


Name of Policy: <u>Plan for Prisoner-Patients Who Require Security Services Provided by a Law Enforcement Agency</u> Policy Number: 3364-100-50-13 Department: Hospital Administration Approving Officer: Chief Medical Officer Responsible Agent: Hospital Safety Scope: The University of Toledo Medical Center	 Effective Date: 09/01/2021 Initial effective date: March 9, 1983
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

The HSC Security Department shall have an identified plan for the handling of prisoner- patients at the University of Toledo Medical Center (“UTMC”);

(B) Purpose of Policy

To ensure all prisoner-patients are treated with dignity and respect; to further ensure the safety and well-being of the prisoner-patient, staff, visitors, other patients, and the security representative.

(C) Procedure

Admittance/Orientation

1. The Admitting Department will notify HSC Security when a prisoner-patient is admitted.
2. HSC Security will ensure that the security representative is credentialed.
3. The Security Officer will provide Orientation to the security representative to include:
 - a. The HSC Security phone number or radio channel if applicable;
 - b. The Emergency Preparedness Information handout; and
 - c. The Orientation Checklist.
4. The security of the patient is the responsibility of the sending agency.

The Emergency Preparedness Information handout and Orientation Checklist will include the security representative’s responsibilities related to patient security and emergency preparedness. This information will be discussed and reviewed with the security representative, to ensure that he/she understands the information being provided.

The nurse and the security representative will identify any special issues relevant to patient care and document them on the Orientation Checklist. These will include, but are not limited to:

1. The use of seclusion and restraint for nonclinical purposes;
2. The imposition of disciplinary restrictions;
3. The patient's length of stay;
4. The restriction of any of the patient's rights;
5. The plan for discharge and continuing care; and
6. How to interact with the patient.

The signed Orientation Checklist will be maintained in the HSC Security Office.

Decision-Making Responsibilities

At times, persons in legal custody of a law enforcement or correctional/rehabilitation agency are brought to UTMC for treatment and/or admission. In clinical situations, the decisions will defer to the attending physician. In non-clinical situations, the majority of the decisions will defer to the security representative in collaboration with appropriate hospital personnel. HSC Security will offer assistance to the security representative as appropriate/needed, but the responsibility for the physical security of the prisoner-patient remains with the security representative.

Use of Seclusion and Restraints for Non-Clinical Purposes

Seclusion and restraint of the prisoner-patient is necessary for the physical security of the prisoner-patient as it impacts on the safety and security of other patients, visitors and employees.

Non-clinical restraint devices (i.e., handcuffs) will be provided and maintained by the security representative. **Every available precaution shall be used for prisoner-patients classified as high risk by the sending security facility.**

When seclusion and restraint are necessary for clinical purposes, the prisoner-patient will be provided care based on UTMC's established policies and procedures for the care of a patient in seclusion and/or restraints.

Patient Rights

Exceptions to the Hospital's Patient Bill of Rights may be necessary due to the need to provide safety and security to other patients, staff, and the facility. The necessity for restrictions of this nature will be discussed among the clinical care team, the prisoner-patient, and the security representative.

The appropriate restrictions will be ultimately determined and enforced by the security representative.

<p>Approved by:</p> <p><u>/s/</u> <u>09/02/2021</u> Michael Ellis, MD Chief Medical Officer Date</p> <p><i>Review/Revision Completed By:</i> HAS Nursing Campus Police</p>	<p>Review/Revision Date:</p> <p>7/16/84 8/16/96 4/15/86 6/30/99 10/1/87 3/5/02 10/1/88 2/28/05 10/30/89 9/26/2006 10/10/91 9/29/2010 6/3/93 4/2013 1/2/2016 1/28/2019 1/28/2021 7/14/2021</p> <p>Next Review Date: 7/14/2024</p>
<p>Policies Superseded by This Policy:</p>	