

 <p style="text-align: center;"><b>DIVISION OF ADULT INSTITUTIONS</b></p> <p style="text-align: center;"><b>POLICY AND PROCEDURES</b></p>	<b>DAI Policy #:</b> 500.70.30	<b>Page</b> 1 of 5
	<b>Original Effective Date:</b> 11/01/15	<b>New Effective Date:</b> 11/01/15
	<b>Supersedes:</b> N/A	<b>Dated:</b> N/A
	<b>Administrator's Approval:</b> Cathy A. Jess, Administrator	
<b>Required Posting or Restricted:</b>		
<input type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Behavior Management Plans		

**POLICY**

The Division of Adult Institutions shall establish a process for the development of Behavior Management Plans for inmates with at-risk behaviors.

**REFERENCES**

Wisconsin Administrative Code Ch. DOC 303 – Discipline  
Wisconsin Administrative Code Ch. DOC 306 – Security  
Wisconsin Administrative Code Ch. DOC 308 – Administrative Confinement  
Wisconsin Administrative Code Ch. DOC 311 – Observation Status  
Wisconsin Administrative Code Ch. DOC 314 – Mental Health Treatment for Inmates  
DAI Policy 306.05.01 – Protective Confinement  
DAI Policy 308.00.01 – Administrative Confinement  
DAI Policy 500.00.05 – Medical Observation and Monitoring  
DAI Policy 500.70.06 – Consent for Mental Health Services  
DAI Policy 500.70.13 – Segregation Reviews  
DAI Policy 500.70.14 – Mental Health Multidisciplinary Teams  
DAI Policy 500.70.17 – Mental Health Treatment – Special Units  
DAI Policy 500.70.24 – Clinical Observation

**DEFINITIONS, ACRONYMS AND FORMS**

Administrative Confinement – The segregated confinement of an inmate whose continued presence in general population poses a serious threat to life, self, staff, or other inmates, or to the secure or orderly operation of the facility.

Behavior Management Plan – A non-punitive and multidisciplinary written plan to address inmate behaviors that threaten the safety of the inmate or others, impair the safe and secure operation of the facility, or result in disciplinary action. The plan shall identify target behaviors, the appropriate staff responses to those behaviors, and guidance to the inmate regarding more constructive behaviors.

Clinical Observation – Involuntary or voluntary non-punitive status used for the temporary confinement of an inmate to ensure the safety of the inmate or the safety of others.

Controlled Separation – Restrictive status for an inmate who exhibits disruptive, destructive, or out of control behavior.

<b>DAI Policy #:</b> 500.70.30	<b>New Effective Date:</b> 11/01/15	<b>Page</b> 2 of 5
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Behavior Management Plans		

Disciplinary Separation – Punitive status of an inmate for violation of Wisconsin Administrative Code Ch. 303, with no extension of the mandatory release/extended supervision date.

DOC – Department of Corrections

DOC-30 – Review of Offender in Program Segregation, Disciplinary Separation, or Administrative Confinement

DOC-30 Instructions – Instructions for Completing DOC-30

DOC-3511 – PSU Treatment Plan

DOC-3642A – Behavior Management Plan

HSU Staff – Employees classified as HSU Manager, Psychiatrist, Physician, Physician Assistant, Pharmacist, Dentist, Nurse Practitioner, Optometrist, Registered Nurse, Licensed Practical Nurse, Physical Therapist, Radiologic Technician, or any other clinical classification that is directly supervised by Health Services.

Mental Health Codes – Designation made by PSU staff in WICS that identifies inmates who are not on the mental health caseload (MH-0), on the mental health caseload but not with a serious mental illness (MH-1), with serious mental illness (MH-2a and MH-2b) or with an intellectual disability (ID).

Mental Health Multidisciplinary Team – Staff who regularly meet to review the status of inmates per DAI Policy 500.70.14.

Mental Health Treatment Plan – A series of written statements specifying an inmate's particular course of care, treatment or monitoring and the roles of mental health care staff in carrying it out.

Protective Confinement – Separation from the general population necessary to ensure the safety and welfare of that inmate.

PSU – Psychological Services Unit

PSU Staff – Employees classified as Psychologist Supervisor, Psychologist-Licensed, Psychological Associate A or B, Crisis Intervention Worker, Psychological Services Assistant, Clinical Social Worker, or any other clinical classification that is directly supervised by Psychological Services.

TLU – Temporary Lockup

<b>DAI Policy #:</b> 500.70.30	<b>New Effective Date:</b> 11/01/15	<b>Page</b> 3 of 5
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Behavior Management Plans		

## PROCEDURE

### I. Behavior Management Plan Development

- A. Behavior Management Plans may be developed by the Restrictive Housing Review Committee, Mental Health Multidisciplinary Team, housing unit team or an ad-hoc multidisciplinary team organized for a specific situation or inmate. If an ad-hoc team is utilized, it shall include, at minimum, PSU, Security and HSU staff.
- B. Inmates shall be offered the opportunity to provide input to their own Behavior Management Plan and sign the DOC-3642A – Behavior Management Plan.
- C. Behavior Management Plans shall be limited to specific behaviors that place the inmate's safety at risk, the safety of others at risk, or significantly interfere with the safe and secure operation of the facility.
- D. Behavior Management Plans shall be documented on DOC-3642A and list the following:
  1. Target behaviors.
  2. Goals.
  3. Interventions.
  4. Staff responsible to implement interventions.
  5. Inmate input, including suggestions and objections.
- E. Behavior Management Plans shall utilize positive incentives and positive reinforcement strategies as much as possible to change the target behaviors.
- F. Restrictions and conditions shall be in place as long as needed to keep the inmate and others safe. When behavior has improved for a sufficient amount of time, the team responsible for the Behavior Management Plan shall reduce restrictions accordingly.
- G. Staff shall provide the inmate with a copy of the Behavior Management Plan (and any subsequent modified plans) when it is safe to do so. If a paper copy is withheld for safety reasons, staff shall verbally review the plan with the inmate and document such review.
- H. Behavior Management Plans shall contain the minimum necessary protected health information. They shall not list specific health care diagnoses or medications.
- I. Any inmate with a MH-2A, MH-2B or ID mental health code who receives a disciplinary separation disposition of 60 days or more shall have a Behavior Management Plan developed within 10 days of disposition.
- J. Any inmate with a MH-2A, MH-2B or ID mental health code who is placed in Administrative Confinement shall have a Behavior Management Plan developed within 10 days of placement.

<b>DAI Policy #:</b> 500.70.30	<b>New Effective Date:</b> 11/01/15	<b>Page</b> 4 of 5
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Behavior Management Plans		

## II. Mental Health Treatment Plan

When needed, PSU staff may write a separate Mental Health Treatment Plan as outlined in DAI Policy 500.70.17 using the principles of consent outlined in DAI Policy 500.70.06.

## III. Review of Behavior Management Plans

- A. The multidisciplinary team responsible for the Behavior Management Plan shall review the plan at least once per month and more often as indicated. The plan may be modified or discontinued based upon inmate behavior.
- B. Behavior Management Plans do not replace or supersede disciplinary sanctions. However, the multidisciplinary team, in collaboration with the Security Director, may recommend modifications of disciplinary sanctions to the Warden if this would serve as a reinforcement of positive behavior or be in the best interest of the inmate.
- C. Behavior Management Plans require a collaborative effort among staff from various disciplines.
  1. If the multidisciplinary team needs assistance to resolve differing perspectives about the best approach to an inmate's care, the Warden shall be consulted.
  2. The Warden may consult with appropriate DAI clinical staff including the Psychology Director, Medical Director, and/or BHS Director.
- D. If an inmate on a Behavior Management Plan is scheduled for transfer, the Security Director/designee shall send the receiving facility a copy of the Behavior Management Plan in advance of the transfer for informational purposes. The receiving facility may modify the Behavior Management Plan as needed to correspond to differing physical plant and resources.

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

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Ryan Holzmacher, MD, Medical Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Dr. Kevin Kallas, Mental Health Director

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Mary Muse, Nursing Director

**Administrator's Approval:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Cathy A. Jess, Administrator

**DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES**

<b>Facility:</b> Name		
<b>Original Effective Date:</b>	<b>DAI Policy Number:</b> 500.70.30	<b>Page</b> 5 of 5
<b>New Effective Date:</b> 00/00/00	<b>Supersedes Number:</b>	<b>Dated:</b>
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Behavior Management Plans		
<b>Will Implement</b> <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
<b>Warden's/Center Superintendent's Approval:</b>		

**REFERENCES**

**DEFINITIONS, ACRONYMS, AND FORMS**

**FACILITY PROCEDURE**

- I.
  - A.
    - 1.
      - a.
  - B.
  - C.
- II.
  - A.
  - B.
  - C.