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DIVISION OF ADULT INSTITUTIONS

POLICY AND PROCEDURES

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		DAI Policy #: 500.30.11	Page 1 of 4		
OF WISCOADE		Original Effective Date:	New Effective Date:		
	DIVISION OF ADULT	05/01/89; 01/01/09	01/17/24		
	INSTITUTIONS	Supersedes: 500.30.11	Dated: 03/01/21		
	POLICY AND	Administrator's Approval: Sarah Cooper, Administrator – 12/22/23			
PROCEDURES		Required Posting or Restricted:			
		X PIOC X All Staf	f Restricted		
Chapter: 500 Health Services					
Subject: Daily Handling of Non-Emergency Requests for Health Care					
Guidance Document Yes X No					

POLICY

The Division of Adult Institutions shall ensure all PIOC non-emergent health care needs are met.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018 P-E-07 Non-Emergency Health Care Reguests and Services DAI Policy 500.00.04 – Reporting Health Care Concerns to On-Call Nursing

Wis. Stat. s. 302.38 – Medical Care of Prisoners

Wis. Stat. s. 302.385 – Correctional Institution Health Care

Wis. Stat. s. 302.386 - Medical and Dental Services for Prisoners and Forensic Patients

DEFINITIONS, ACRONYMS AND FORMS

Advanced Care Provider (ACP) – A provider with prescriptive authority including, physicians, nurse practitioners, physician assistants, dentist, and optometrists.

Clinical setting – An examination or treatment room appropriately supplied and equipped to address the patient's health care needs.

Daily – Seven days a week including holidays.

DOC-3035 – Health Service Request and Copayment Disbursement Authorization

Health Care Request – any oral or written petitions for medical, dental or mental health services.

HSU - Health Service Unit

PIOC – Persons in Our Care

Qualified Health Care Professional – Includes physicians, physician assistants, nurse practitioners, registered nurses and mental health staff who are permitted by law within the scope of their professional practice acts to evaluate and care for patients.

RN – Registered Nurse

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Chapter: 500 Health Services		
Subject: Daily Handling of Non-Emergency Requests for Health Care		

<u>Sick call</u> – Evaluation and treatment of a patient in a clinical setting by a qualified health care professional.

<u>Triage</u> – Review and prioritization of requests for health care.

PROCEDURES

I. Triaging Requests for Health Care

- A. All PIOC, regardless of housing assignment, are given the opportunity to submit verbal or written health care requests.
- B. Health care requests are collected, triaged, and prioritized at least daily by qualified health care professionals when on-site.
- C. Not every written request requires a face-to-face evaluation (e.g., copies, extra blanket, religious diet, copayment question).
- D. Requests for care identifying symptoms requiring a face-to-face encounter shall be conducted by a registered nurse within 24 hours of receipt. The registered nurse shall review the request and provide a response and plan of care and follow-up that is appropriate for the patients' healthcare needs.
- E. PIOC shall be evaluated in a clinical setting as indicated.
- F. All aspects of the health care request process, from review and prioritization to subsequent encounter shall be documented and dated.
- G. The frequency and duration of response to health care requests is sufficient to meet the health needs of the PIOC population.
- H. The form to request medical care is DOC-3035 Health Service Request and Copayment Disbursement Authorization. If a PIOC uses another form to request medical care, it shall be treated as a DOC-3035 for responding and filing.
- For facilities without daily staffing, a process shall be established to ensure PIOC requests for health care can be addressed and triaged in a timely manner.
- J. An on-call program shall be in place to ensure nursing coverage in the absence of on-site coverage. Contact on-call nursing staff for direction per DAI policy 500.00.04.
- K. PIOC can access the health care system by requesting an appointment, writing their requests on slips that are dropped into a locked box, handing slips to health staff, or verbally through staff calling HSU.

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Chapter: 500 Health Services			
Subject: Daily Handling of Non-Emergency Requests for Health Care			

- L. Verbal requests for medical care require a nurse to speak directly with the PIOC.
- M. In all cases, care should be taken to protect the confidentiality of PIOC health concerns.

II. Sick Call

- A. All PIOC, regardless of custody status, have access to regularly scheduled sick call.
- B. Routine sick call shall be scheduled a minimum of five days per week at facilities with five to seven-day coverage. Exceptions may be made for holidays, training days and other activities.
- C. Registered nurses shall make timely assessments in a clinical setting and provide treatment according to nursing protocols and standards of practice.
- D. When the patient has been seen in sick call more than two times with the same complaint and has not seen an ACP, a timely referral/consultation with an ACP shall be made.

III. Documentation and Forms Management

- A. All health request forms shall be date stamped when received in HSU and have a disposition which includes a legible name of person responding.
- B. Written health requests shall be scanned into the healthcare record.
- C. HSU shall return a response of the written health care request to the PIOC in a confidential manner within 24 hours of receipt.

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name					
Original Effective Date:	DAI Policy Number: 500.30.11	Page 4 of 4			
New Effective Date: 00/00/00	Supersedes Number:	Dated:			
Chapter: 500 Health Services					
Subject: Daily Handling of Non-Emergency Requests for Health Care					
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.

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B.

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A.

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