 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.55	Page 1 of 5
	Original Effective Date: 07/31/13	New Effective Date: 08/31/20
	Supersedes: 500.30.55	Dated: 06/01/17
	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: Patients with Chronic Disease Services and Other Special Needs		

POLICY

The Division of Adult Institutions shall ensure patients with a chronic disease and other significant health conditions and disabilities receive ongoing multidisciplinary care aligned with evidence-based standards.

REFERENCES

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2018, P-F-01 Patient with Chronic Disease and Other Special Needs

DAI Policy 316.00.01 – Inmate Copayment for Health Services

DAI Policy 500.70.01 – Mental Health Screening, Assessment and Referral

DAI Policy 500.70.16 – Mental Health Treatment – General Population

DAI Policy 500.70.17 – Mental Health Treatment – Special Units

DAI Policy 500.70.18 – Mental Health Treatment – Restrictive Housing

DAI Policy 500.70.19 – Mental Health Treatment Plans

DAI Chronic Disease Management – Asthma

DAI Chronic Disease Management – Chronic Pain

DAI Chronic Disease Management – COPD

DAI Chronic Disease Management – Diabetes

DAI Chronic Disease Management – Dyslipidemia

DAI Chronic Disease Management – HBV

DAI Chronic Disease Management – Hepatitis C

DAI Chronic Disease Management – HIV

DAI Chronic Disease Management – Hypertension

DAI Chronic Disease Management – Seizure

Wisconsin Statutes s. 302.38 - Medical Care of Prisoners

Wisconsin Statutes 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

Chronic Disease – An illness or condition that affects the individual patient's well-being for an extended interval, usually at least six months, and is generally not curable, but can be managed to provide optimum functioning within any limitations the condition imposes on the individual.

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Chronic Care Visit – A regularly scheduled clinic visit overseen by an ACP specifically for following on-going medical needs related to chronic medical conditions, including but not limited to those identified as Chronic Management Guidelines by the DOC.

Copayment – The amount charged a patient for patient initiated health services.

DOC – Department of Corrections

HSU – Health Service Unit

Patient Care Plan – The section of the patient’s medical record where individual Treatment Care Plans are filed.

Treatment Care Plan – DOC approved forms used for documentation of findings of the patient’s chronic condition during a chronic care visit.

FACILITY PROCEDURE

I. General Guidelines

- A. The BHS Medical Director is responsible for developing and approving Chronic Disease Management Guidelines to be used for monitoring chronic conditions.
- B. The BHS Medical Director shall annually approve Chronic Disease Management Guidelines and ensure they are consistent with national clinical practice guidelines.
- C. Clinical protocols for the identification and management of chronic diseases or other special needs include, but are not limited to the following:
 1. Asthma.
 2. Cardiovascular disease.
 3. Chronic pain.
 4. Chronic obstructive pulmonary disease.
 5. Diabetes.
 6. Dyslipidemia.
 7. Hepatitis B.
 8. Hepatitis C.
 9. Human immunodeficiency virus.
 10. Hypertension.
 11. Seizure disorder.
 12. Sickle cell disease.
 13. Tuberculosis.
 14. Chronic wounds.
 15. Mood disorders.
 16. Psychotic disorders.
- D. Care and treatment of mental health conditions are addressed separately within DAI Policy 500.70.XX series policies.

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- E. The facility shall maintain a significant illness list which lists patients with specific chronic care conditions. The list shall contain the items listed in C above, as well as other conditions reflecting the care provided at the facility.
- F. Facilities shall ensure patients with a newly identified chronic disease are placed on the facility significant illness list.
- G. The significant illness list numbers but not individuals may be shared with the Warden/designee periodically when discussing health care planning.
- H. The patient's healthcare record shall identify any chronic disease conditions. The ACP is responsible for updating the healthcare record.
- I. The BHS Medical Director shall periodically review Chronic Disease Management to ensure compliance through facility audits and make recommendations for improvements/change based on audit results.

II. Chronic Care Clinics

- A. Patients with chronic disease conditions shall have regularly scheduled ACP chronic care visits at time intervals based on recommended guidelines as determined by the ACP.
- B. Documentation in the healthcare record shall confirm that the ACP follows chronic disease protocols and special needs treatment plans as clinically indicated.
 - 1. Completing the specific treatment care plan for the identified chronic condition.
 - 2. Determine the frequency of follow-up for medical evaluation based on disease management.
 - 3. Monitor the patient's condition and take appropriate action to improve patient outcome.
 - 4. Indicate the type and frequency of diagnostic testing and therapeutic regimens (e.g., diet, exercise, medication).
 - 5. Document patient education (e.g., diet, exercise, medication).
 - 6. Clinically justify any deviation from the protocol.
- C. Chronic illnesses and other special needs requiring a treatment plan are listed on the diagnoses or problem list.
- D. Medical and dental orthoses, prostheses, and other aids to reduce effects of impairment are supplied in a timely manner when patient health would otherwise be adversely affected, as determined by the responsible physician or dentist.

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- E. All aspects of the standard are addressed by written policy and defined procedures.
- F. More than one chronic disease may be evaluated at a chronic care visit.
- G. Laboratory testing and additional studies shall be ordered and available for the follow up visit.
- H. Co-payment shall not be charged for chronic care visits per DAI Policy 316.00.01.


III. Discontinuing Chronic Care

- A. If a patient is deemed to no longer have a specific chronic disease, a notation including rationale will be made in the Health Care Record.
- B. The facility shall remove the patient from the significant illness list.

Bureau of Health Services: Michael Rivers **Date Signed:** 8/31/20
Michael Rivers, Director of Healthcare 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: 500.30.55	Page 5 of 5
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Patients with Chronic Disease Services and Other Special Needs		
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.

B.

1.

2.

a.

b.

c.

3.

C.

II.

III.

RESPONSIBILITY

I. Staff

II. Inmate

III. Other