

DIVISION OF ADULT INSTITUTIONS

POLICY AND PROCEDURES

Chapter: 500 Health Services **Subject:** Ectoparasite Control

DAI Policy #: 500.60.14	Page 1 of 4			
Original Effective Date:	New Effective Date:			
10/28/11	12/16/24			
Supersedes: 500.60.14	Dated: 08/31/20			
Administrator's Approval: Sarah Cooper, Administrator – 11/08/24				
Required Posting or Restricted:				
X PIOC X All Staff Restricted				

POLICY

All Division of Adult Institution facilities shall promptly identify and treat suspected Ectoparasite (e.g., lice, bed bugs and scabies) cases to prevent infestations from spreading within the correctional setting.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health

Care 2018, P-B-02– Infectious Disease Prevention and Control

Centers for Disease Control - www.cdc.gov/parasites/lice

<u>Centers for Disease Control</u> – www.cdc.gov/parasites/scabies

Centers for Disease Control –www.cdc.gov/parasites/bedbugs/index.html

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) – Provider with prescriptive authority.

BHS – Bureau of Health Services

CDC - Centers for Disease Control

DOC – Department of Corrections

DOC-3220 – Refusal of Recommended Health Care

DOC-3504 – Infection Control: Patient and Employee Precautions

HSU - Health Services Unit

PIOC – Persons in Our Care

POC-0040B – Infection Control – Housekeeping/Laundry

PROCEDURES

I. General Guidelines

A. All PIOC shall be assessed during the intake health screening by health care personnel for evidence of ectoparasite infection.

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- B. Routine delousing for all individuals on intake or transfer is not recommended.
- C. PIOC who identify themselves, or are identified by correctional staff, as infested shall be referred to HSU.
 - 1. HSU shall assess PIOC as soon as possible.
 - 2. An ACP shall assess, diagnose (including skin scrapings for confirmation) and treat based on findings.
 - 3. Nursing staff shall educate PIOC regarding treatment and self-care measures for eradication of ectoparasites.
 - 4. Roommates and close contacts shall be evaluated for signs and symptoms of infestations.
- D. Follow-up with HSU is necessary until PIOC are cleared.

II. Treatment

- A. PIOC do not require segregation from general population.
- B. A set of clean clothes and linens shall be issued after the cream is applied.
- C. All personal clothing, DOC clothing and linens in the patient's possession shall be placed in a yellow linen bag and sent to the institution laundry to be laundered in hot water and dried in a hot dryer. Personal clothing shall be bagged separately from DOC clothing/linens.
- D. Items, such as boots, shower shoes, etc. that cannot be laundered shall be placed in a plastic bag.
 - 1. Label bag with the PIOC name, DOC number and the housing unit.
 - 2. Label shall also include date items were placed in the bag and date when items can be returned to patient for use.
 - 3. Items shall be secured in a locked room for two weeks.
 - 4. PIOC shall not be allowed to retrieve anything from the secured bag before the two weeks is up.
- E. The PIOC room shall be washed down with disinfectant cleaner during treatment.
- F. Itching may continue for 2-3 weeks and does not mean PIOC are still infested.
- G. Initiate DOC-3504 and POC-0040B and review with staff.
- H. Notify Warden/Superintendent, Nursing Supervisor/designee and facility infection control nurse for all confirmed or suspected cases or unknown parasites.
- I. Notify BHS if there is an outbreak (two or more cases).

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III. Non-Adherence

- A. If PIOC refuse to adhere to the treatment and preventative measures:
 - 1. Reason for non-adherence shall be investigated.
 - 2. Counseling and education shall be provided.
 - 3. Refusal shall be documented on DOC-3220.
- B. Housing considerations to be reviewed by the HSU in collaboration with the Security Director.

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DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name					
Original Effective Date:	DAI Policy Number: 500.60.14	Page 4 of 4			
New Effective Date: 00/00/00	Supersedes Number:	Dated:			
Chapter: 500 Health Services					
Subject: Ectoparasite Control					
Will Implement As written 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