical practitioner or dentist selected by the jail administrator to determine if the present medication is appropriate.

50.15(8) *Medical records.* A separate medical record shall be maintained for each prisoner receiving medical care. The record shall include the illness being treated, medication administered, special diets required, medical isolations and the name of the attending health professional or institution. The record may be kept in the prisoner's file jacket but must be labeled confidential.

50.15(9) *Medication storage.*

a. Prisoners' medications shall be stored at the proper temperature, as defined by the following terms:

(1) Room temperature: temperature maintained between 15 degrees centigrade (59 degrees Fahrenheit) and 30 degrees centigrade (85 degrees Fahrenheit).

(2) Cool: temperature between 8 degrees centigrade (46 degrees Fahrenheit) and 15 degrees centigrade (59 degrees Fahrenheit).

(3) Refrigerate: temperature that is thermostatically maintained between 2 degrees centigrade (36 degrees Fahrenheit) and 8 degrees centigrade (46 degrees Fahrenheit).

(4) All medication required to be "cool" or "refrigerated" shall be stored in a separate refrigerator or in a separate locked container within a refrigerator that is used for other purposes.

b. Any medications bearing an expiration date must not be administered beyond the expiration date.

c. Expired drugs or drugs not in unit dose packaging, whose administration had been discontinued by the attending medical practitioner, shall be destroyed by the jail administrator or designee in the presence of a witness. A record of drug destruction shall be made in each prisoner's medical record. The record shall include the name, the strength and the quantity of the drug destroyed, and the record shall be signed by the jail administrator or designee and by the witness.

d. Medications dispensed by a pharmacy in unit dose packaging may be returned to the dispensing pharmacy pursuant to 481—Chapter 552.

e. Jails utilizing unit dose packaging shall have written policies and procedures providing for the return of drugs so packed to the issuing pharmacy. Policy shall include proper recordkeeping of disposal.

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