**To: Yellowstone County Commissioners** 

From: Ivy Correctional Medicine

Subject: Options for Medical Coverage in the 72-Hour Hold Unit

Date: 09/11/2025

## **Executive Summary**

Yellowstone County's new 72-hour hold unit will significantly increase bookings—potentially tripling the current daily intake. While the medical complexity of this population remains uncertain, Ivy's original proposal anticipated a high number of patients withdrawing from substances, managing uncontrolled chronic conditions, or experiencing psychiatric crises. We understand the County anticipates that most individuals will be stable.

In response, Ivy has developed two service options tailored to a less acutely ill population while still providing appropriate medical oversight given the unit's high turnover. Both options rely on detention staff to monitor patients between nursing rounds, with Ivy nurses conducting rounds twice daily, reviewing new intakes, seeing patients, and performing medication pass. Ivy staff would also respond when called by detention officers. The only difference between the two options is who conducts the initial booking questionnaire—an Ivy nurse (Option 1) or detention staff (Option 2).

To safeguard against unanticipated medical complexity, a call-back fee structure is proposed to allow resources to scale up if utilization between rounds proves higher than expected. This approach keeps baseline costs lower while ensuring that care can expand to meet patient needs.

## **Background and Context**

The new 72-hour hold unit represents an operational shift for YCDF. At full capacity, the unit could see as many as 20,000 bookings annually, compared with 6,625 bookings last year at the jail. Because the average length of stay is expected to be less than 24 hours, turnover will be rapid, prompting lvy to develop separate systems, policies, and procedures for the 72 hour hold unit and allocate appropriate resources to manage the turnover.

lvy's original proposal assumed a high-acuity population and therefore included 24/7 onsite coverage. That model is not included here. Instead, the two options below are offered at lower cost by limiting continuous medical presence in the unit. Both options preserve key safeguards: twice-daily nursing rounds, structured medication pass, suicide evaluation, and the ability to call lvy staff when concerns arise. The original proposal presented a plan for only the first phase - up to 20 inmates. The two options presented here are for the fully open operation of the unit.

## **Model Comparison**

	Option 1 Nursing Rounds + Intake	Option 2 Nursing Rounds Basic
Booking Questionnaire	Ivy Staff	Detention Officers
Nursing Model	Twice-daily rounds + on-call	Twice-daily rounds + on-call
Acute Triage	Detention Officers	Detention Officers
Med Pass	Ivy Staff	Ivy Staff
Provider Assessment/Treatment	Med Approval + On Call	Med Approval + On Call
SI Clearance	Ivy Staff	Ivy Staff
Base Cost	\$658,793	\$461,166
Nurse Call-Back	\$100	\$100
Provider Call-Back (0800-1700)	\$200	\$200
Provider Call-Back (1700-0800)	\$400	\$400

# **Components of Care**

### **Booking Questionnaire**

At intake, a condensed medical screening must be conducted.

- **Option 1**: Ivy staff perform intake 24/7, ensuring medical questions are asked and recorded at booking.
- Option 2: Detention officers conduct the intake screen. Ivy would provide training to
  officers, including clear guidance on when to request an immediate medical consult.

### **Nursing Model & Acute Triage**

In both options, Ivy nurses conduct rounds twice daily before med pass. During rounds, they:

- See all patients booked in the prior 12 hours, address short-term medical needs, and prepare medications for distribution.
- Address nursing-level concerns raised by officers for inmates that have been in the unit for more than 12 hours.

Between rounds, detention staff are responsible for identifying urgent needs. Ivy will provide officer training to support this role. If nurses are called in between rounds, a call fee is assessed.

#### Med Pass

In both models, Ivy staff conduct medication pass twice daily.

#### **Provider Assessment/Treatment**

Providers must approve medications and handle needs beyond nursing scope.

- Ivy providers review medications and weigh in on patient care remotely during nursing rounds.
- Providers are available for call-backs as needed (\$200 during business hours, \$400 after hours).

#### **Suicidal Ideation Clearance**

In all options, Ivy providers or therapists conduct suicide clearances, as required by policy.

#### Conclusion

Both models maintain core safeguards—twice-daily nursing rounds, medication management, and suicide clearance—while relying on detention staff to monitor patients between rounds. Option 1 adds Ivy staff at intake to reduce the risk of missed information, while Option 2 lowers costs further by shifting that role to detention staff, supported by Ivy training. In either case, the call-back system allows resources to scale if patient needs are higher than expected, keeping baseline costs predictable while ensuring flexibility.

Ivy Correctional Medicine values the opportunity to collaborate with Yellowstone County on this new unit. Our aim is to strike the right balance between patient care and fiscal responsibility, and we are committed to being a responsive, long-term partner as the unit develops.