



*State of North Carolina
Department of Public Safety
Prisons*

Chapter: Q
Section: .0300
Title: **Medical Release of Ill
and Disabled Offenders**
Issue Date: 06/09/22
Supersedes: 02/01/18

POLICY AND PROCEDURE

References

North Carolina General Statute

[15A-1369](#)

.0301 PURPOSE

To provide guidelines for the release of offenders due to health conditions to include terminal illness, permanent total disability, or geriatric offenders as defined by statute.

.0302 DEFINITIONS

- (a) Terminally Ill – An incurable condition as determined by a licensed physician caused by an illness or disease that was unknown at the time of sentencing or has progressed since sentencing and will likely produce death within 6 months and is so debilitating that it is highly unlikely that the offender poses a significant public safety risk.
- (b) Permanently and Totally Disabled – An irreversible physical incapacitation as determined by a licensed physician caused by an existing physical or medical condition that was unknown at the time of sentencing or has progressed since sentencing to render the offender to be permanently disabled and so debilitated that it is highly unlikely that the offender poses a significant public safety risk.
- (c) Geriatric – An offender who is 65 years or older who suffers from chronic infirmity, illness or disease related to aging that has progressed such that the offender is incapacitated to the point that they are not a public safety risk.
- (d) Medical Release Plan – A comprehensive written medical and psychosocial care plan that is specific to the offender and includes, at a minimum:
 - (1) The proposed course of treatment.
 - (2) The proposed site for treatment and follow-up.
 - (3) Documentation that medical providers qualified to provide the medical services identified in the medical release plan are prepared to provide services.
 - (4) The financial program in place to cover the cost of this plan for the duration of medical release, which shall include eligibility for enrollment in commercial insurance plan, Medicare, Medicaid or access to other adequate financial resources.

- (e) Commission – Post-Release Supervision and Parole Commission
- (f) Department – Department of Public Safety, Prisons
- (g) Offender – Any person sentenced to the custody of the Department of Public Safety, Prisons

.0303 ELIGIBILITY

An eligible offender is any offender who meets the definition of Terminally Ill, Permanently and Totally Disabled, or Geriatric, except:

- (a) Those with convictions for Class A, B1 or B2 felony, including convictions imposed prior to Structured Sentencing that would fall into these categories;
- (b) Those convicted of any crime requiring registration as a sex offender; or
- (c) Those convicted of capital felonies (death row convictions).

.0304 PROCEDURES

- (a) Facilities housing acute and long-term care offenders shall submit offenders for consideration for medical release to the Chief Medical Officer/designee at the time a condition is identified which could qualify them for early medical release. Urgent cases should be discussed with the Chief Medical Officer at or before submission.
- (b) Requests for consideration of an offender for release secondary to medical conditions may be submitted by:
 - (1) Medical Staff within the Department of Public Safety, Prisons [must complete the Medical Information Form (Attachment A) and submit to the Chief Medical Officer/designee]
 - (2) Family member, attorney, etc. [may be submitted in writing to the Division Director/designee as a letter or by use of form on NCDPS website]
- (c) The Health Services Release Coordinator with the approval of the Chief Medical Officer shall refer identified cases to the Assistant Director of Rehabilitative Services or their designee.
- (d) The Assistant Director of Rehabilitative Services or their designee shall determine eligibility for consideration of Medical Release based on criminal convictions established by General Statue and indicated in .0304 and return a listing of eligible offenders back to the Chief Medical Officer.

- (e) All requests will be reviewed to determine if the offender meets the criteria for release. The Chief Medical Officer/Health Services Release Coordinator shall request a Medical Information Form (Attachment A) to be completed by the attending physician. The completed form shall be returned as instructions indicate.
- (f) The Chief Medical Officer or their designee shall direct the physician(s) at the housing facility to prepare a medical summary to include a description of all terminal conditions, physical incapacities, and chronic conditions, as well as a prognosis concerning the likelihood of recovery from all terminal conditions, physical incapacities, and chronic conditions.
- (g) This summary will be forwarded to the Chief Medical Officer or their designee. If the offender meets the statutory medical requirements for Medical release, the medical summary will be forwarded to the Assistant Director of Rehabilitative Services or their designee to complete the psychosocial review and to the Health Services Social Worker to develop an approved treatment and release plan.
- (h) The Assistant Director of Rehabilitative Services or designee will submit the risk assessment and the Chief Medical Officer/designee will submit the medical referral to a three (3) member committee for review. The committee will evaluate whether the offender poses a public safety risk.
- (i) The Health Services Social Worker will:
 - (1) Meet with the offender and obtain release plans as well as a Release of Information so necessary medical information may be shared with community provider(s) and NCDPS personnel (Prisons, Community Correction and the Commission)
 - (2) Develop a comprehensive, viable and appropriate care plan/placement for the offender.
- (j) The facility Health Services Social Worker will provide information to the divisional Health Services Release Coordinator confirming a medical release plan has been developed that meets statutory requirements. Prior to Medical Release, the Health Services Release Coordinator shall ensure the offender understands the conditions of release, as follows:
 - (1) That medical care shall be consistent with the medical release plan submitted
 - (2) That the offender shall cooperate with and comply with the plan
 - (3) That the offender shall cooperate and shall comply with treatment plans of medical providers to whom the released offender is to be referred

- (4) That the offender shall be subject to supervision by Community Corrections (DCC) and shall permit officers from DCC to visit at reasonable times
 - (5) That the offender shall comply with any other conditions of release set by the Commission
 - (6) That the Commission shall receive periodic assessments from the treating physician after the offender is reviewed by the Chief Medical Officer/designee.
- (k) The Assistant Director of Rehabilitative Services or their designee shall complete a psychosocial review to include:
- (1) The offender's medical (as provided by medical staff) and psychosocial condition,
 - (2) The risk the offender poses to society
 - (3) If available, a risk needs assessment (RNA) per the (OTI) is to be requested in keeping with existing Prisons policy related to assaultive crimes, including consideration of the extent of the offender's involvement in any assaults and the sentences imposed by the courts for any assaults. Risk assessments will therefore only be completed in compliance with current policy requirements. The psychosocial review shall include an assessment of the risk for violence and recidivism the offender poses to society. The Department may consider such factors as the offender's medical condition, the severity of the offense for which the offender is incarcerated, the offender's prison record, and the release plan.
- (l) The assessments submitted shall be completed within 45 days after receipt of a request of a request, petition, or recommendation for medical release in keeping with statutory requirements.
- (m) The Chief Medical Officer and the Assistant Director of Rehabilitative Services or their designees will make a final recommendation to the Commission on those cases deemed suitable for Medical Release by the Commission.
- (n) The Post-Release Supervision and Parole Commission is the final approving authority for all medical releases.

.0305 REVOCATION OF MEDICAL RELEASE

- (a) Offenders approved for medical release shall be returned to Prisons to await a revocation hearing if:

- (1) The Commission receives credible information the offender has failed to comply with any reasonable condition (in which case the offender will be returned to one of the Diagnostic Centers for processing as a parole violator), or,
 - (2) The offender’s medical condition improves to the point that they would not be eligible for Medical Release if the offender were being considered for Medical Release at that time.
- (b) Revocation of an offender’s Medical Release for either a violation of the conditions or improved medical condition shall not preclude the Department of Public Safety, Prisons and Commission from future consideration for either Medical Release or other type of parole.
- (c) In the event of the death of a former offender on Medical Release, the family or legally responsible party must notify the Commission.



Commissioner of Prisons

June 09, 2022

Date

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