 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.18	Page 1 of 6
	Original Effective Date: 05/01/04	New Effective Date: 08/31/20
	Supersedes: 500.30.18	Dated: 02/15/17
	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: Nursing Assessment Protocols and Procedures		

POLICY

All Division of Adult Institution facilities shall utilize approved nursing assessment protocols and procedures that are appropriate to the level of competency and preparation of nursing personal and comply with relevant state practice acts.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018, P-E-08- Nursing Assessment Protocols and Procedures
Wisconsin Administrative Code Ch. N 6 – Standards of Practice for Registered Nurses and Licensed Practical Nurses
DAI Policy 500.30.72 – Nursing Vital Signs Referral Parameters
Lippincott Manual of Nursing Practice
Lippincott Williams & Wilkens 11th Ed. Nettina, S. M. (2018)
Lippincott Williams & Wilkens (2018) Nursing Procedures, 8th Ed.
Lippincott Williams & Wilkens (2021) Nursing Drug Handbook, 41th Ed.
Wisconsin Statutes s. 302.38 – Medical Care of Prisoners

DEFINITIONS, ACRONYMS AND FORMS

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

DAI – Division of Adult Institutions

DOC – Department of Corrections

HSM – Health Service Manager

HSU – Health Services Unit

Nursing Process -_a systematic guide to patient-centered care with 5 sequential steps: assessment, diagnosis, planning, implementation, and evaluation.

P&T – Pharmacy and Therapeutics

RN – Registered Nurse

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PROCEDURE

I. Overview

- A. Nurses shall practice within their licensure, training, experience and level of competence.
- B. Nursing protocols serve as a guide to the nurse's assessment and subsequent actions, and do not substitute for the nurse's clinical judgment.
 - 1. Nursing protocols shall not restrict the nurses' assessment of the patient.
 - 2. The nurse shall be capable of critical thinking and drawing on current evidence based practice knowledge to determine if different or additional information is needed.
- C. Nursing protocols may address a wide range of health concerns; however, each patient issue shall be assessed and evaluated specifically to the patient concern, patient's health history and presentation. The nurse shall consider the least possible health issue to the most complex and serious concerning assessment of the patient.
- D. The nurse is expected to utilize clinical judgment, evidenced based practice, and current research in assessment, planning, intervention, and evaluation.
 - 1. The nurse shall determine the most appropriate nursing protocol based on the patient's presentation and assessment.
 - 2. It is possible that no or more than one nursing protocol exists to meet a patient's needs.
- E. Collaboration between nurses and ACPs is expected as it relates to care and treatment of patients.
- F. Each protocol shall contain a definition of the problem and its potential causes, the clinical features most commonly associated with the condition, the nursing assessments, nursing diagnosis, and nursing interventions, utilizing the nursing process and shall include, referrals, follow up care, and inmate patient education and instructions.
- G. Nursing protocols are developed and reviewed by the nursing practice and protocol committee and receive a final review and approval from the Director of Nursing and the Medical Director.
- H. The use of prescription medications shall not be used in nursing protocols, except for those covering emergency life-threatening situations. Emergency administration of prescription medication are approved by virtue of Medical Director's annual review and signature. If a nursing protocol with prescription medications is utilized it requires a review and timely signature by ACP after administration. Document communication in healthcare record.

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II. Orientation, Education and Training

- A. Nurses shall be trained and demonstrate competency in the sick call process and the proper use of nursing protocols.
- B. The HSM shall establish a system of validating and documenting nurse competency.

III. Use of Nursing Protocols

- A. Protocols shall be available to nurses and shall serve as guidelines. They do not substitute for clinical judgment during health encounters.
 - 1. The RN is expected to utilize sound clinical judgment, evidenced based practice, and current nursing research in delivering care.
 - 2. Protocols shall be utilized to assist the nurse, and shall not limit the nurse's clinical assessment, resources, or clinical judgment.
 - 3. Professional clinical judgment determines what information needs to be collected as part of the nursing assessment and in the development of the plan of care.
- B. Nursing protocols use shall include a patient face-to-face assessment, unless the nurse is on call. The on-call nurse shall speak directly to the patient and utilize nursing protocols in addition to their nursing clinical judgment.
- C. Nursing assessments shall include a complete set of vital signs.
- D. When an on-call nurse uses the nursing protocol they are required to make a clinical judgment as to whether the patient needs on-site evaluation, or immediate evaluation off-site.
- E. Documentation of the nursing process shall include assessment, nursing diagnoses, outcome/planning, implementation, patient education, evaluation and nursing protocols utilized.

IV. Development and Review of Nursing Protocols for the Bureau

- A. Existing Nursing Protocols are reviewed annually to determine continuing need or modification.
- B. The Nursing Practice and Protocol Committee shall receive recommendations for new protocols or revision to existing protocols from clinical staff.
- C. The Director of Nursing and Medical Director shall review Protocol requests and approve or reject the development of Nursing Protocols.
- D. Nursing protocol development shall be consistent with the National Commission on Correctional Health Care Standards, current ANA Correctional Standards of Care, and in alignment with the Wisconsin Department of Safety and Professional Services. They shall adhere to the community standards and evidence based practice.

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- E. Nursing Protocols that contain medications will require additional approval by the P&T Committee or its sub-committee.
- F. Members of the Nursing Practice and Protocol Committee shall be made up of at least one nursing coordinator, nurse educator, nurse clinician, HSMs and a pharmacist.
- G. The Director of Nursing shall appoint a Nursing Coordinator from the Bureau of Health Services to serve as a clinical resource and consultant to the Chair(s) of the Nursing Practice and Protocol Committee.
- H. The Director of Nursing and Medical Director shall serve as consultants to the Nursing Practice and Protocol Committee.
- I. Annually, the facility ACP and HSM shall have a signed declaration indicating their acknowledgement and review of approved protocols.
- J. The facility HSM shall ensure RNs are oriented to and demonstrate competency in the use of the nursing assessment protocols and procedures. In the Wisconsin Correctional Center System, the assigned Health Services Nursing Coordinator is responsible.
 - 1. The HSM shall maintain a record of all RN orientation, education, training compliance, competency and annual review.
 - 2. All new or revised nursing assessment protocols shall be reviewed at staff meetings with RNs.
 - 3. Documentation of nurses' training in use of nursing assessment protocols and procedures is based on the level of care provided by the nurse.
 - a. Documentation includes:
 - i. Evidence that new nursing staff are trained and demonstrate knowledge and competency for protocols and procedures that are applicable to their scope of practice.
 - ii. Evidence of annual review of competency.
 - iii. Evidence of retaining when protocols or procedures are introduced or revised.
- K. Nursing assessment protocols are not a substitute for clinical nursing assessment, clinical judgement, and clinical decision making.
 - 1. Decision making shall be patient specific and individualized.
 - 2. Appropriate clinical judgment shall guide referral to ACP for clinical evaluations.
- L. Health Services Nursing Coordinators have responsibility for ensuring compliance with education and training by HSMs.

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Bureau of Health Services: Michael Rivers **Date Signed:** 8/31/20
Michael Rivers, Director of Administration

Paul Bekx **Date Signed:** 8/31/20
Paul Bekx, MD, Medical Director

Mary Muse **Date Signed:** 8/30/20
Mary Muse, Nursing Director

Administrator's Approval:  **Date Signed:** 08/31/20
Makda Fessahaye, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.30.18	Page 6 of 6
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Nursing Assessment Protocols and Procedures		
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.