 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.64	Page 1 of 5
	Original Effective Date: 04/07/14	New Effective Date: 01/11/21
	Supersedes: 500.30.64	Dated: 10/28/14
	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 Special Health Needs		

POLICY

Division of Adult Institution facilities shall ensure patients with chronic disease, 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 Patients with Chronic Disease and Other Special Needs
DAI Policy 306.00.02 – Escorting and Transportation of Pregnant Inmates
DAI Policy 500.30.09 – Provision of Services to Pregnant Inmate Patients
DAI Policy 500.70.14 – Mental Health Multidisciplinary Teams
DAI Policy 500.70.16 – Mental Health Treatment – General Population
DAI Policy 500.70.17 – Mental Health Treatment – Special Units
DAI Policy 500.70.19 – Mental Health Treatment Plans
Wis. Statutes s. 302.38 – Medical Care of Prisoners
Wis. Statutes s. 302.385 – Correctional Health Care

DEFINITIONS, ACRONYMS AND FORMS

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

HCR – Healthcare record

Special Needs Patients – Those patients with health conditions that require regular care.

Treatment Plan – Series of written statements specifying a patient's particular course of therapy and the roles of qualified health care professionals in carrying out the plan.

PROCEDURE

I. Special Health Needs Patients

A. Special health needs include, but are not limited to:

1. Physical disabilities, including mobility impairments (e.g., amputations, paraplegia, quadriplegia) or significant visual, hearing or speech impairments.
2. Cognitive disabilities that result in the need for assistance with activities of daily living.
3. Frail or elderly patients who require assistance in activities of daily living.

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4. Pregnant patients. Applicable policies are DAI Policy 500.30.09 and DAI Policy 306.00.02.
5. Patients with serious mental illness and alcohol and other substance abuse. Applicable mental health policies are in the DAI Policy 500.70.XX series.
6. Intellectually disabled patients who need extra planning or assistance to be successful in the correctional environment or who need special attention to their physical safety.
7. Juveniles sentenced as adults.
8. Patients with recent hospitalizations, emergency room visits and or urgent care visits may qualify as special needs patients.

B. Special health needs shall be listed in the healthcare record (HCR).

C. The facility shall maintain a list of special health needs patients.

II. Treatment Plans

- A. Individual treatment plans shall be developed by an ACP or other licensed health care staff at the time the condition is identified and updated when warranted.
- B. Health care staff shall document special needs encounters in the HCR. Documentation shall include at a minimum:
 1. Short and long term goals.
 2. Evaluation, assessment and current status.
 3. The frequency of follow-up for medical evaluation and adjustment of treatment modality addressed.
 4. The type and frequency of diagnostic testing and therapeutic regimens.
 5. Instructions about diet, exercise, adaptation to the correctional environment and medications.
- C. Licensed nurses may be assigned to follow special needs patients to help assure compliance with medication, diet and the special need treatment plan in between ACP visits.
- D. Multidisciplinary treatment plans may be needed to meet a patient's special health needs in the correctional environment.
- E. Regularly scheduled multidisciplinary meetings shall be held to discuss individual patients who require a multidisciplinary approach to meet their needs.
 1. Multidisciplinary treatment plans shall be documented in the HCR
 2. A summary of pertinent information shall be included.

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III. Provision of Aids to Impairment

- A. Chronic illnesses and other special needs requiring a treatment plan are listed on the problem list in the healthcare records (HCR). Confirm patients receive prescribed aids to impairment.
- B. 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. These items include, but are not limited to:
 - 1. Orthoses.
 - 2. Prostheses.
 - 3. Aids to Impairment.
- C. Aids to impairment become the personal property of the patient and shall be transferred with the patient from facility to facility.

IV. Security Risks and Concerns Related to Aids to Impairment

- A. Security shall not remove aids to impairment from a patient's possession unless a significant security risk is identified.
- B. When there is a significant security risk and aids to impairment are contraindicated, security shall consult with Health Services (on site or on call) for consideration of alternatives so the health needs of the inmate patient are met.

V. Repair and Replacement of Aids to Impairment

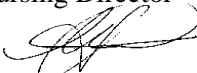
- A. DAI Policy 500.10.12 and 500.40.06 shall be followed for repair or replacement of aids to impairment items that cost over \$500.00. The following considerations shall be made prior to considering a request for items:
 - 1. Relative need or overall necessity, including history of use.
 - 2. Urgency of need.
 - 3. Time left on sentence.
 - 4. Morbidity mortality.
 - 5. Functional disability and expected improvement.
 - 6. Alternatives.
 - 7. Risks and benefits.
 - 8. Cost/benefit.
 - 9. Security concern.
- B. Refer to DAI Policy 316.00.01 for inmate patient copayment for repair or replacement of aids to impairment items.

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Bureau of Health Services: Michael Rivers **Date Signed:** 1/8/21
Michael Rivers, Director of Healthcare Administration

Date Signed: _____
Vacant Medical Director

Mary Muse **Date Signed:** 1/8/21
Mary Muse, Nursing Director

Administrator's Approval:  **Date Signed:** 01/11/21
Makda Fessahaye, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.30.64	Page 5 of 5
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Patients With Special Health 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.
 - 1.
 - a.
 - B.
 - C.
- II.
 - A.
 - B.
 - C.