Jail Medical Plans in NC:
Role of the Local Health Director

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Every North Carolina city or county that operates a jail must develop a plan for providing medical care for inmates. This requirement, and the role of the local health director in it, is set forth in GS 153A-225. Regulations in the NC Administrative Code (commonly called the “NC Jail Health Standards”) specify issues the plan must address. See 10A NCAC 14J.1001 -.1004. The NC Jail Health Standards are enforced by the Jails and Detention Section, which is part of the Division of Facility Services, NC DHHS.

This handout identifies four roles for the local health director and addresses some frequently asked questions about the local health director’s role.

1. **Local Health Director Must be Consulted when Jail Medical Plan Developed**

Every NC city or county that operates a jail must develop a plan for providing medical care for inmates. The city or county must develop the plan “in consultation with appropriate local officials and organizations, including the sheriff, the county physician, the local or district health director, and the local medical society.” GS 153A-225(a).

Q. **Who is responsible for ensuring that a jail medical plan is developed?**

A. The law does not specify who is responsible, but in my opinion the person in charge of the jail (the jail administrator) should assume this responsibility. That is the person who may be asked to produce the plan when the Jails and Detention Section conducts its semiannual inspection of the jail.

Q. **Who is the county physician?**

A. Many years ago, there was a NC public health law that permitted county commissioners to employ a county physician and assign duties to him. This is no longer a part of the public health statutes. While I cannot say for certain that there are no longer any county physicians in NC, I am not aware of any.

2. **Local Health Director Must Approve the Jail Medical Plan**

The local health director must approve the plan, if it is adequate to protect the health and welfare of the inmates. The health director must consult with the local mental health, developmental disabilities, and substance abuse authority before approving the plan. The plan must be approved by the governing body (usually the county commissioners).
Q. Does the health director have the discretion to refuse to approve the plan?

A. The statute states the health director “must” approve the plan (after consultation with the MH/DD/SA authority), but only “if it is adequate to protect the health and welfare” of the inmates. This suggests:
   - If the plan is adequate to protect the health and welfare of the inmates, the health director does not have the discretion to disapprove it—he or she must approve it.
   - But if the plan is not adequate, the health director should not approve it.

Q. What are the standards for determining whether the plan is “adequate to protect the health and welfare of the inmates”?

A. North Carolina law does not establish clear legal standards for determining whether a plan is adequate. However, the NC Jail Health Standards require the plan to include policies and procedures addressing certain issues. Thus, at a minimum, the plan must include policies and procedures addressing:
   - health screening of inmates upon admission
   - handling of routine medical care
   - handling of inmates with chronic illnesses or known communicable diseases and conditions
   - administration, dispensing, and control of prescription and non-prescription medications
   - handling emergency medical problems, including emergencies related to dental care, chemical dependency, pregnancy, and mental health
   - maintenance and confidentiality of medical records
   - privacy during medical examinations and conferences with medical personnel

There is more information about the required policies and procedures in the handout, “NC Jail Medical Plans: Basic Duties and Required Contents.”

Furthermore, GS 153A-225(a) identifies three things that the plan must do.
   - The plan must be “designed to protect the health and welfare of the prisoners and to avoid the spread of contagious disease.”
   - It must “provide for medical supervision of prisoners and emergency medical care for prisoners to the extent necessary for their health and welfare.”
   - Finally, it must “provide for the detection, examination and treatment of prisoners who are infected with tuberculosis or venereal diseases.”

In my opinion, a local health director could refuse to approve a plan if the health director believes the plan does not adequately address these statutory goals.

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1 This document is available through the IOG’s NC public health law website. Go to www.ncphlaw.unc.edu, click on “Legal Information by Topic,” then click on “Jail Health.” Scroll down to find the document.
Q. If a jail medical plan is revised, must it be re-approved by the health director?

A. The law is not clear, but I believe the answer is yes, unless the revisions are strictly technical in nature and do not change the substance of the plan. The statute merely requires “a plan” to be developed by the appropriate parties and approved by the local health director and governing board. However, jail medical practices often change, and if they no longer reflect the policies and procedures in the jail medical plan, the plan should be revised. Once the plan is revised, if it is not submitted to the health director and county commissioners for approval, then it is arguably no longer a valid plan. Thus, it is my opinion that whenever substantive changes are made to a jail medical plan, the plan should go through the same development and approval process as the jail’s original medical plan.

3. Local Health Director Might Participate in Annual Review of Plan

The medical plan must be reviewed annually. 10A NCAC 14J.1001(e).

Q. Who must be involved in the annual review?

A. The NC Jail Health Standards do not specify who must be involved in the annual review. In the past, the Jails and Detention Section usually concluded that the requirement was satisfied by the jail health care provider reviewing the plan, but this practice may be changing. To date, there is nothing that requires the local health director to participate in the annual review. However, because health care practice is constantly evolving, a local health director might wish to be involved in periodic reviews to assure that the plan is still adequate.

4. Inmate Deaths Must be Reported to Local Health Director

In the event of an inmate death, GS 153A-225(b) requires the jail administrator to:

- Immediately notify the medical examiner and coroner (if the county has a coroner), and
- Make a written report to the local health director and NC DHHS within 5 days.

Q. How should the health director respond to these reports?

A. The jail health laws do not say how the health director should respond to these reports. However, there may be circumstances when another law applies and the local health director should investigate (if, for example, the death was due to a communicable disease).