



AMDA House of Delegates Passes CALTCM's Prison Resolution



At the March 2011 annual meeting of AMDA, the California delegation representing CALTCM presented a successful resolution at the House of Delegates concerning the expected influx of post-prison residents into the long-term care setting. This resolution was crafted primarily by the CALTCM Policy & Professional Services Committee, including Robert Gibson, PhD, JD, Jim Lett, MD, CMD, and Chairman John Fullerton, MD, CMD.

The P&PC Committee worked with CAHF and other California stakeholders in addressing concerns about relocation of convicted criminals—both after completing their sentences and on parole status—into the LTC setting. A significant increase in this population is expected in the years to come, and CALTCM leaders feel it is important to be prepared for this challenge. The resolution directs AMDA leadership to work on a national level with other organizations, including CMS and the AMA, to explore this topic

and begin taking appropriate actions to address the matter. There was strong support for the resolution from other state chapters, and the vote to approve the measure was unanimous. CALTCM is grateful to Drs. Gibson, Lett and Fullerton for taking the lead on this important, forward-looking issue and giving it a national exposure.



GOVERNANCE

Resolutions and Position Statements

Addressing an Expected Increase in Long Term Care Continuum Residents with Criminal/Correctional Histories

Policy E11

Effective Date: March 2011

THEREFORE BE IT RESOLVED, that AMDA - Dedicated to Long Term Care Medicine (AMDA) Board explore the projected needs of the growing aging criminal justices system's inmates and report back to AMDA before promulgating, for example: sample policies, position statements and other information for medical directors in the long-term care continuum (LTCC) relating to this subject including:

1. How to safely manage an expected influx of residents with a criminal history in LTCC settings;
2. Methods to balance the rights of post-prison residents with the rights and safety of other (non-convict) residents in the facility;
3. Identifying possible liabilities for medical directors, attending physicians, and other providers in the LTCC environment; and
4. Developing strategies for the AMDA/State Chapter leadership to reach out to the Centers for Medicare & Medicaid Services (CMS), state agencies and state correctional systems to facilitate appropriate discharge/release assessment and planning, transfer of medical information, and the safe and effective management of post-prison residents in the LTCC;

AND BE IT FURTHER RESOLVED, that AMDA initiate discussions with the CMS on how to resolve conflicts between the unique circumstances of this challenging population and regulatory demands;

AND BE IT FURTHER RESOLVED, that AMDA bring this issue to our American Medical Association for further discussion and input.