



CHAIRMAN'S NO. 10-2001

MEMORANDUM APRIL 23, 2001

TO: SHERIFFS, CHIEF ADMINISTRATIVE OFFICERS, COMMISSIONERS OF CORRECTION, JAIL MEDICAL DIRECTORS

RE: CLARIFICATION OF THE DEFINITIONS OF STANDING ORDER AND NURSING PROTOCOLS

The Commission of Correction issued Chairman's memorandum 2001 #4 in January of this year to provide information from the New York State Education Department, Division of Nursing regarding implementation of Standing Orders in New York State. This Memorandum clearly states that Standing Orders cannot include medication orders that can be initiated for the entire population, and nurses must have an inmate/patient specific medication order to deliver medications. This has led to confusion of definitions.

These definitions are universal in Nursing practice, but the Commission offers the definitions of the National Commission of Correctional Health Care (NCCHC) which we use as a guideline where applicable in NYS.

Standing Orders - They are preestablished written medical orders for the definitive treatment of identified conditions and for on site treatment of emergency conditions for persons having conditions to which the orders pertain.

The facility may have an agreement between their pharmacy and jail physicians to treat all inmates with the same medication for a specific diagnosis which is acceptable. **However, in NYS nurses need a inmate specific medical order.** It might be easier for nurses to obtain PRN orders for chronic problems found during the admission health assessment.

Nursing Protocols - They are written instructions or guidelines that specify the steps to be taken in appraising a patients physical status.

It is accepted nursing practice to have nursing protocols to provide instructions or guidelines for all facility nurses to follow in evaluating an inmate/patient. The problem develops in documenting the initiation of a protocol in the medical record. For example, the documentation cannot just state "tooth ache protocol initiated". Nurses must document what the protocols require.

If a facility wants to develop a flow sheet or questionnaire for each protocol and the nurse fills out the name, ID, date and time on the sheet and fills in all information, it is acceptable. If a nurse wants to write a narrative note in the progress notes, it is acceptable.

In most cases the inmate is usually referred to sick call for further evaluation and continuation of treatment or a change in treatment. The problem develops when the nurses refer the inmates to sick call on a specific date and it does not occur.

It is a legal safeguard if the nurse places the inmates name on the sick call list based on the level of traiged urgency and records – placed on MD or NP/PA next sick call list, not just referred to sick call. Nurses need to be alert to the number of inmates on the list as to if the sick call will take place.

Summary: In NYS nurses must have a medical order for each inmate in order to deliver any medications including OTC.

If there are further questions regarding these definitions please contact Bill Gaunay at 518-485-2482 or Peggy Loffredo at 518-485-2482.

Alan J. Croce
Chairman/Commissioner