DOC-1024 (Rev. 02/2009)

OF WISCOA
THINENT OF CORRECT

DIVISION OF ADULT INSTITUTIONS

POLICY AND PROCEDURES

70-1024 (NEV	. 02/2009)		
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		Original Effective Date:	New Effective Date:
OF WIS CO.	DIVISION OF ADULT INSTITUTIONS POLICY AND	05/21/10	04/08/24
		Supersedes: 500.11.01	Dated: 01/09/23
		Administrator's Approval: Sarah Cooper, Administrator – 03/08/24	
	PROCEDURES	Required Posting or Restricted:	
		PIOC X All State	ff Restricted
Chapter:	500 Health Services		
Subject: Credentials and Professional Development			

POLICY

The Division of Adult Institutions shall ensure the facility's qualified health care professionals are legally eligible to perform their clinical duties and shall ensure all qualified health care professionals maintain current clinical knowledge and skills through professional development.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018, P-C-01 Credentials, P-C-03 – Professional Development

Wisconsin Statutes s. 440.08 - Credential Renewal

Wisconsin Statutes s. 448.53(3) – Licensure of Physical Therapists

Wisconsin Administrative Code Ch. DE 2 – Licensure

Wisconsin Administrative Code Ch. DHS 129 – Certification of Programs for Training

and Testing Nurse Aides, Medication Aides and Feeding Assistants

Wisconsin Administrative Code Ch. MED 8 – Physician Assistants

Wisconsin Administrative Code Ch. MED 13 – Continuing Medical Education for Physicians

Wisconsin Administrative Code Ch. MED 14 – Biennial Registration

Wisconsin Administrative Code Ch. N 5 – Renewal of License

Wisconsin Administrative Code Ch. N 6 – Standards of Practice for Registered Nurses And Licensed Practical Nurses

<u>Wisconsin Administrative Code Ch. N 7</u> – Rules of Conduct

Wisconsin Administrative Code Ch. N 8 - Certification of Advanced Practice Nurse **Prescribers**

<u>Wisconsin Administrative Code Ch. PT 8</u> – Biennial License Renewal

Department of Health Services, Certification of Programs for Training and Testing Nurse Assistants, Home Health Aides and Hospice Aides

Nurse Aide Training-Requirements for In-Services – Bureau of Quality Compliance memo BQC 94-016

Nursing Assistant/Home Health Aide/Hospice Aide Employment Eligibility – Bureau of Quality Compliance memo BQC-93-024

42 CFR 483.75(e) (8)

Attachment A – Required Health Care Credentials of Health Care Staff

DEFINITIONS, ACRONYMS AND FORMS

AED – Automated external defibrillator

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BHS – Bureau of Health Services

CCHP – Certified Correctional Health Professional

CEU – Continuing Education Units

<u>Credential</u> – Evidence of competence, qualification or achievement in a health care field. Credentials may include educational degrees, certification, registration and licensure. Credentials required for DOC employment are outlined in Attachment A.

<u>CPR</u> – Cardiopulmonary Resuscitation

<u>DOC</u> – Department of Corrections

DOC-3363 – Health Services Employee Training Record

HSM – Health Services Manager

<u>NC4</u> – Nurse Clinician 4 refers to the clinician who has oversight of operations at their designated Centers within the Center System.

NCCHC – National Commission on Correctional Health Care

PIOC – Persons in Our Care

Responsible Health Authority-Systems (RHA-S) – The Division of Adult Institutions shall recognize the Director of Healthcare Administration as the Responsible Health Authority for the Department of Corrections at the systems level. The Director of Healthcare Administration ensures that the system maintains a coordinated system of healthcare delivery.

Responsible Health Authority-Local (RHA-L) - The Director of Healthcare Administration shall designate daily facility level operations to the on-site Health Services Manager within DOC Institutions and the designated Nurse Clinician 4 within the Center System for coordination of healthcare delivery at the local level.

<u>Verification Staff</u> – DOC staff designated in Attachment A to verify and maintain written evidence of credentials for health care staff.

PROCEDURE

I. Hiring

A. All qualified health care professionals shall have credentials and provide services consistent with the licensure, certification, and registration requirements.

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- B. Supervisors of credentialed staff shall obtain documentation of required credentials as part of the hiring process for prospective employees as outlined in Attachment A.
- C. The Director of Healthcare Administration/designee shall ensure that new hires undergo a credential verification process that confirms current licensure, certification, or registration.
- D. The credential verification process includes inquiry regarding sanctions or disciplinary actions for State Board and, for prescriber, the National Practitioner Data Bank as described in Attachment A.
- E. The Director of Healthcare Administration/designee shall maintain verification of current credentials for all qualified health care professionals at a readily accessible location.
- F. Specialists providing on-site or telehealth healthcare services shall have appropriate licenses and certification on file.
- G. The hiring authority, in consultation with Director of Healthcare Administration, shall review on an individual basis, prospective employees with any limitation or restriction on required credentials to determine suitability for hire. A license specifically restricting practice only to correctional facilities is not allowed.
- H. Agency staff shall be subject to the same verification process as DOC employees. The employing agency and/or agency employee shall provide written documentation of required credentials to verification staff prior to starting work.
- I. The Interstate Nurse Licensure Compact is in effect in Wisconsin and several other states. Under the terms of the Compact, a nurse licensed in a compact state may practice in Wisconsin without separate licensure.

II. Maintaining Licensure

- A. Healthcare staff are individually responsible for maintaining credentials required for employment as outlined in Attachment A.
- B. Healthcare staff shall provide copies of any renewals of licensure, certification or registration to designated verification staff.
- C. Supervisors (HSM and Clinical Supervisors) shall maintain a working file of credentials for each employee, ensure credentials are kept current, and forward confirmation of credentials to Central Office staff as required in Attachment A.

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D. Healthcare staff shall immediately report to their supervisor any limitation, restriction, suspension or expiration of a required credential. Any of these events may result in an employee being unfit for duty.

III. Scope of Practice

Healthcare staff shall not function or perform tasks beyond those permitted by their credentials and scope of practice.

IV. Professional Development

- A. All health care professionals and health staff shall possess and acquire additional knowledge, on-going knowledge and skills appropriate for their role in health care delivery approved by the RHA-S or designated clinician.
- B. It is the responsibility of all part-time and all full-time health professionals to possess and maintain 12 hours of continuing education annually (per calendar year).
- C. Continuing education may include:
 - 1. Staff development experiences include:
 - a. In-service training.
 - b. Education presented by guest lecturers.
 - c. Attendance at health educational programs presented at a DOC facility or conferences in the community by universities, hospitals or other health care professionals.
 - d. Participation in programs such as NCCHC that provide formal continuing education credits.
 - 2. Self-study programs and approved internet resources may be part of continuing education but may not constitute the whole program. At least half of the required courses must be in class presentations and lecture learning.
 - 3. Programs presented on site by staff members or by a member of the health staff, BHS management and security programs for health staff training are appropriate. No more than two hours of security training may count for the 12 hours of health care training.
 - 4. Professional staff who are required by state license to maintain continuing education annually to maintain licensure can utilize licensure for the year of license renewal.
 - 5. Current certification as a Certified Correctional Health Professional (CCHP).
- D. It is recommended to have presentations on the special health needs of adolescents as topics for periodic in-service in facilities that provide care for adolescents.

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- E. All health professionals and health care staff having direct patient contact shall possess a current certification in CPR by the American Heart Association and training in use of the AED.
- F. All health care staff shall be trained in Infection Control and Blood Borne Pathogens on an annual basis.
- G. CCHP is recommended for health care professionals in a correctional setting.

V. Training Documentation

- A. Compliance with continuing education shall be documented. Staff may use the DOC-3363, as applicable.
- B. Compliance for staff education shall be evaluated on an annual basis by the HSM.
- C. The RHA-S and RHA-L maintain a list of the state's continuing education requirements for each category of licensure of all qualified healthcare professionals.

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.11.01	Page 6 of 7
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Credentials		
Will Implement As written	With below procedures for facility	mplementation
Warden's/Center Superintendent's Approval:		

REFERENCES

DEFINITIONS, ACRONYMS AND FORMS

FACILITY PROCEDURE

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