POLICY

Residents are to be permitted to assist health care staff with routine tasks under appropriate supervision and may be involved in appropriate peer health-related programs or reentry health care training programs.

The policy and procedures established in IMPP 10-109A, regarding resident work assignment and removal is to be applicable to the provisions of this IMPP.

DEFINITIONS

Communicable disease: A disease due to an infectious agent which may be transmitted directly or individually from one individual to another.

Direct supervision: Observation of a resident or a group of residents by staff with enough frequency to assure continuous accountability for movements and activities of the residents.

Housekeeping tasks: Supervised work activity which is limited to the cleaning of health service areas and assembly of blank health record forms.

Standard Precautions: Represents the minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered: 1) hand hygiene, 2) use of personal protective equipment (e.g., gloves, gowns, facemasks), depending on the anticipated exposure, 3) respiratory hygiene and cough etiquette, 4) safe injection practices, and 5) safe handling of potentially contaminated equipment or surfaces in the patient environment.

PROCEDURES

I. Selection of Porters in Health Service Areas

A. Resident workers may be assigned to perform routine housekeeping tasks under appropriate supervision in the health services area. The unit team, Warden, or designee is to screen these residents prior to work assignment, per IMPP 10-109A.

1. When screening residents for work in the health services area, the following factors are to be considered:

   a. Criminal history,

   b. History of substance abuse,
c. History of communicable diseases, and

d. Disciplinary record.

II. Orientation of Resident Workers to Duties in the Health Care Area

A. Residents are not to be assigned to work tasks in the health care area until appropriate health care staff have provided them instruction on standard precautions and training in infection control practices within the work area.

1. Residents whose duties would include the handling of biohazardous wastes (e.g., dirty linens or utensils) are to be provided appropriate training and materials appropriate to the discharge of their duties.

III. Restriction of Duties

A. Residents are not to be used as health care workers nor will they substitute for regular program or health staff in peer health-related programming. The Warden and the Health Services Administrator may use residents in formal peer health-related programs as approved.

B. Approved programs include:

1. Housing buddy system: Residents may assist other handicapped offenders in activities of daily living, to include, ambulation, bathing, dressing, feeding, and toileting.

2. Resident support group that assists other residents with health problems such as a buddy system for potentially suicidal residents.

3. Hospice program assistance for activities of daily living.

4. Serving as a suicide companion or buddy if qualified and trained through a formal program that is part of a suicide prevention plan (IMPP 10-144A).

D. Residents are not to be assigned the following duties:

1. Performing direct patient care services.

2. Scheduling of health care appointments.

3. Determining access to health care of other residents.

4. Being responsible for, handling, or having access to:

   a. Surgical instruments,

   b. Syringes,

   c. Needles,

   d. Medications,

   e. Health records, and

   f. Operating diagnostic or therapeutic equipment.

IV. Resident Supervision

A. The Warden or designee is to designate an employee(s) to be responsible for the supervision of the resident porter(s) assigned to the health services area. A list of resident duties is to be compiled and maintained in the same manner as other job assignments.
B. Resident porter(s) are to be under direct supervision when present in areas where surgical instruments, syringes, needles, medications, health records, or other medical supplies are present.

V. Restricted General Order Development

A. Any General Orders written with reference to this policy are to be limited to the definition of resident work responsibilities, location, and hours of work.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff, residents, and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees, residents or offenders, or an independent duty owed by the Department of Corrections to employees, residents, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

None.

REFERENCES

IMPP 10-109
NCCHC P-C-06
5-ACI-6B-12

HISTORY

11-01-21 Original

ATTACHMENTS

None.