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|  <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p> | DAI Policy #: 500.31.37 | Page 1 of 5 |
| | Original Effective Date: 09/01/16 | New Effective Date: 09/01/16 |
| | Supersedes: N/A | Dated: N/A |
| | 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: Dialysis Services Referral/Admission | | |

POLICY

The Division of Adult Institutions shall provide access to dialysis treatment for inmate patients identified to require renal replacement therapy.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care 2014, P-G-02 – Patients with Special Health Needs
Standard for Health Services in Prisons, National Commission on Correctional Health Care 2014, P-D-05 – Hospital and Specialty Care
DAI Policy 500.30.06 – Transfer of Inmate Patient
DAI Policy 500.31.12 – Peritoneal Dialysis Inmate Patient Training and Ongoing Monitoring
DAI Policy 500.50.24 – Dialysis Record

DEFINITIONS, ACRONYMS AND FORMS

BHS – Bureau of Health Services

BOCM – Bureau of Classification and Movement

DCC – Division of Community Corrections

DCI – Dodge Correctional Institution

DOC-3023D – Prescriber's Orders (Standard Orders – Hemodialysis)

DOC-3023W – Prescriber's Orders (Standard Orders – Peritoneal Dialysis)

FLCI – Fox Lake Correctional Institution

HD – Hemodialysis

HSU – Health Services Unit

PD – Peritoneal Dialysis

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RC – Reclassification

PROCEDURE

I. General Guidelines – Admission Process

- A. The Dialysis Unit provides a service and is not an independent health service unit.
- B. DOC Dialysis Staff shall be contacted by the referring healthcare staff when it is determined that an inmate patient is potentially in need of dialysis services.
- C. Requests from DCC or county jails for non-DAI inmate patients for dialysis services within the Wisconsin DOC shall be approved through BOCM, BHS and facility Security administration prior to acceptance at dialysis.
- D. All referrals shall be evaluated by the Dialysis Nursing Supervisor/designee in collaboration with the contracted Nephrology provider to ensure the identified healthcare needs are appropriate and the dialysis unit is able to safely and effectively meet the inmate patient's dialysis and other healthcare needs.
- E. Admission to dialysis requires an order from the contracted Nephrology Provider.
- F. Both HD and PD are potential dialysis options available to the inmate patient. Decisions regarding dialysis modalities are determined in collaboration with the contracted Nephrology Provider, dialysis nursing staff, HSU, and the inmate patient.
- G. On-site HD can be provided at both DCI and FLCI.
 1. The number of inmate patients able to be provided HD on-site is limited by the available staffing and facility resources.
 2. Community dialysis may be necessary in the event the inmate patient's dialysis needs cannot be met within the DOC Dialysis Units.
- H. Male HD inmate patients shall be housed at the facility determined by BOCM and Security staff to best meet the inmate patient's custody needs in collaboration with healthcare staff.
- I. On-site HD for female inmate patients may be provided at FLCI. Female inmate patients shall be transported to and from the dialysis unit each dialysis day per the assigned facility security staff.
- J. PD can be provided at facilities predetermined to be able to meet both the security, custody and healthcare needs of the inmate patient. Refer to DAI Policy 500.31.12.

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K. A dialysis medical record is initiated upon admission and stored in the corresponding dialysis unit per DAI Policy 500.50.24 – Dialysis Record.

II. **Dialysis Referrals/Transfers**

A. The referring facility HSM/designee shall complete the following in a timely manner prior to a potential transfer:

1. Communicate with the Dialysis Nursing Supervisor/designee about the inmate patient's identified dialysis needs.
2. Determine in follow up with the Dialysis Nursing Supervisor the outcome of the referral and potential estimated admission date.
3. Collaborate with the receiving facility HSU Manager/designee in addition to consulting with the Dialysis Nursing Supervisor.
4. Fax requested medical records to the designated dialysis site and document in the inmate patient's medical chart.
5. Communicate with Security, BOCM, and facility RC staff the transfer request due to healthcare needs. Communicate with appropriate staff to coordinate transportation.
6. Refer to DAI Policy 500.30.06.

B. Dialysis Nursing Supervisor/ designee shall:

1. Review the referral with the contracted Nephrology Provider. Referral and transfer decisions are based on:
 - a. Current health status and medical needs.
 - b. Dialysis chair availability
 - c. Custody levels and security needs
 - d. Facility/HSU resources and capabilities.
2. Consult with the potentially designated receiving facility HSM and facility ACP as applicable, regarding referral.
3. Consult with facility security administration/ supervisors regarding facility bed space for necessary bed placement.
4. Consult with facility Records/RC staff as indicated for the scheduled transfer of the inmate patient and coordination with the sending facility and BOCM.
5. Obtain medical records from the sending HSU and also dialysis medical records from the community or inpatient dialysis unit, if applicable.
6. Fax medical records and either DOC-3423D for Hemodialysis or DOC-3423W for Peritoneal Dialysis to the contracted Nephrology Provider for review and completion.
7. Facilitate any unit needs to accommodate admission.
8. Communicate accepted dialysis referrals and expected admission date with the dialysis healthcare staff.
9. Consult with the assigned BHS Nursing Coordinator regarding situations where acceptance may be denied.

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- C. The dialysis team leader RN/ designee shall:
1. Evaluate and assign an appropriate dialysis chair and shift.
 2. Facilitate final receipt of DOC-3023D – Prescriber’s Orders (Standard Orders – Hemodialysis).
 3. Facilitate obtaining dialysis records from the community or inpatient dialysis unit, if applicable.
 4. Communicate with the dialysis staff the accepted referral, anticipated admission date and chair assignment.
 5. Communicate with dialysis unit Security staff the accepted referral and anticipated admission date.
 6. Prepare a dialysis chart per DAI Policy 500.50.24.
 7. Notify the on-call contracted Nephrology Provider and/or facility ACP with any inmate patient concerns or needs.
- D. The Contracted Nephrology Provider shall:
1. Review the inmate patient’s medical records and complete the DOC-3023D – Prescriber’s Orders (Standard Orders – Hemodialysis) or the DOC-3023W – Prescriber’s Orders (Standard Orders – Peritoneal Dialysis).
 2. Fax completed orders to the applicable dialysis facility.
 3. Evaluate the inmate patient on the next scheduled rounds day.

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

_____ **Date Signed:** _____
Ryan Holzmacher, MD. Medical Director

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

Administrator’s Approval: _____ **Date Signed:** _____
James Schwochert, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

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| Facility: Name | | |
| Original Effective Date: | DAI Policy Number: 500.31.37 | Page 5 of 5 |
| New Effective Date: 00/00/00 | Supersedes Number: | Dated: |
| Chapter: 500 Health Services | | |
| Subject: Dialysis Services Referral-Admission | | |
| 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