

 <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: 04/08/24
	Supersedes: 500.40.02	Dated: 04/15/19
	Administrator's Approval: Sarah Cooper, Administrator – 03/08/24	
	Required Posting or Restricted:	
<input checked="" type="checkbox"/> PIOC <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 PIOC 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

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

DAI 500.10.12 – Prior Authorization Guidelines for Non-Urgent Care (Class III)

DAI 500.30.11 – Daily Handling of Non-Emergency Requests for Health Care

DEFINITIONS, ACRONYMS, AND FORMS

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 PIOC in the dental chair, triaging the problem, providing palliative care and scheduling the PIOC for definitive treatment based on the priority identified.

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

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 or any form of written communication from a PIOC 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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Dental Wait List – Electronic file used to create and maintain the various dental wait lists at each DSU.

Dentrix – Electronic medical record used by the Dental Units to document dental requests and patient care.

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 PIOC 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.

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

MOU – Memorandum of Understanding

PIOC – Persons in Our Care

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.

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.

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

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WWCS – Wisconsin Women’s Correctional System

RH – Restrictive Housing

PROCEDURE

I. Triage of DSRs

- A. Dentists shall triage DSRs on the workday received.
 - 1. If a dentist is not on-site, the DSR shall be scanned so a dentist at another site can complete the triage.
 - 2. Dentists shall use the PIOC dental record and relevant radiographs as an aid in triage.
 - 3. Dentists shall triage DSRs into the following categories:
 - a. Urgent.
 - b. Routine.
 - c. Hygiene.
 - d. Essential
 - e. Prosthetic
 - 4. Hygiene requests shall be placed on one list.
 - 5. The dentist shall follow the Pain Protocols for triaging DSRs indicating pain. See Attachment A 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 reviewed by an RN according to DAI Policy 500.30.11.
 - 3. The dental hygienist shall separate out the DSR requesting only 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.

- C. All DSR documentation shall be entered in Dentrix.
 - 1. Follow Dentrix DSR template.
 - 2. Indicate the DSR triage result in Dentrix and list PIOC in Dental Waitlist 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 PIOC.
 - 2. The pink copy of the DSR, with the dentist’s disposition shall be returned to the PIOC 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

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- A. The dentist shall follow the BHS Pain Protocol (Attachment A) in managing DSRs in which the PIOC indicates they are in pain.
- B. PIOC whose pain symptom is determined by the dentist to be urgent according to the Pain Protocol shall be treated and/or addressed that day.

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 PIOC 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 PIOC name on the bottom of the appropriate Dental Wait List. Wait lists are established in chronological order of receipt of the DSR.
- B. Program and operational needs allow for schedule adjustments. Schedule adjustments shall be documented in Dentrix.

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

- A. General Scheduling Information
 - 1. 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.
 - 2. If PIOC fail to show for an appointment (No Show), dental staff shall attempt to learn the reason for the failure. Only if the failure to show was beyond the PIOC control, the appointment shall be rescheduled.
 - 3. Multiple refusals (two or more) by the same PIOC shall be addressed as follows:
 - a. Without a reasonable explanation, multiple refusals shall be considered a complete case.
 - b. It is the responsibility of the PIOC to request a future hygiene appointment if an appointment was refused.
 - c. PIOC shall be placed on the initial hygiene wait list under the new DSR date.
 - 5. Appointments shall be scheduled in a manner maximizing clinical efficiency and PIOC access.
 - 6. Each DSU shall have a mechanism in place to fill unanticipated gaps in the schedule (e.g., "will call list").
- B. Urgent dental needs shall be scheduled and seen within 24 hours (2 working days) or 72 hours (3 working days) for facilities without full-time

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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 a 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 needs shall be provided within one year after all urgent and essential requests have been addressed.
5. Hygiene shall be scheduled from the Hygiene Wait List.

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.40.02	Page 6 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.

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

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