




U.S. Immigration
and Customs
Enforcement

MEMORANDUM FOR: Tae D. Johnson
Assistant Director, Custody
Management

THROUGH: Jay M. Brooks
Deputy Assistant Director, Detention Management Division

FROM: 
John Bretz
Assistant Field Office Director, Stewart Detention Center

SUBJECT: Waiver for Medical Records

Purpose

To provide a waiver for the Stewart Detention Center (SDC), Atlanta Field Office. This waiver relates to Part 4.3 Medical Care, Sections (W) Continuity of Care, and (Y) Medical Records of the PBNDS 2011 requirement to provide detainee's full medical record when transferring facilities and instead provide a medical summary.

Background

On April 28-April 30, 2015 after the Nakamoto Annual Inspection of the SDC, it was reported the facility did not forward medical records as required in the PBNDS 2011.

Discussion

Due to the cost prohibitive nature of providing complete medical records, the SDC has deemed the cost to be outside of the normal practice of other medical facilities. This issue was discussed in detail with IHSC personnel and the following statement was forwarded:

"This component of the standard was not approved for implementation by IHSC leadership due to the overwhelming expense associated with full compliance and a conflict with community standards, i.e. The Joint Commission and NCCHC standards. TJC (RC.02.01.07) states the clinical record contains a summary list of each patient who receives continuing ambulatory services. This list shall contain: any significant medical diagnoses and conditions, any significant operative and invasive procedures, any adverse or allergic drug reactions, any current medications, OTC or herbal preparations. In addition, NCCHC (J-E-03) states relevant health information such as medical, dental, and mental health diagnoses, medications, significant chronic conditions and pending health referrals shall be included in the documents for intra-system transfers.

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IHSC meets the community and NCCHC criteria for transfers by documenting on the transfer form (USM) current, relevant medical, dental and health diagnosis, list of current medications, allergies, procedures and any referrals. The detainee will be provided medical summary information when transferred. If the receiving facility determines the need for the full detainee medical record, upon request, the medical record information will be released within a reasonable timeframe after receipt of an authorization. It is anticipated that, with the future implementation of the electronic health record, complete and full copies of the medical record will be able to be provided to all detainees at the time of transfer and release within reasonable expense."

Recommendation

I recommend that you approve a waiver relating to the Part 4.3 Medical Care, sections (W) Continuity of Care, and (Y) Medical Records of PBNDS 2011 requirement to provide the detainee's full medical record when transferring facilities and instead provide a medical summary.

Approve/date Amr 10/29/15 Disapprove/date _____
Modify/date _____ Needs more discussion _____

Brooks, Jay M

Subject:

FW: Edits to PBNDS 2011 Relating to Medical Records and Medical Summaries
PBNDS 2011 Revision - Medical Records (3).docx

Attachments:

From: Landy, Kevin

Sent: Friday, February 27, 2015 6:42 PM

To: Krohmer, Jon

Cc: Peredo-Berger, Luzviminda; Burke, Monica S; Bruce, Sandra B; Sakamoto, Reginald J; Johnson, Tae D; Brooks, Jay M; Lorenzen-Strait, Andrew R; Trickler-McNulty, Claire; Cheng, Ivy

Subject: Edits to PBNDS 2011 Relating to Medical Records and Medical Summaries

Jon,

The attached document should reflect our agreed upon changes to PBNDS 2011, replacing requirements to transfer complete medical records with requirements to prepare medical summaries. Note that in some cases I revised text we hadn't discussed to ensure consistency with our edits, including references to complete medical records contained elsewhere.

Please let us know if these changes accurately reflect our conversation, and if you have edits or suggestions.

Thanks

Kevin

Kevin Landy

Assistant Director, Office of Detention Policy and Planning (ODPP)

Immigration and Customs Enforcement

(202) 732-5069 Office Direct

(202) 732-3120 Fax

Attachment "A"

Office of Detention and Removal Operations

U.S. Department of Homeland Security
500 12th Street, SW
Washington, DC 20536



U.S. Immigration
and Customs
Enforcement

December 5, 2013

MEMORANDUM FOR: Health Service Administrators
ICE Health Service Corps (IHSC)

FROM: Jon R. Krohmer, MD
Assistant Director *Krohmer, MD*
IHSC

SUBJECT: IHSC Official Response to PBNDS 2011 Deficiency Regarding
Transfer Medical Records

This component of the standard was not approved for full implementation by IHSC leadership due to the overwhelming expense associated with full compliance (providing full copies of the *paper document* of the medical record) and a conflict with community standards, i.e. The Joint Commission (TJC) and National Commission on Correctional Health Care (NCCHC) standards. It was understood that full compliance with the PBNDS standard would not be achieved until the implementation of the electronic health record (eHR) allowed for production of an electronic version of the record to be provided at the time of transfer or to the detainee upon release.

TJC (RC.02.01.07) states the clinical record contains a summary list of each patient who receives continuing ambulatory services. This list shall contain: any significant medical diagnoses and conditions, any significant operative and invasive procedures, any adverse or allergic drug reactions, any current medications, OTC or herbal preparations. In addition, NCCHC (J-E-03) states relevant health information such as medical, dental, and mental health diagnoses, medications, significant chronic conditions and pending health referrals shall be included in the documents for intra-system transfers.

IHSC meets the community and NCCHC criteria for transfers by documenting on the transfer form (USM 552) current, relevant medical, dental and mental health diagnoses, list of current medications, allergies, procedures and any referrals. This information accompanies the detainee upon transfer. If the receiving facility determines the need for the full detainee medical record, upon request, the medical record information will be released within a reasonable timeframe after receipt of an authorization.

Note: It is anticipated that, with the future implementation of the electronic health record, complete and full copies of the medical record will be able to be provided to all detainees at the time of transfer and release within reasonable expense.