

	<b>DEPARTMENT OF PUBLIC SAFETY</b>	<b>EFFECTIVE DATE:</b> <b>JAN 03 2012</b>	<b>POLICY NO.:</b> <b>COR.10.1G.07</b>
	<b>CORRECTIONS ADMINISTRATION</b> <b>POLICY AND PROCEDURES</b>	<b>SUPERSEDES (Policy No. &amp; Date):</b> <b>COR.10.1G.07 (10/29/07)</b>	
<b>SUBJECT:</b> <b>CARE OF THE PREGNANT INMATE</b>		<b>Page 1 of 3</b>	

## 1.0 PURPOSE

The purpose of this policy is to establish guidelines for the provision of prenatal care to incarcerated pregnant women.

## 2.0 REFERENCES AND DEFINITIONS

### .1 References

- a. Hawaii Revised Statutes, Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties.
- b. National Commission on Correctional Health Care, Standards for Prisons and Jails, (2008).

### .2 Definitions

- a. Prenatal care: refers to the medical and nursing care recommended for women before and during pregnancy. The aim of good prenatal care is to detect any potential problems early, to prevent them if possible (through recommendations on adequate nutrition, exercise, vitamin intake etc.), and to direct the woman to appropriate specialists, hospitals, etc. if necessary.
- b. High-risk pregnancy: A pregnancy in which some condition puts the mother, the developing fetus, or both at higher-than-normal risk for complications during or after the pregnancy and birth.

## 3.0 POLICY

- .1 Prenatal care shall commence when pregnancy is confirmed. The care shall be timely and appropriate including specialized obstetrical services when indicated and postpartum care. The clinical care must be akin to that rendered in the community.

COR P & PM	<b>SUBJECT:</b> <b>CARE OF THE PREGNANT INMATE</b>	<b>POLICY NO.:</b> <b>COR.10.1G.07</b>
		<b>EFFECTIVE DATE:</b> <b>JAN 03 2012</b>
		<b>Page 2 of 3</b>

- .2 The prenatal care shall include but is not limited to:
  - a. Regularly scheduled obstetrical examinations with frequency determined by gestational age of the fetus and/or maternal health condition.
  - b. Sexually transmitted and other communicable disease testing and prophylaxis, when indicated.
  - c. Laboratory and diagnostic testing as determined appropriate by the Obstetrician.
  - d. Pregnancy counseling on what to expect, diet, exercise, hygiene, nutritional guidance and pregnancy counseling.
  - e. Prenatal vitamins and supplements as ordered by the Obstetrician.
- .3 The disposition of the newborn shall be managed by the Department of Human Services, Child Protective Services and the mother.

#### **4.0 PROCEDURES**

- .1 All pregnant inmates shall be offered prenatal care.
- .2 Patients classified as having a high-risk pregnancy shall be referred to an Obstetrician for care. Whenever possible, patients shall continue prenatal care with their established OB provider.
- .3 Arrangements for hospitalization and confinement of the mother shall be assumed by the correctional facility.
- .4 Health Care shall notify security of the inmate's pregnancy via medical memo indicating the date the inmate will begin their third trimester of pregnancy.
- .5 Health Care shall notify security of any medically indicated special security handling considerations that must be implemented prior to the inmate entering her third trimester of pregnancy.
- .6 Pre-and postpartum care provided by facility providers shall be documented in the medical record.

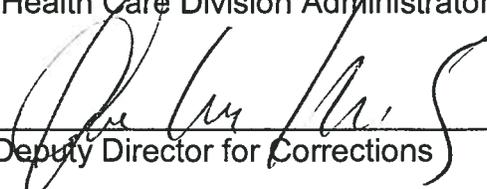
COR P & PM	<b>SUBJECT:</b> <b>CARE OF THE PREGNANT INMATE</b>	<b>POLICY NO.:</b> <b>COR.10.1G.07</b>
		<b>EFFECTIVE DATE:</b> <b>JAN 03 2012</b>
		<b>Page 3 of 3</b>

- .7 Post delivery medical costs for the child shall be the responsibility of the inmate, the inmate's family or the State Department of Human Services.
- .8 Mothers seeking foster, custodial or adoptive care for their baby shall be instructed to speak with the hospital counseling services at the time of delivery.
- .9 Statistical data shall be kept on the number of pregnancies and their outcomes.

**5.0 SCOPE**

This policy and procedure applies to all correctional facilities housing women.

**APPROVAL RECOMMENDED:**

	12/9/11
_____ Medical Director	_____ Date
	12/15/11
_____ Health Care Division Administrator	_____ Date
	12/29/11
_____ Deputy Director for Corrections	_____ Date

**APPROVED:**

	1/3/2012
_____ Director	_____ Date