DEPARTMENT OF CORRECTIONS

Policy Number:	**500.108**
Title:	**Abortion Healthcare**
Effective Date:	**1/10/23**

PURPOSE: To provide incarcerated people with medical and social services related to an abortion, which is considered an essential component of comprehensive evidence-bases health care.

APPLICABILITY: Minnesota Correctional Facility-Shakopee; incarcerated pregnant adults

DEFINITIONS: None

PROCEDURES:

A. The department, through its medical contractor, provides for abortions.

B. When a patient informs nursing/medical staff that they want an abortion, a nursing staff person schedules an appointment for the patient with a medical practitioner in a timely manner.

C. The medical practitioner discusses the abortion process and offers appropriate social services, and mental health services, if indicated.

D. If the patient decides to have an abortion, they must sign and submit the Request for Abortion Care form (attached). The Request for Abortion Care form is retained in the legal section of the patient's medical record. Health services staff must inform the patient that the procedure cannot be scheduled until the patient completes the form and that the patient has the right to change their mind at any time prior to the procedure.

E. Scheduling
Abortion access is time-sensitive care and must be scheduled and prioritized for services as such. After the patient requests an abortion and signs the Request for Abortion Care form:

1. The contracted medical provider schedules the abortion.

2. Health services staff persons are responsible for arranging transportation if the procedure is being performed offsite.

3. A doula must be provided during the procedure if requested.

F. In the case of a medication abortion, the patient is prioritized for single-cell placement, if available, with access to a sink and toilet, for as long as clinically indicated.

G. Following an abortion, health services staff meet with the patient and make appropriate referrals. The medical practitioner determines how many sick days the patient is authorized, post-procedure, for recovery.

H. The director of clinical operations/designee and psychological services director/designee provide training to nursing and mental health staff on this policy upon hire and annually. Training records are retained in the employee's supervisory file.

INTERNAL CONTROLS:

A. Minnesota Correctional Facility-Shakopee health services documentation of training on this policy is retained in the employee's supervisory file, which is maintained by the registered nurse supervisor.

B. The Request for Abortion Care form is retained in the legal section of the patient's medical record.

ACA STANDARDS: 4-4436

REFERENCES: Minn. Stat. §§ 145.4242; 241.021, subd. 4; 243.212
Policy 301.081, "Response to Resistance, Restraint Systems, and Escape

REPLACES: Policy 500.108, "Adult Offender Abortion," 6/21/18.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: Request for Abortion Care form (500.108A)

APPROVED BY:
Deputy Commissioner, Reintegration and Restorative Services
Deputy Commissioner, Facility Safety and Security
Assistant Commissioner, Organizational and Regulatory Services
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