

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.40.02	Page 1 of 7
	Original Effective Date: 09/01/97	New Effective Date: 04/15/19
	Supersedes: 500.40.02	Dated: 11/01/17
	Administrator's Approval: Makda Fessahaye, 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: Triage of Dental Service Requests and Prioritizing Appointments		

POLICY

The Division of Adult Institutions shall ensure Dental Service Requests and dental appointments are scheduled by dental staff in a timely manner by triaging and appropriately scheduling inmate patients based on clinical determinations of both pain and priority status, using the criteria outlined in this policy.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018, P. E. 06 Oral Care
DAI Policy 500.10.12 – Prior Authorization Guidelines for Non-Urgent Care (Class III)
DAI Policy 500.30.11 – Daily Handling of Non-Emergency Requests for Health Care
DAI Policy 500.50.07 – Records Retention/Disposition Authorizations
Attachment B – DSR from Restrictive Housing

DEFINITIONS, ACRONYMS, AND FORMS

AAP – American Academy of Periodontology

Address – In reference to “addressing a DSR”; to focus one’s efforts on identifying a dental problem using chair triage, and treating in a palliative manner to assure pain control until a definitive treatment appointment can be scheduled.

BHS – Bureau of Health Services

Chair Triage – To quickly assess the priority of a dental problem by evaluating the inmate patient in the dental chair, triaging the problem, providing palliative care and scheduling the inmate patient for definitive treatment based on the priority identified.

Chronic Medical Condition – Medical disease of slow progression and long duration.

Dental Emergency – Dental problem causing a life threatening condition and requiring immediate care. Examples include: uncontrolled bleeding, allergic reactions/shock, swelling or fractures causing impaired breathing, high fever from dental infection, or serious trauma.

Dental Service Request (DSR) – Any method, including the use of DOC-3392 – Dental Service Request or any form of written communication from an inmate patient to request care, or phone calls and referrals from staff used to contact the DSU in order to describe a dental problem, or request dental care.

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DOC-3392 – Dental Service Request and Copayment Disbursement

Authorization DSU – Dental Services Unit

Essential (E) – Dental conditions which are chronic, asymptomatic and which if not completed within 8 weeks could result in an acute episode. Examples include: advanced caries, teeth with hopeless prognosis, infected teeth and care for inmate patients which is relevant to their chronic medical conditions.

HSU – Health Services Unit

Hygiene (H) – A triage category in which treatment may be provided by a dental hygienist.

Chronic List (C) – For chronic exam and x-rays.

Hygiene List (H) – List maintained by the hygienist or assistant.

Initial Oral Examination – Detailed review by a dentist includes dental/medical history, extra oral head and neck examination, soft and hard tissue intraoral exam, charting of teeth, restorations, and pathology, periodontal classification, dental classification, treatment needs identification, and appropriate radiographs and interpretation.

Intake Dental Screening – cursory inmate patient interview and visual review of the mouth by a dentist-trained qualified health professional.

MOU – Memorandum of Understanding

OTC – Over the counter; relates to medication.

Periodic Oral Examination – Periodic review by a dentist includes dental/medical history, extra oral head and neck examination, soft and hard tissue intraoral exam, periodontal classification, dental classification, treatment needs/pathology identification, and appropriate radiographs and interpretation.

PRC – Program Review Committee

Prescribing Practitioner – A licensed individual, such as a Physician, Psychiatrist, Nurse Practitioner (Advanced Practice Nurse Prescriber), Physician Assistant, Dentist, Optometrist who is authorized to write prescriptions.

Prosthetic (P) – Dental need relating to dentures or dental prostheses, where the prosthesis provision could be delayed without creating adverse effects on the inmate patient's medical status.

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Routine (R) – Dental conditions that are asymptomatic and for which a delay in completion of up to one year would not result in serious risk. Examples include: minor caries, old but serviceable fillings, prosthetics which are cosmetic needs only, denture repairs when the denture remains functional.

SharePoint Dental Wait List – Electronic file used to create and maintain the various dental wait lists at each DSU.

Triage – System used to sort DSRs and dental problems into a priority category for the purpose of allocating dental appointments in the order of clinical need.

Urgent (U) – Dental conditions which if not completed in a timely manner, could result in undue pain and suffering. Examples include: moderate post-operative bleeding, pain not relieved by medications, acute oral infections, symptomatic trauma to teeth or jaws, periodontal or periapical abscess.

WCCS – Wisconsin Correctional Center System

WWCS – Wisconsin Women’s Correctional System

RH – Restrictive Housing Unit

PROCEDURE

I. Triage of DSRs

- A. Dentists shall triage DSRs on the workday received.
 1. Dentist shall use the inmate patient’s dental record and relevant radiographs as an aid in triage.
 2. Dentists shall triage DSRs into the following categories:
 - a. Urgent.
 - b. Routine.
 - c. Hygiene.
 - d. Essential
 - e. Prosthetic
 3. Hygiene requests shall be placed on one list.
 4. The dentist shall follow the Pain Protocols for triaging DSRs indicating pain. See Attachment B of this policy.
- B. Only a dentist is qualified to triage DSRs.
 1. Triage may not be delegated to a dental assistant or hygienist.
 2. If the DSU is closed, DSRs shall be triaged by an RN according to DAI Policy 500.30.11.
 3. The dental hygienist shall separate out the DSR requesting only for hygiene for the purpose of scheduling or placement on a hygiene wait list.
 4. For minimum WCCS centers without an on-site dental unit and WWCS, HSU shall contact the assigned DOC or contract dentist for telephone consultation and follow the MOU with that facility.

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- C. All DSR documentation shall be entered in “Dentrix”.
 - 1. Follow Dentrix DSR template.
 - 2. Indicate the DSR triage result in Dentrix and list inmate patient in “Dental Outsystem” for treatment.
- D. Responding to DSRs.
 - 1. The dentist shall record the disposition (U, E, R, P, H) on the DSR and/or write a professional response to the inmate patient.
 - 2. The pink copy of the DSR, with the dentist’s disposition shall be returned to the inmate patient within 24 hours of receipt by the dentist and, in a manner maintaining confidentiality.
 - 3. The original DSR shall be scanned into “Dentrix” document center.

II. Use of Pain Protocols to Triage DSRs Indicating Pain

- A. The dentist shall follow the BHS Pain Protocol (Attachment B) in managing DSRs in which the inmate patient indicates he/she is in pain.
- B. Inmate patients whose pain symptom is determined by the dentist to be urgent in conjunction with the Pain Protocol must be treated/addressed that day.
- C. If escorts are unavailable to bring a Restrictive Housing inmate patient to the DSU, the dentist shall, based on clinical judgment, decide to go to the Restrictive Housing Unit to evaluate the potentially urgent inmate patient. See Attachment B of this policy.

III. Scheduling DSRs

- A. Emergency, life-threatening situations shall be handled immediately by the dentist and/or health staff or sent off-site for care. This is considered a Class I which requires no prior authorization but does require post-authorization. See DAI Policy 500.10.12.
- B. Under the direction of the dentist, dental assistants shall schedule inmate patients per triage status (U, E/R, R, P/R, H) and the priority criteria outlined in this policy.
- C. The dental assistant shall place the triaged inmate patient’s name on the bottom of the appropriate Statewide Wait List “Outsystem”. Wait lists are established in chronological order of receipt of the DSR.
- B. Program and operational needs allow for schedule adjustments. Document the reason of the schedule adjustment in Dentrix.

IV. Prioritizing and Scheduling Urgent, Routine and Hygiene Dental DSRs

- A. General Scheduling Information
 - 1. All dental appointments shall be scheduled from the chronological top of any corresponding wait list, unless a change in a clinical condition alters the triage status.

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2. If an inmate patient fails to show for an appointment (No Show), dental staff shall attempt to learn the reason for the failure. If the failure to show was beyond the inmate patient's control, the inmate patient shall be rescheduled.
 3. Multiple No Shows (two or more) dental appointment by the same inmate patient shall be addressed as follows:
 - a. Without a reasonable explanation, a multiple no show patient will be considered a complete case.
 - b. After documented in the chart, a multiple no show inmate patient shall submit a DSR for further dental treatment.
 - c. It is the responsibility of the inmate patient to request a future hygiene appointment if an appointment was refused.
 - d. The inmate patient shall be placed on the initial hygiene wait list under the new DSR date.
 5. All appointments shall be scheduled in a manner maximizing clinical efficiency and inmate patient access.
 6. Based on security level, each DSU shall have a mechanism in place to fill unanticipated gaps in the schedule (e.g., "will call list").
 7. Inmate patient in a RHU will be required to sign a refusal form or acknowledge their refusal for treatment.
- B. Urgent dental needs shall be scheduled within shall be scheduled and seen within 24 hours (2 working days) or 72 hours (3 working days) for facilities without full-time dentists, from which the urgent notice/request was received for either a definitive treatment appointment or a chair triage.
1. If it is clinically possible to definitively treat the problem that day it shall be treated or at the minimum, addressed that day.
 2. Essential dental needs shall be scheduled within eight weeks.
 3. Routine dental needs shall be scheduled within 40 weeks.
 4. Prosthetic should be provided within one year after all urgent and essential requests have been addressed.
 5. Hygiene shall be scheduled from the Hygiene Wait List.

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

_____ **Date Signed:** _____
Paul Bekx, MD, Medical Director

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

_____ **Date Signed:** _____
Dr. Man Lee, Dental Director

Administrator's Approval: _____ **Date Signed:** _____
Makda Fessahaye, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.40.02	Page 7 of 7
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Triage of Dental Service Requests and Prioritizing Appointments		
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.
 - 1.
 - a.
 - B.
 - C.
- II.
 - A.
 - B.
 - C.