

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.11.03	Page 1 of 5
	Original Effective Date: 10/01/08	New Effective Date: 09/15/16
	Supersedes: 500.11.03	Dated: 10/10/14
	Administrator's Approval: Jim Schwochert, Administrator	
Required Posting or Restricted:		
<input checked="" type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
Chapter: 500 Health Services		
Subject: Orientation of Health Service Employees		

POLICY

The Division of Adult Institutions shall ensure all health staff, including agency and limited term employees, receive orientation to health services and the facility. All permanent employees, including LTEs new to a position, shall also complete a formal in-depth orientation to the Department of Corrections.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2014, P-C-09 – Orientation for Health Staff

DEFINITIONS, ACRONYMS AND FORMS

Basic Orientation – Shall begin on the first day of employment, to include information necessary for the health staff member to function safely in the facilities.

Competency – Performance in a designated setting, demonstrating the ability to integrate knowledge, skill and behaviors based on established standards of performance that are determined by the work setting and one's role in that setting.

DOC – Department of Corrections

DOC-3578 – HSU/BHS Employee Orientation Checklist

DOC-3581 – Health Services Learning Needs Assessment/Evaluation

HSM – Health Service Manager

HSU – Health Service Unit

In-depth Orientation – includes a full familiarization with the health services delivery system at the facility, and focuses on the similarities and differences between providing health care in the community and in a correctional setting.

LTE – Limited Term Employee

NCCHC – National Commission on Correctional Health Care

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Orientation – The process by which new staff members are introduced to the philosophy, goals, policies, procedures, role expectations, physical facilities and special services in a specific work setting.

Orientation documentation – Documents which reflect a plan of organized activities for the new employee for the initial employment period that the employee accomplishes. These include but are not limited to: evaluations, competencies and checklists assigned by the supervisor.

PPD – Performance Planning and Development

RHA – Responsible Health Authority

PROCEDURES

I. Requirements

- A. Orientation shall be in alignment with NCCHC Standards.
- B. The orientation program is approved by the RHA and the facility administrator.
 1. The System RHA is the Bureau Director.
 2. At the facility level, the RHA is the HSM.
 3. The System Administrator is the DAI Administrator.
 4. At the facility level, the Administrator is the Warden/Superintendent.
- C. The orientation lesson plan is reviewed every two years or more frequently, as needed.

II. Basic Orientation

- A. Starting on the first day of employment, all new health employees shall begin their basic orientation to their assigned DOC facility that addresses:
 1. Health care roles and responsibilities.
 2. The staff member's functional position description.
 3. Relevant security training and health-related policies and procedures.
 4. Response to facility emergency situations.
 5. Appropriate interactions between inmates and staff.
- B. The supervisor shall develop an orientation plan in collaboration with the employee utilizing DOC-3581 – Health Services Learning Needs Assessment/Evaluation.
- C. Designated staff and the new employee shall document completion of orientation on DOC-3578 – HSU/BHS Employee Orientation Checklist.

III. In-Depth Orientation

- A. All permanent employees, including LTEs, shall complete a formal in-depth orientation to DOC Health Services within 90 days (contracted agency staff may be scheduled at HSU Manager discretion). At a minimum this includes:

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1. All health services policies and procedures not addressed in the basic orientation.
 2. Health and age specific needs of the inmate population at the assigned facility.
 3. Infection control, including use of standard precautions and confidentiality of records and health information.
- B. The BHS Orientation Program shall be scheduled within 90 days of hire (contracted agency staff may be scheduled at RHA discretion).
- C. The supervisor shall review and sign the completed DOC-3578 – HSU/BHS Employee Orientation Checklist.
- D. A copy of the completed DOC-3578 – HSU/BHS Employee Orientation Checklist shall be placed in the personnel file.

IV. Supervisory Responsibilities

- A. The assigned supervisor and the employee are accountable for new employee orientation.
- B. The supervisor shall facilitate the development and implementation of a written orientation plan and work schedule for a new employee that allows for sufficient time necessary for orientation.
- C. The supervisor may delegate certain aspects of the orientation to another staff person who shall serve as support and resource for the new employee.
- D. The supervisor shall meet weekly with the new employee during the orientation period.
- E. The supervisor shall ensure appropriate documentation records are retained.
- F. Nursing Coordinators, in collaboration with the psychology and dental supervisors, are responsible for reviewing the HSU/facility orientation programs at a minimum of every two years.

V. Performance/Competency Assessment

- A. The supervisor shall assess the new employee's ability to integrate knowledge, and appropriately demonstrate skills and behaviors based on established professional standards using a combination of observed assessments, written tests, checklists, or verbal feedback.
- B. The supervisor shall review with the employee the PPD as required including a discussion of the following:
1. Review of orientation documentation.
 2. Attendance at required meetings/in-service.
 3. Any necessary skills revalidation.

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4. Activities appropriate toward the accomplishment of growth and development.
5. Development of goals/objectives as indicated within the PPD.

Bureau of Health Services: _____ **Date Signed:** _____

James Greer, Director

_____ **Date Signed:** _____

Ryan Holzmacher, MD, Medical Director

_____ **Date Signed:** _____

Mary Muse, Nursing Director

Administrator's Approval: _____ **Date Signed:** _____

James Schwochert, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.11.03	Page 5 of 5
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Orientation of Health Service Employees		
Will Implement <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval:		

REFERENCES

DEFINITIONS, ACRONYMS, AND FORMS

FACILITY PROCEDURE

- I.
 - A.
 - 1.
 - a.
 - B.
 - C.
- II.
 - A.
 - B.
 - C.