

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.27	Page 1 of 5
	Original Effective Date: 05/15/02	New Effective Date: 11/01/17
	Supersedes: 500.30.27	Dated: 07/18/14
	Administrator's Approval: Jim Schwochert, Administrator	
	Last Reviewed, No Changes: 07/13/16	
Required Posting or Restricted:		
<input checked="" type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
Chapter: 500 Health Services		
Subject: Medical Classification Report		

POLICY

Division of Adult Institution facilities shall ensure information regarding significant special needs is communicated.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2014, P-A-08 Communication on Special Needs Patients.

DEFINITIONS, ACRONYMS, FORMS

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

DOC – Department of Corrections

DOC-3050 – Medical Classification

DOC-3500A – Medical Clearance for County Jails Contract Bed

DOC-3500C – Northern Center Placement

Electronic Control Device – A device that produces an electrical shock that can disorient, temporarily immobilize and stun a subject without causing permanent injuries.

HSU – Health Services Unit

Incapacitating Chemical Agents – A commercially manufactured substance (chemical agent) for use by security in the use of non-deadly force for the purpose of temporary control of a subject or area. They include chloroacetophenone or “CN”, O-chlorobenzylidene malonontrite, or “CS”, oleoresin capsicum or “OC” and any other commercially manufactured chemical agent approved by the Department of Corrections. This is the definition to be used solely for the purposes of this policy/procedure. It is a combination of definitions contained in Wisconsin Administrative Codes Ch. 306 and 376.

Northern Centers – Flambeau Correctional Center, Gordon Correctional Center and McNaughton Correctional Center

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PRC – Program Review Committee

WICS – Wisconsin Integrated Corrections System

POLICY

I. General Guidelines

- A. Information regarding significant special needs necessary to communicate may include:
 1. Housing assignments.
 2. Work assignments.
 3. Program assignments.
 4. Disciplinary measures.
 5. Admissions to and transfers from facilities.

 - B. DOC-3050 – Medical Classification is utilized to communicate the following:
 1. Physical activity level. Only one activity level can be identified.
 2. Requirement for HSU on site.
 3. Eligibility for placement in a Jail Contract Bed
 4. Eligibility for Placement in Northern Centers
 5. Special conditions including:
 - a. Significant visual impairment.
 - b. Significant hearing impairment.
 - c. Respiratory condition consideration prior to work placement.
 - d. Contraindication to operate machinery, drive, or use dangerous tools.
 - e. Contraindication to electronic control devices.
 - f. Contraindication to incapacitating agents.
 - g. Excessive, frequent dizziness, vertigo or balance difficulties.
 - h. Confined to wheelchair.
 - i. Wheelchair for long distances.
 - j. Restricted use of limbs.
 - k. Pregnancy.
 - l. Medical hold requiring the inmate patient to remain at the current facility.

 - C. Designations shall remain in effect until there is a change in the inmate patient's health status for an extended period of time as determined by the facility ACP or HSU, when appropriate.

 - D. Short-term modifications in activity level shall be communicated according to facility procedure based on discussions with PRC as to when a new DOC-3050 – Medical Classification is necessary.
- ### **II. Completion, Data Entry and Filing of DOC-3050 – Medical Classification**
- A. The initial DOC-3050 is completed by an ACP at the time of the initial physical examination at intake.

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- B. A new DOC-3050 shall be completed when there is a change in the inmate patient's health status for an extended period of time.
- C. The original DOC-3050 is filed in the Data Base section of the medical chart.
- D. A copy of the DOC-3050 shall be routed for data entry into WICS by the HSU. Once data entry is complete, the copy shall be destroyed.

III. Medical Clearance for Jail Contract Bed

- A. DOC-3500A shall be completed for inmates considered for Jail Contract bed placement.
- B. Designations shall remain in effect until there is a change in the inmate patient's health status for an extended period of time as determined by the facility ACP or HSU, when appropriate.

IV. Medical Clearance Northern Center Placement

- A. Doc-3500C shall be completed for inmates considered for placement in a northern center as appropriate.
- B. Designations shall remain in effect until there is a change in the inmate patient's health status for an extended period of time as determined by the facility ACP or HSU, when appropriate.

V. Completion, Data Entry and Filing of DOC3500A – County Jail Contract Bed placement

- A. The initial DOC-3500A is completed by an ACP at the time of the initial physical examination at intake.
- B. A new DOC-3500A shall be completed when there is a change in the inmate patient's health status for an extended period of time or at the request of the Bureau of Offender Classification and Movement staff.
- C. The original DOC-3500A is filed in the Data Base section of the medical chart.
- D. A copy of the DOC-3500A shall be routed for data entry into WICS by the HSU. Once data entry is complete, the copy shall be destroyed.

VI. Completion, Data Entry and Filing of DOC-3500C – Northern Center Placement

- A. The initial DOC-3500C is completed by an ACP at the time of the initial physical examination at intake.
- B. A new DOC-3500C shall be completed when there is a change in the inmate patient's health status for an extended period of time or at the request of the Bureau of Offender Classification and Movement staff.

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C. The original DOC-3500C is filed in the Data Base section of the medical chart.

D. A copy of the DOC-3500C shall be routed for data entry into WICS by the HSU. Once data entry is complete, the copy shall be destroyed.

Bureau of Health Services: _____ **Date Signed:** _____
James Greer, Director

_____ **Date Signed:** _____
Medical Director

_____ **Date Signed:** _____
Mary Muse, Nursing Director

Administrator's Approval: _____ **Date Signed:** _____
Jim Schwochert, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.30.27	Page 5 of 5
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Medical Classification Report		
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