

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.10.05	Page 1 of 5
	Original Effective Date: 02/15/00	New Effective Date: 04/04/16
	Supersedes: 500.10.05	Dated: 09/11/13
	Administrator's Approval: Jim Schwochert, Administrator	
Required Posting or Restricted:		
<input checked="" type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
Chapter: 500 Health Services		
Subject: On-Call Physician Coverage		

POLICY

The Division of Adult Institutions shall ensure a physician is available for telephone consultation for all facilities 24 hours per day.

REFERENCES

DAI Policy 500.50.02 – Health Care Record Format, Content and Documentation

DAI Policy 500.50.07 – Records Retention/Disposition Authorizations

DEFINITIONS, ACRONYMS AND FORMS

Advanced Care Provider (ACP) – Provider with prescriptive authority.

BHS – Bureau of Health Services

DAI – Division of Adult Institutions

DOC – Department of Corrections

DOC-3021 – Progress Notes

DOC-3023 – Prescriber's Orders

DOC-3408 – Log for On Call Physician

DOC-3415 – Physician's Telephone Consultation

DOC-3437 – Nurse's Telephone Consultation

DOC-3553 – Request to Exchange Physician On Call Schedules

DOC-3639 – Nursing Encounter Protocols

HSU – Health Services Unit

LTE – Limited Term Employee

RDA – Records Retention/Disposition Authorization

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Situation, Background, Assessment, Recommendation (SBAR) – A technique used for prompt and appropriate communication in health care.

WCCS – Wisconsin Correctional Center System

WWCS – Wisconsin Women’s Correctional System

PROCEDURES

I. Physician’s Availability

- A. Licensed Nurses shall have access to a physician by phone when the ACP is not on site.
- B. LTE and Agency Licensed Nurses shall have the same access to a physician.

II. DAI Facilities Call Coverage

- A. The DAI Medical Director shall plan and provide the physician on-call schedule. BHS Central Office ensures the distribution of the on-call schedule to all facilities.
- B. Routine schedule changes
 1. The physician who requests a change shall complete DOC-3553 – Request to Exchange Physician On-Call Schedules.
 2. The physician who agrees to the change shall also sign the DOC-3553.
 3. The completed DOC-3553 shall be submitted to the Medical Director two weeks prior to the time requested off (the beginning of the affected on call shift).
 4. The change will not be valid until both physicians receive a signed approved copy of the request.
- C. Emergency call schedule changes
 1. Notify the Medical Director if unable to provide on call coverage due to an emergency.
 2. Notify the Bureau Director or Associate Medical Director if unable to reach the Medical Director.
 3. BHS Central Office shall contact another physician.
- D. Communication of Schedule
 1. BHS Central Office will notify the HSUs and Nurse Clinician 4s for WCCS and WWCS facilities of the physician on call schedule by sending and faxing a calendar at least every six months to the HSUs and the Nurse Clinician 4s. This includes the appropriate contact numbers.
 2. The on call physician is included on the Central Office staff weekly itinerary and the on call calendar is sent with the itinerary.
 3. BHS Central Office shall notify the HSUs and Nurse Clinician 4s for WCCS and WWCS facilities of any changes in coverage by memo which is faxed and e-mailed.

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III. Responsibility of Coverage

- A. Medical concerns.
- B. Dental emergencies.
- C. Mental health emergencies which cannot be handled by Psychological Services staff.
- D. The on call physician may contact the Mental Health Director, Psychiatry Director or Medical Director for consultation for mental health emergencies when indicated.

IV. Contacting the On Call Physician

- A. The on call physicians are provided pagers and cellular telephones. Utilize the numbers in order according to the BHS On-Call List. Contact numbers may include pagers, cell phones and home phones.
- B. The on call physician shall return calls within 15 minutes of time received or as soon as possible if in the midst of handling other calls.
- C. The nurse may contact the Medical Director or one of the Associate Medical Directors if the on call physician does not return the call.
- D. If on site, the nurse shall assess the inmate patient, utilize professional clinical judgment and existing nursing protocols prior to contacting the on call physician for consultation.
- E. The on-site nurse shall have the medical chart available for reference.
- F. The nurse shall provide complete assessment findings, including at a minimum:
 - 1. Vital signs.
 - 2. Pertinent signs and symptoms.
 - 3. Relevant lab findings.
 - 4. Relevant history.
- G. SBAR is an example of an effective technique that can be used for on call communication.

V. Documentation

- A. Nursing on site:
 - 1. Record assessment findings, information provided and directions received from the on call physician on DOC-3639 – Nursing Encounter Protocols and/or DOC-3021 – Progress Notes.
 - 2. Record any orders as telephone orders on DOC-3023 – Prescriber's Orders.

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- B. Nursing not on site:
 - 1. Record assessment findings, information provided, and directions received from the on call physician on DOC-3437 – Nurses Telephone Consultation.
 - 2. Record telephone orders on DOC-3023 – Prescriber’s Orders when next on-site.

- C. On call Physician
 - 1. Record all telephone contacts on DOC-3408 – Log for On Call Physician.
 - 2. Complete DOC-3415 – Physician’s Telephone Consultation if the on call physician feels it is necessary or chooses to do so.
 - 3. Fax or global scan DOC-3415 – Physician’s Telephone Consultation, if completed, to the facility that initiated the contact.
 - 4. Submit DOC-3408 – Log for On Call Physician to BHS Central Office where they are filed and retained for seven years in accordance with DAI Policy 500.50.07.

VI. Follow-up

- A. HSU staff shall file the DOC-3415 – Physician’s Telephone Consultation in the medical chart according to DAI Policy 500.50.02 - Health Care Record Format, Content and Documentation if completed by the on call physician.

- B. Facility ACP
 - 1. Review and countersign the telephone orders on the next working day.
 - 2. Resume responsibility for the patient’s care and write orders as necessary for continuation of care.

VII. The BHS Central Office On-Call Schedule that is distributed to each facility describes the on-call coverage between 7:45 AM and 4:30 PM on weekdays when no ACP is on-site.

Bureau of Health Services: _____
 James Greer, Director

Date Signed: _____

 Ryan Holzmacher, MD, Medical Director

Date Signed: _____

 Mary Muse, Nursing Director

Date Signed: _____

Administrator’s Approval: _____
 Jim Schwochert, Administrator

Date Signed: _____

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.10.05	Page 5 of 5
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Physician Coverage		
Will Implement <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval:		

REFERENCES

DEFINITIONS, ACRONYMS, AND FORMS

FACILITY PROCEDURE

- I.
 - A.
 - B.
 - 1.
 - 2.
 - a.
 - b.
 - c.
 - 3.
 - C.

II.

III.

RESPONSIBILITY

I. Staff

II. Inmate

III. Other