

Program # 40058 - Corrections Health - Accreditation

Version 3/31/2006 s

Priority: Safety
Program Offer Type: Existing Operating
Related Programs: 40025A, 40026, 40027A, 40028A, 40050, 40059
Program Characteristics: Backfill State/Federal/Grant

Lead Agency: Health Department
Program Contact: BURROW Gayle F

Executive Summary

This program offer provides clinical service levels required to maintain accreditation in all our Corrections Health facilities. This offer along with all of the other Corrections Health Offers represents current service level. This offer is considered "backfill" because it reflects the \$200k that the Health Department absorb instead of taking a full \$1 million reduction to Corrections Health in FY06. In addition, this includes the mid-year resources added to Corrections Health to staff beds opened mid-year in FY06. While neither are a "backfill" for other resources, we were asked to call this amount out from the other Program Offers.

Program Description

The Health care delivery standards that frame accreditation by the National Commission on Corrections Health Care (NCCHC) are designed to provide a program that meets minimum national standards. As a fundamental principle, they are designed to evaluate incarcerated individuals health care needs before they become costly emergencies. Incarcerated individuals cannot obtain care on their own, so the law requires that jurisdictions provide care that eliminates pain and suffering. Correctional facilities cannot be "deliberately indifferent" to the health needs of individuals. Protecting the community by identifying and treating communicable diseases while incarcerated is also an public health objective.

Program Justification

Accreditation makes sense from a financial as well as public health perspective. 1. Best Practices: With input from 38 major national organizations, National Commission on Correctional Health Care (NCCHC) standards reflect the most efficient and cost effective way to care for inmates. Standards are revised to keep agencies up to date with new trends in health care. 2. Continuum of Life: Jails provide continuum of life health care – in jail one day, home the next. Care received in jail affects the community and family. It is an opportunity to affect public health. As Vice Admiral Richard H. Carmina, MD, MPH, FACS, CCHP, said in a speech titled Public Safety is Public Health, Public Health is Public Safety at the 2003 NCCHC conference, "Let me lead with an idea that's obvious to everyone in this room, but not so obvious to many outside it: Correctional health is the key to public health." (October 6, 2003.) 3. Partnership Efficiencies: NCCHC standards assure custody and health work together at all levels. Emergencies cost money – preventing them saves everyone's resources. 4. Deliberate Indifference: no known accredited jail program has been successfully sued for being deliberately indifferent to the medical needs of inmates. Procedures are in place to evaluate and treat needs accordingly. 5. Closed Community: Public health care to all those within the jail system – inmates, staff, visitors, courts, food service, chaplains, volunteers – and the health or illness of everyone is affected if diseases are not treated by health professionals. Four million U.S. citizens have been incarcerated, their health affects us all.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY04-05)	Current Year Purchased (FY05-06)	Current Year Estimate (FY05-06)	Next Year Offer (FY06-07)
Output		0	0	0	0
Outcome		0	0	0	0

Performance Measure - Description

Please see performance measures for Correction Health offers for each facility. Since these offers were written for an accredited facility, if we were to loose our accreditation these performance measures and outcomes would have to be rewritten. This program offer assures that the other offers will be able to achieve the performance measures they have identified.

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2006	2006	2007	2007
Personnel	\$0	\$0	\$587,001	\$0
Contracts	\$0	\$0	\$0	\$0
Materials & Supplies	\$0	\$0	\$0	\$0
Internal Services	\$0	\$0	\$0	\$0
Capital Outlay	\$0	\$0	\$0	\$0
Subtotal: Direct Exps:	\$0	\$0	\$587,001	\$0
Administration	\$0	\$0	\$9,334	\$0
Program Support	\$0	\$0	\$41,696	\$2,965
Subtotal: Other Exps:	\$0	\$0	\$51,030	\$2,965
Total GF/non-GF:	\$0	\$0	\$638,031	\$2,965
Program Total:	\$0		\$640,996	
Program FTE	0.00	0.00	6.60	0.00
Program Revenues				
Intergovernmental	\$0	\$0	\$0	\$0
Program Revenue for Admin	\$0	\$0	\$0	\$2,965
Total Revenue:	\$0	\$0	\$0	\$2,965

Explanation of Revenues

Significant Program Changes

Last year this program was: