

 <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> 500.80.27	<b>Page</b> 1 of 4
	<b>Original Effective Date:</b> 04/20/16	<b>New Effective Date:</b> 01/11/21
	<b>Supersedes:</b> 500.80.27	<b>Dated:</b> 05/14/18
	<b>Administrator's Approval:</b> Makda Fessahaye, Administrator	
<b>Required Posting or Restricted:</b>		
<input checked="" type="checkbox"/> <b>Inmate</b> <input checked="" type="checkbox"/> <b>All Staff</b> <input type="checkbox"/> <b>Restricted</b>		
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Non-Controlled Medication Program for Self-Medication		

**POLICY**

Division of Adult Institution facilities shall recognize that medication self-administration allows patients a sense of responsibility, preparing individuals for reentry into the community. Responsible patients are allowed to possess prescribed non-controlled medications for self-administration.

**REFERENCES**

Standards for Health Services in Prisons – National Commission on Correctional Health Care, 2018 -- P-D-02 – Medication Services

Wisconsin Administrative Code Ch. 303 – Discipline

DAI Policy 500.00.02 - Emergency Prescribed Medication for Self-Administration by Patients

DAI Policy 500.80.04 – Over the Counter Medications

DAI Policy 500.80.05 – Formulary – Approved Medications for Use

DAI Policy 500.80.07 – Labeling of Medications

DAI Policy 500.80.18 – Pharmacy and Therapeutics Committee

DAI Policy 500.80.26 – Medication Non-Adherence

Wisconsin Statutes s. 302.85 – Medical Care of Prisoners

**DEFINITIONS, ACRONYMS AND FORMS**

Advanced Care Provider (ACP) – A provider with prescriptive authority.

Controlled medication – Medications maintained under staff control until an individual dose is provided to a patient.

DOC-9 – Adult Conduct Report

DOC-3035C – Medication/Medical Supply Refill Request

HCR – Healthcare Record

HSU – Health Services Unit

KOP – Keep on person

Non-controlled medication – Medications allowed to be in a patient's possession for self-administration. These are often referred to as KOP medications.

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P&T – Pharmacy and Therapeutics

## **PROCEDURE**

### **I. General Guidelines**

The control status of all medications is defined by the DOC's Pharmacy and Therapeutics Committee.

- A. The ACP and/or a Registered Nurse may further restrict the control of any medication for any patient(s).
- B. The facility may further restrict the control of any medication for patients housed at that facility.
- C. Reference policy 500.00.02, for control of emergency medications.
- D. Periodic review of controlled medication shall occur.

### **II. Patient Responsibilities for Non-Controlled Medications**

- A. Take medication as ordered or directed by HSU. Do not abuse, misuse or share medication.
- B. Request medication refill utilizing DOC-3035C – Medication/Medical Supply approximately 7 days before their current supply is depleted.
- C. Keep medications secure and in own possession.
- D. Keep medication in original packaging and labeling.
- E. Return any discontinued or expired medication to HSU.
- F. Refer any questions or concerns to health services staff.

### **III. Health Staff Responsibilities for Non-Controlled Medications**

- A. Ensure the patient understands how to take, the purpose, and potential side effects of their medications.
- B. Assess the patient's ability and cooperation with managing self-controlled medications.
- C. Communicate to the ACP, if the patient is unable or unwilling, to take a KOP medication.
- D. Establish periodic monitoring for adherence.
- E. Document patient education and ability to comply.

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#### IV. Non-Controlled Medication Monitoring

- A. Non-controlled medications in the patient possession may be monitored at any time.
- B. A patient who is found to be non-adherent to non-controlled medications shall be counseled/educated and future assessed to evaluate rationale for non-adherence by licensed health service staff according to DAI Policy 500.80.26. Follow-up and check non-adherence policy/workflow.
- C. Non-controlled medication concerns shall be documented in the HCR and:
1. Reviewed with an ACP.
  2. Reviewed as needed with the multi-disciplinary team.
  3. Ensure that there is a plan for medication management.
- D. A patient may be removed from the non-controlled medication program, to allow for greater health services intervention. Removal decisions shall be documented in the HCR.
- E. Patients may be assessed for reinstatement to the self-medication program.
- F. Periodic adherence checks of non-controlled medications shall be completed.

**Bureau of Health Services:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Michael Rivers, Director of Healthcare Administration

\_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Vacant, Medical Director

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

**Administrator's Approval:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Makda Fessahaye, Administrator

**DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES**

<b>Facility:</b> Name		
<b>Original Effective Date:</b> 00/00/00	<b>DAI Policy Number:</b> 500.80.27	<b>Page</b> 4 of 4
<b>New Effective Date:</b> 00/00/00	<b>Supersedes Number:</b> 500.80.27	<b>Dated:</b> 04/20/16
<b>Chapter:</b> 500 Health Services		
<b>Subject:</b> Non-Controlled Medication Program for Self-Medication		
<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.
  - B.
    - 1.
    - 2.
      - a.
      - b.
      - c.
    - 3.
  - C.

II.

III.

**RESPONSIBILITY**

I. Staff

II. Inmate

III. Other