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# DIVISION OF ADULT INSTITUTIONS

# POLICY AND PROCEDURES

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Original Effective Date:	New Effective Date:		
08/01/97	03/13/23		
<b>Supersedes:</b> 500.30.02	Dated: 03/01/21		
Administrator's Approval: Sarah Cooper, Administrator – 2/23/23			
Required Posting or Restricted:			
X PIOC X All Staff Restricted			

Chapter: 500 Health Services

Subject: Specialty Consultations

### **POLICY**

All Division of Adult Institution facilities shall develop procedures to ensure continuity of care when off-site providers, such as specialty consultation, emergency services and inpatient services make recommendations.

#### REFERENCES

<u>Standards for Health Care in Prisons</u>, National Commission on Correctional Health Care, 2018 P-E-09 – Continuity, Coordination, and Quality of Care During Incarceration; 2018 P-D-08 – Hospital and Specialty Care; 2018 – F-01 Patients with Chronic disease and Other Special Needs

<u>DAI Policy 500.10.12</u> – Prior Authorization Guidelines for Non-Urgent Care (Class III) <u>DAI Policy 500.80.03</u> – Medication Reconciliation – Continuation of Medication Compact Drug Formulary

### **DEFINITIONS. ACRONYMS AND FORMS**

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

**DOC** – Department of Corrections

<u>DOC-3001</u> – Off-Site Service Request and Report

<u>DOC-3528</u> – Change of Consultant Recommendations

ED – Emergency Department

HCR - Health Care Record

<u>HSU</u> – Health Services Unit /2023

<u>Off-Site/Contract Provider</u> – Physicians, physician assistants, nurse practitioners, registered nurses, optometrists, dentists, physical therapists, occupational therapists, respiratory therapists, speech therapists, x-ray personnel or other health care providers who are not permanent DOC employees who provide health care to patients.

RHA - Responsible Health Authority

RN – Registered Nurse

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Specialty Care – Specialist provided healthcare

WRC - Wisconsin Resource Center

#### **PROCEDURES**

#### I. General Guidelines

- A. Hospitalization and specialty care are available to patients who need these services as determined by the DOC ACP. The DOC ACP shall consider outside recommendations and initiate orders as medically necessary.
- B. For emergency room consultations, the ACP shall be contacted before orders are initiated.

## II. Ordering Specialty Consultation

- A. Specialty Consultations require an order and prior authorization if indicated.
  - 1. The ACP shall determine the need for off-site/specialty care and discuss this with the patient.
  - 2. All appointments shall be ordered in the HCR.
  - 3. Processes shall be in place to assure timely scheduling of off-site visits.
  - 4. Timeframe delays or changes to scheduled appointments shall be communicated with an ACP and RHA.
  - 5. All communication between facility and off-site provider regarding scheduling of an appointment shall be documented in HCR.
- B. Specialty consultation requests shall be processed as indicated in DAI Policy 500.10.12 Prior Authorization Guidelines for Non-Urgent Care (Class III) prior to making the appointment.
- C. The referring ACP shall provide the following information:
  - 1. Referral instructions.
  - 2. Relevant symptoms/problems/diagnosis.
  - 3. Questions/outcomes to be addressed by the evaluation.
  - 4. An appropriate timeframe for the appointment. If timeframe not specified scheduler shall obtain the timeframe from the ACP and document the communication in the HCR.
- D. Ensure a "Transfer Patient to Emergency Room" order is placed for an Emergency Room visit by an ACP or RN.

# III. Scheduling Specialty Consultation

The HSU manager shall designate an appropriate HSU staff member(s) to schedule consultations with clinic, hospital or telemedicine providers.

A. For specialists who provide services on-site at a site for several facilities (e.g. DOC Ortho Clinic, Optical services, Audiology), contact the HSU to schedule the appointment.

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B. Dental panoramic x-rays are available at several facilities. Contact the dental supervisor, or designee to determine which facilities have panoramic x-ray capability.

### IV. Providing Information to Consultant/Provider

- A. An ACP shall provide the medically necessary information for health staff to complete the top portion of DOC-3001 Offsite Service Request and Report. The designated HSU staff member shall:
  - 1. Schedule required lab tests, x-rays or any other appointments prior to the specialty appointment.
  - 2. Attach documents as identified by the ACP.
  - 3. Attach a copy of the Compact Drug Formulary if the appointment is in the community.
  - 4. Place all documents in a sealed envelope, labeled with:
    - a. Patient's name and DOC number.
    - b. Name, address and telephone number of clinic.
    - c. Date and time of appointment.
    - d. Name of the practitioner who will be seeing the patient.
  - 5. Exceptions may be made for frequent ongoing appointments (e.g., radiation therapy, speech therapy). A mechanism for communication shall be developed by the HSU with the off-site provider (e.g., one DOC-3001 Offsite Service Request and Report per week).
  - 6. A RN shall complete this section for emergencies. If time does not permit documenting all the information, the information shall be communicated to the ED via telephone while the patient is in transit.
  - 7. The on-call RN shall communicate with the ED to provide continuity of care if they do not have access to a DOC-3001.
  - 8. A supply of blank DOC-3001 Off-Site Service Request and Report shall be kept by the Security Supervisor/designee for use when there is no RN onsite so that recommendations can be returned to the facility with the patient.

# V. Follow-up After Appointment with Specialist, ER Visits and Inpatient Hospitalizations

- A. Any patient returning from an off-site visit shall be seen by a RN.
  - 1. Recommendations and the plan of care shall be reviewed with the patient.
  - 2. The nurse shall inform the patient that the ACP will be reviewing the recommendations and determine the definitive plan of care.
  - 3. Review the DOC-3001 Off-Site Service Request and Report, ER report or hospital discharge summary with the patient upon return to the facility, or the next working day if the patient returns when there is not a RN on-site.
  - 4. Provide the patient with any necessary education and instructions for self-care including restrictions and follow-up.
- B. Recommendations from off-site providers or contract providers shall be reviewed and ordered by a DOC ACP before implementation.
  - 1. A RN shall contact a DOC ACP for approval and orders prior to implementation of any outside recommendations, including medications.

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- Security Supervisor/designee shall contact the on-call nurse upon patient return when an RN is not on-site to review DOC-3001 – Offsite Service Request and Report.
- 3. The on-call physician shall be contacted if recommendations require implementation prior to the ACP being on-site, as determined by an RN.
- 4. Some recommendations require prior-authorization before implementation according to DAI Policy 500.10.12.
- C. Inpatient hospital stays require orders to be reviewed and reconciled upon return. See DAI Policy 500.80.03.
- D. If a RN is not onsite, the on-call RN shall be contacted prior to delivering any medications to the patient. Medications may be obtained before returning to the facility depending on the site.
- E. The DOC ACP shall review, and authenticate the DOC-3001 Off-Site Service Request and Report and any other accompanying paperwork.
  - 1. All DOC-3001s along with attached dictations shall be scanned into the patient health record and assigned to an ACP to review electronically.
  - 2. Recommendations are reviewed for appropriateness of use in the correctional environment as identified in DOC policy and procedure.
- F. Deviation from off-site recommendations/orders require rationale and shall be documented in the HCR. If the ACP orders differ from recommendations, the patient shall be informed.

# DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name			
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New Effective Date: 00/00/00	Supersedes Number:	Dated:	
Chapter: 500 Health Services			
Subject: Specialty Consultations			
Will Implement As written With below procedures for facility implementation			
Warden's/Center Superintendent's Approval:			

## **REFERENCES**

# **DEFINITIONS, ACRONYMS AND FORMS**

## **FACILITY PROCEDURE**

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A.

1.

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B.

C.

II.

A.

B.

C.