

POLICY C-04 HEALTH TRAINING FOR CORRECTIONAL OFFICERS

<p align="center"><b>POLICY OF STATE OF DELAWARE DEPARTMENT OF CORRECTION</b></p>	<p align="center"><b>POLICY NUMBER</b> C-04</p>	<p align="center"><b>TOTAL PAGES</b> 3</p>
<p align="center"><b>RELATED NCCHC / ACA STANDARDS:</b> NCCHC: P-C-04 (Essential); J-C-04 (Essential); MH-C-04 (Essential) ACA: 5-ACI-1D-01; 5-ACI-1D-03</p>		
<p><b>CHAPTER:</b> 11 BUREAU OF HEALTHCARE, SUBSTANCE ABUSE, AND MENTAL HEALTH SERVICES</p>	<p align="center"><b>SUBJECT: Health Training for Correctional Officers</b></p>	
<p><b>APPROVED BY THE BUREAU CHIEF:</b> Deputy Chief, Michael Records (signature on file with BHSAMH)</p>		
<p><b>APPROVED BY THE COMMISSIONER AND EFFECTIVE THIS DATE</b> Commissioner Monroe B. Hudson Jr. August 24, 2021 (signature on file with BHSAMH)</p>		
<p align="center"><b>APPROVED FOR PUBLIC RELEASE</b></p>		

- I. **AUTHORITY:** 11 *Del. C.* §6536 Medical Care
- II. **PURPOSE:** To ensure that Correctional Officers are trained to recognize and appropriately respond to emergencies and understand their role in the early detection of illness and injury in staff and offenders and the indications for referring individuals to a qualified healthcare professional.
- III. **APPLICABILITY:** All Delaware Department of Correction (DDOC) employees and Contract Provider staff, offenders, and any outside healthcare provider servicing DDOC offenders.
- IV. **DEFINITIONS:** See Glossary
- V. **SUMMARY OF CHANGES:** This policy has not changed.
- VI. **POLICY:**
  - A. It is the policy of the DDOC that Correctional Officers are trained to recognize the need to refer someone to a qualified healthcare professional. This is accomplished in the following manner:
    - 1. The Bureau of Healthcare, Substance Abuse, and Mental Health Services (BHSAMH) in collaboration with the Steven R. Floyd, Sr. Training Academy (SRFTA) shall establish a training program that is approved by the responsible health authority (RHA) in cooperation with the facility administrator. This training program should be incorporated into the DDOC Annual Training Plan.
      - a. Contracted Provider Mental Health staff should review the training curriculum to advise on content regarding suicide prevention procedures, the signs and symptoms of mental illness, substance abuse, intellectual and developmental disabilities, psychological first aid, and communication skills for managing offenders with mental illness.
    - 2. An outline of the training, including course content and length is maintained on file by SRFTA.

3. All Correctional Officers who work with offenders receive health-related training at least every two years. This training includes, at a minimum, the following:

- a. Administration of first aid
- b. Cardiopulmonary resuscitation (CPR) including the use of an automatic external defibrillator (AED)
  - i. CPR training must involve a hands-on demonstration of skills prior to issuing a certification
  - ii. Training must be through an accredited training program approved by SRFTA.
- c. Acute manifestations of certain chronic illnesses (e.g., asthma, seizures, diabetes).
- d. Intoxication and withdrawal.
  - i. Should include information on drug and alcohol addiction as a disease and the effects of drugs and alcohol on the brain including possible behavior changes.
- e. Adverse reactions to medications.
- f. Signs and symptoms of mental illness.
  - i. Should include strategies for communicating with offenders who have positive signs of mental illness, substance abuse, and intellectual and developmental disabilities.
  - ii. Should include conflict resolution skills for managing offenders with mental disorders.
- g. Dental emergencies.
- h. Procedures for suicide prevention and intervention in accordance with BHSAMH Policy *B-05 Suicide Prevention and Intervention*.
- i. Procedures for appropriate referral of offenders with medical, dental, and mental health complaints (including suicidal/self-injurious behaviors as well as non-suicidal/self-injurious behaviors) to health staff.
- j. Precautions and procedures with respect to infectious and communicable diseases.
- k. Special medical topics, as appropriate. Such as:
  - i. Use of naloxone in the event of an opioid overdose.
  - ii. Pregnancy and labor considerations.
  - iii. Additional mental health training, including de-escalating techniques, for officers assigned to mental health units (Crisis Intervention Training (CIT)).
- l. Maintaining patient confidentiality (Health Insurance Portability and Accountability Act (HIPAA)).

4. Evidence of completion for each employee is maintained by SRFTA.

- a. The goal is to have 100% of all Correctional Officers complete this training every two years, however, the minimum requirement is 75%.
- B. Correctional Officers assigned to receiving, screening, and mental health areas, including mental health programs, residential units, or segregated housing areas, should receive additional training on mental health topics in order to fulfill their specific duties.

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- C. Where appropriate, the Contract Mental Health Provider staff provide training to Correctional Officers on:
  - 1.The dynamics of sexual abuse and sexual harassment in confinement,
  - 2.The common psychological reactions to sexual abuse and sexual harassment in confinement.
  - 3.How to detect and respond to the psychological signs of threatened and actual sexual abuse.
  - 4.The signs of human trafficking which is often associated with sexual abuse that can be hidden but present in correctional environments.
- D. The health training program shall be reviewed and approved at least annually by the RHA, BHSAMH, and SRFTA.
- E. The Contracted Healthcare Provider(s) shall develop within 30 days of the effective date of this policy, a facility-specific procedure for each Level 4 and Level 5 facility implementing this policy and coordinating the procedure with the BHSAMH.