FLORIDA DEPARTMENT OF CORRECTIONS OFFICE OF HEALTH SERVICES

HEALTH SERVICES BULLETIN 15.03.13

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SUBJECT: ASSIGNMENT OF HEALTH CLASSIFICATION GRADES TO INMATES

EFFECTIVE DATE: 03/30/2020

I. PURPOSE:

The purpose of this health services bulletin (HSB) is to define the procedures for assigning a health grade to an inmate.

The health classification grade, for the purposes of this HSB, includes medical, mental health, work, transportation, work, impairment and disability status.

Note: All care for impaired and/or disabled inmates must be provided in accordance with HSB 15.03.25, *Services for Inmates with Auditory, Mobility, or Vision Impairments and Disabilities,* and, as applicable, FDC Procedure 604.101, Americans with Disabilities Act Provisions for Inmates.

These standards and responsibilities apply to both Department staff and Comprehensive Health Care Contractor (CHCC) staff.

II. PROCEDURES:

- A. Assignment of health grade will take place (or be reviewed) at the following points:
 - 1. During the intake process at the reception center.
 - 2. When being routinely transferred out of an institution.
 - 3. When being routinely transferred into an institution (not in-transits).
 - 4. At the Periodic Screening Encounter (PE).
 - 5. At the time of the chronic illness encounter.
 - 6. At the time of the EOS assessment.
 - 7. Any time the inmate has an encounter with a clinician (medical or mental health) where the medical or mental health status indicates that the health grade should be reevaluated (including admission to mental health inpatient units).
- B. The health grade is to be entered in OBIS and will be displayed on the HS06 screen for viewing by classification/security staff.
- C. Assignment of a health grade and changes to a health grade may be made by a licensed clinician (i.e. a physician or clinical associate or, in the case of the mental health grade, by a psychologist). For changes of mental health grades at S1/S2 institutions, licensed master's level staff can assign and change S-grades after consulting with a psychologist. This consultation can be made in person or via

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telephone and will be documented as an incidental note within the inmate's medical chart. The assignment of the work grade (the W grade) may be changed by either a physician or a clinical associate.

D. If the clinician is undecided about what health grade to assign to an inmate, the clinician should consult with the Regional Medical Director (RMD).

III. ELEMENTS OF THE HEALTH GRADE:

A. **M = Medical Grade** - An inmate who:

(Refer to HSB 15.09.05 *Chronic Illness Monitoring and Clinic Establishment Guidelines*)

- 1. **M 1** = Needs routine care (i.e. periodic screening encounter, sick call, emergency care).
- 2. **M** $\mathbf{2}$ = Is being followed in Chronic Illness Clinic (CIC), his/her medical condition is stable and to be seen according to established guidelines, but at intervals no more often than 6 months and no less than 12 months.
- 3. **M 3** = Is being followed in Chronic Illness Clinic (CIC) every three (3) months. Exception: inmate in Immunity Clinic (IC) will have M3 grade but are seen every four (4) months. Refer to HSB 15.03.05 Appendix 6 for further instructions on IC medical profiles once the patient is deemed stable.
- 4. M 4 = Is being followed in Chronic Illness Clinic (CIC) at least every three (3) months and requires ongoing visits to the physician more often than every three (3) months.
- 5. **M 5** = Requires long-term (greater than thirty (30) days) inpatient infirmary, or designated housing (i.e. J dorm at Zephyrhills CI, F dorm at SFRC, Palliative care unit at CFRC and J dorm at RMC). This assignment is not to be used to get an inmate transferred from his/her current institution's infirmary to a designated housing just because the inmate is housed in the infirmary. If a transfer to a designated housing is indicated the clinician will discuss with the relevant RMD and appropriate arrangements will be made if the RMD approves.
- 6. $\mathbf{M} \mathbf{9} =$ Inmate who is pregnant.
- B. **S = Mental Health Grade -** An inmate who:

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- S 1 = Demonstrates no significant impairment in the ability to adjust within an institutional environment, and does not exhibit symptoms of a mental disorder (which includes intellectual disability). Although inmates classified as S-1 do not require ongoing mental health treatment, they have access to routine mental health services (sick call, emergencies, etc.).
- 2. S 2 = Exhibits mild impairment associated with a diagnosed mental disorder. The impairment is not so severe as to prevent satisfactory adjustment in general inmate housing with the assistance of mental health case management, psychological services, and counseling.
- 3. **S 3** = Shows moderate impairment in adaptive functioning due to a diagnosed mental disorder. The impairment is not so severe as to prevent satisfactory adjustment in general inmate housing with the assistance of mental health case management, psychological services, counseling, and psychiatric consultation for psychotropic medication. S-3 is also assigned routinely to inmate who are determined to need psychotropic medication even if the inmate may be exercising the right to refuse the medication.
- 4. **S 4** = Is placed in a Transitional Care Unit (TCU). The mental health classification S-4 can only be assigned or changed at a TCU. The TCU is an inpatient level of care, and a multidisciplinary treatment team develops an individualized service plan to address the inmate's specific needs and limitations.
- 5. **S 5** = Is placed in a Crisis Stabilization Unit (CSU), which is an inpatient level of care. This classification can only be assigned or changed at a CSU. A multidisciplinary treatment team helps the inmate recover from a psychiatric emergency situation such as a suicide attempt, psychotic break, or severe loss of behavioral control.
- 6. **S 6** = Is admitted to a Corrections Mental Health Treatment Facility (CMHTF), which is the highest and most intensive level of mental health care available to inmates. The CMHTF is an inpatient level of care, and admission to a CMHTF requires judicial commitment.
- 7. S 9 = Is in the reception process and is scheduled to be evaluated by a psychiatrist.
- C. **W = Work Grade** An inmate:
 - 1. **W 1** = Who has no restrictions on working.

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- W 2 = Who has minimal to moderate restrictions that are defined by passes that describe the limitation/s and are posted on the second page of the HS06 screen as well as being defined on DC4-706, Health Services Profile (e.g. "Inmate cannot lift R (right) arm above his head").
- 3. **W 3** = Who has significant restrictions that are defined by passes that describe the limitation/s and are posted on the second page of the HS06 screen as well as being defined on DC4-706 (e.g. wheelchair, inmate who needs light duty or sedentary work because of difficulty ambulating).
- 4. **W 4** = Whose job assignment has been designed on an individual basis by a coordinated effort between health services and classification staff.
- 5. **W 5** = Who cannot be assigned a job because of a medical or mental health condition and is housed in an infirmary or designated housing as described above. This grade must be approved by the RMD/designee or RMHD/designee on a case-by-case basis. For example: an inmate who is chronically ill and is permanently housed in an infirmary.
- D. **T** = **Transportation Grade** An inmate has:
 - 1. T 1 = No medical restrictions for travel.
 - 2. T 2 = Temporary restrictions (generally expected to be less than 90 days) that would require special transport (must be defined on the HS06 screen to include dates of the temporary restrictions) (e.g. wheelchair needed for six weeks). Temporary restrictions do not require a definition under the "I" grade. An appointment must be scheduled with the clinician or nursing to review status of restriction at the end of the restriction time frame (restriction must be removed from profile when discontinued).
 - 3. **T 3** = Permanent limitations that require special transport (e.g. wheelchair,) must show passes issued as displayed on the second page of the HS06 screen and require a definition under the "I" or impairment/disability grade. Questions should be referred to the RMD.
 - a. Wheel Chair:
 - i. WHEE1= temporary pass not to exceed six (6) months.
 - ii. WHEE2= Permanent pass that should be reviewed and will be considered permanent for an ADA accommodation.

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E. WC = Work Camp

- 1. This designation is used for inmates assigned to a Work Camp that meet the following criteria:
 - a. Prescribed INH either KOP or single dose.

See Health Services Bulletin 15.03.18, *Identification and Management of Latent Tuberculosis Infection (LTBI) and Tuberculosis Disease* for additional qualifying information for an inmate on INH to be allowed a Work Camp assignment.

b. Medical Grade 3 that is clinically stable; not prescribed single dose medication and is eligible to work.

F. I = Impairment and/or Disability Grade - :

A grade of **I** is indicated for inmates designated with impairments and/or disabilities. Further clarification is given to specify impairments versus disabilities in sections below. **Disability grades are in bold print**.

Inmates designated under the following impairment grades will be considered qualified individuals with impairments and/or disabilities as defined by Procedure 604.101, Americans with Disabilities Act Provisions for Inmates, for basic FDC services of housing and transportation. ADA Coordinator will assign ADA designations and accommodations. An inmate who is assigned an Impairment Grade that is not designated as "Disability" may still be considered disabled under the Americans with Disabilities Act and be entitled to any needed accommodations for the duration of their impairment assignment.

Each impairment and/or disability must be identified on the HS06 screen and the assistance required for each impairment and/or disability must show passes issued on the HS06 screen to include an expiration date if of a temporary nature or identified as ADA permanent status.

- 1. \mathbf{P} = Physical impairment and disability
 - P1: Minor physical impairment not to exceed three (3) months; Only minor adaptive medical devices, such as crutches, arm sling, cast, braces, cane, crutches, walker, etc. to be assigned; Adaptive device to be specified in Pass comment in OBIS and is not to include wheelchairs.

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- P2: Short term physical impairment not to exceed six (6) months may be entitled to ADA accommodations during impairment; Adaptive devices may include limited term assignment of wheelchair, braces, cane, crutches, medical devices, and walker. Length of assignment of adaptive device must be specified in Pass comment in OBIS. Adaptive devices requiring more than six months will require evaluation by physical therapy or appropriate discipline.
 Exception: Canes, walkers or other adaptive devices (excluding wheelchairs) issued for ambulatory instability will be evaluated annually at period screening and pass issued/renewed for up to 1 year,
- **PD3: DISABILITY:** A permanent physical disability to include loss of limb(s), paraplegia, quadriplegia, oxygen dependency, or other medical condition that significantly hinders their ability to perform activities of daily living and requiring assignment of a permanent wheelchair or other adaptive device.
- 2. \mathbf{H} = Hearing impairment and disability

if clinically indicated.

*NOTE: Hearing impairment or disability grades will only be assigned after evaluation by an auditory specialist.

H1: Mild hearing loss:

Ranges from 26 to 40 decibels for the four frequency pure tone average of 500, 1000, 2000 and 4000 Hz for the better ear, i.e., the quietest sounds that individuals with mild hearing loss can hear with their better ear are 26-40 dB HL. This is about as loud as rustling leaves. One-on-one conversations may be fine, but these individuals have difficulties keeping up with conversations, especially in noisy surrounding. Although they may choose to use hearing aids or auxiliary devices, they can generally perform all activities of daily living without those devices.

H2: Moderate hearing loss:

• Ranges: from 41 to 55 decibels for the four frequency pure tone average of 500, 1000, 2000 and 4000 Hz for the better ear, i.e., the quietest sounds that individuals with moderate hearing loss can hear with their better ear are 41-55 dB HL. They may understand normal conversation in a quiet environment, but will have difficulty

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understanding what is said from a distance or in the presence of background noise. These individuals have difficulty keeping up with conversations, when they are not using a hearing aid. They often need to ask people to repeat themselves during conversations in person and on the phone. They may benefit from the use of hearing aids and auxiliary devices.

HD3: Moderately severe hearing loss (DISABILITY):

Ranges from 56 to 70 decibels for the four-frequency pure tone average of 500, 1000, 2000 and 4000 Hz for the better ear, i.e., the quietest sounds that individuals with moderately severe hearing loss can hear with their better ear are 56-70 dB HL. They may understand normal conversation in a quiet environment, will have difficulty understanding what is said from a distance or in the presence of background noise. Also, they may not understand speech when they are not using a hearing aid, if they are a hearing aid user. They may rely on auxiliary devices for TV and telephone use. They benefit from the use of hearing aid, and auxiliary devices. They may also use manual communication as needed.

HD4: Severe hearing loss (DISABILITY):

• Ranges from 71 to 90 decibels for the four-frequency pure tone average of 500, 1000, 2000 and 4000 Hz for the better ear, i.e., the quietest sounds that individuals with moderately severe hearing loss can hear with their better ear are 70-95 dB HL. These individuals depend on powerful hearing aids. They will have difficulty understanding what is said in a normal conversation even with the use of hearing aids and auxiliary devices. They often rely on lip-reading when they are using hearing aids, in order to supplement their hearing. They may also use manual communication as needed.

HD5: Profound hearing loss or deaf (DISABILITY):

• Range is greater than 90 decibels for the four-frequency pure tone average of 500, 1000, 2000 and 4000 Hz for the better ear, i.e., the quietest sounds that individuals with profound hearing loss can hear with their better ear are from 95 dB HL or more. They cannot understand speech even with powerful hearing aids, although they may have sound awareness in order to make out loud sounds such as a truck

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that backfires or an airplane taking off. They can use a hearing aid or other auxiliary devices for sound awareness and safety. Some individuals may use a cochlear implant. Common communication modes include manual communication, most notably through sign language and/or lip-reading.

H9: Pending Diagnosis: Inmate is pending evaluation with a specialist.

3. $\mathbf{E} = \mathbf{V}$ is ual impairment or disability

* **NOTE**: Visual disability grades will only be assigned after evaluation by vision specialist.

E1: Low Vision:

• Acuity – the corrected vision in the better eye is 20/40 or better

E2: Low Vision with referral:

- Acuity the corrected or uncorrected vision in the better eye is equal to or between 20/50 and 20/199.
- Peripheral vision less than 150 degrees, but greater than 20 degrees determined by optometry

ED3: Low Vision with inability to refract adequately (DISABILITY):

• The vision loss substantially limits one or more of the following major life activities: performing manual tasks, seeing, eating, walking, getting around, reading, communicating, and working.

ED4: Legal Blindness (DISABILITY):

- The inmate possesses some visual capability but is impaired to the point of legal blindness (by definition). Acuity the corrected vision in the better eye is 20/200 to LP (light perception). Peripheral vision: vision is less than 20 degrees.
- **ED5:** Total Blindness (DISABILITY): Complete vision loss with no light perception.
- E9: Pending diagnosis: Inmate is pending evaluation with a specialist.

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4. SY = Neurocognitive and Neurodevelopmental impairments or disabilities

Neurocognitive and Neurodevelopmental disabilities cause individuals living with them many difficulties in certain areas of life, especially in language, mobility, learning, self-help, and independent living. It reflects the person's need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services which are lifelong or extended duration and are individually planned and coordinated. Examples are intellectual disability, autism, Down syndrome, severe epilepsy, brain injury, and Alzheimer's disease. This impairment grade identifies that the inmate has either a diagnosed disability or impairment.

SY-D: Diagnostic criteria for neurocognitive or neurodevelopmental disability is met. For example, inmates meeting the requirements of an intellectual disability (i.e., IQ<70, impaired adaptive behavior [Adaptive Behavior Checklist <35] and onset before age 18). These inmates will require regular review by the Impaired Inmate Committee and will not be downgraded below an S-grade of 2 for the duration of their incarceration.

SY-Y: Denotes impairment due to deficits that may or may not impair adaptive functioning. For example, this designation will be assigned automatically to those scoring <70 on the final IQ test given but do not meet full diagnostic criteria.

G. **SD** = **Single Dose Medications** to be marked with the letter Y (Yes) if inmate is taking single-dose medications. This is intended for inmates whose single dose regimen is intended for long-term use (longer than seven (7) to ten (10) days in duration). To make the SD positive, one must go to the second page of the GH08 and use the action SD with a beginning date (no end date). Letter Y must be removed from profile if single dose is discontinued. To remove the letter Y, one must go to second page of the GH08 and use the action SDX and insert an ending date with no beginning date.

The single dose (SD) actions will be separate for medical, dental, and mental health so that having "turned on" the SD in medical will not affect the mental health setting. SD is meant to describe the inmate's need to be assigned to facility able to administer single dose medications and is not intended as an action for each prescription.

H. **R** = Mental Health Residential Housing grade (OBIS only):

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Mental Health Residential Housing grades (R-grade) will be assigned and entered into OBIS upon arrival to a Residential Mental Health Unit (RMHU). The R-grade indicates that the patient will be housed within a particular setting to facilitate appropriate mental health care. These indicate an inmate who is:

• S = Assigned to those in a Secure Treatment Unit (STU), which is an outpatient level of mental health care for patients who exhibit impairment associated with a diagnosis of a serious mental illness with a marked inability to conform their behavior to institutional standards.

• D = Assigned to the Diversion Treatment Unit (DTU), which is an outpatient level of mental health care for patients who exhibit impairment associated with the diagnosis of serious mental illness which hinders the ability to function in the general population.

• C = Assigned to the Cognitive Treatment Unit (CTU), which is an outpatient level of mental health care for patients who exhibit impairment of cognitive functioning due to dementia, traumatic brain injury, or other neurocognitive disorders which substantially interferes with the ability to meet the ordinary demands of daily living.

IV. EXAMPLES Found on Health Services Profile Form DC4-706

A. An inmate who is being followed in Chronic Illness Clinic every three (3) months, needs the services of psychology, can do light duty, needs special transport, is temporarily impaired because of a physical condition, and is on single dose medications is:

M3, S2, W3, T3, IP1, SDy

Medical Grade	Mental Health	Work Grade	Transportation Grade	Work Camp Grade	Impairme	ent Grade	(if applic	able)	Single Dose
Μ	S	W	Т	Yes	Р	Н	E	SY	SD
3	2	3	3	X No	1				Y

*The HS06 will define his/her special transport needs (wheelchair). S/he should be assigned to a facility that has pill lines for single-dose medications. Expiration date is required for wheelchair pass.

B. Conversely, an inmate who is a stable diabetic who is being followed in Chronic Illness Clinic every six (6) to nine (9) months, works every day, is taking oral meds, and has no mental health problems, the health grade would be:

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M2, S1, W1, T1, WCy

Medical Grade	Mental Health	Work Grade	Transportation Grade	Work Camp Grade	Impairment Grade (if applicable)				Single Dose
М	S	W	Т	X Yes	Р	Н	Е	SY	SD
2	1	1	1	No					

C. If the above inmate were on INH prophylaxis, s/he would have the letter Y (Y) under SD. This inmate is to be seen monthly by the institutional TB nurse until s/he completes the course of chemoprophylaxis; at that time, s/he also is seen by the clinician, who will remove her/him from the TB clinic (TC) and change the medical profile accordingly.

M2, S1, W1, T1, WCy, SDy

Medical Grade	Mental Health	Work Grade	Transportation Grade	Work Camp Grade		Single Dose			
M	S	W	T	X Yes	(if applicable) P H E SY				SD
2	1	1	1	No					Y

*The above inmate would be sent to an institution where pill lines are available.

D. An unstable diabetic inmate with no mental health issues, has a below-the-knee amputation, in a permanent wheelchair with a permanent pass, and is on single-dose medications.

M3, S1, W3, T3, IPD3, SDy

Medical	Mental	Work	Transportation	Work Camp		Single			
Grade	Health	Grade	Grade	Grade	(if applicable)				Dose
М	S	W	Т	Yes	Р	Н	Е	SY	SD
3	1	3	3	X No	3				Y

*The above inmate would be sent to an institution where pill lines are available.

E. An inmate with no medical diagnoses being followed. S/he has diagnosis of depression with single-dose medication, there are no transportation limitations, and s/he has a visual acuity of 20/80 with corrective lenses.

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M1, S3, W1, T1, IE1, SDy

Medical Grade	Mental Health	Work Grade	Transportation Grade	Work Camp Grade	Impa	Single Dose			
М	S	W	Т	Yes	Р	Н	Е	SY	SD
1	3	1	1	X No			2		Y

*The above inmate would be sent to an institution where pill lines are available.

F. An inmate is received at reception center unable to hear instructions from security, but is able to read lips. S/he has no other medical or mental health issues. Based on evaluation, has been referred to audiologist.

M1, S3, W1, T1, IE1, SDy

Medical Grade	Mental Health	Work Grade	Transportation Grade	Work Camp Grade	Impairment Grade (if applicable)				Single Dose
М	S	W	Т	Yes	Р	Н	E	SY	SD
1	1	3	1	X No		9*			

*This inmate will be put on medical hold until evaluation by audiologist is completed

V. RELEVANT FORM:

A. DC4-706 Health Services Profile

Health Services Director

Date

This Health Services Bulletin Supersedes:

HCS 25.02.04 dated 10/1/89

HSB 15.03.13 dated 12/5/88 8/15/91, 3/11/92, 5/28/02, 2/10/04, 6/22/14,

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03/04/13, 07/08/13, 2/2/18, 11/1/2018, AND 12/15/2019