 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.70.27	Page 1 of 9
	Original Effective Date: 12/19/11	New Effective Date: 07/19/21
	Supersedes: 500.70.27	Dated: 04/20/18
	Administrator's Approval: Sarah Cooper, 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: Transgender Inmates		

POLICY

The Division of Adult Institutions shall provide appropriate treatment and accommodations for inmates who are transgender, meet DSM-5 criteria for Gender Dysphoria or have a verified intersex condition.

REFERENCES

Diagnostic and Statistical Manual of Mental Disorders, 5th Edition, (DSM-5) – American Psychiatric Association (2013).

Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People, Version 7 – World Professional Association for Transgender Health (2012)

Executive Directive 72 – Sexual Abuse and Sexual Harassment in Confinement (PREA) Prison Rape Elimination Act (PREA), Final Rule, May 2012

DAI Policy 306.17.02 – Searches of Inmates

DAI Policy 309.20.03 – Inmate Personal Property and Clothing

DAI Policy 300.00.78 – Name of Inmate and Changes to Name

DEFINITIONS, ACRONYMS AND FORMS

BHS – Bureau of Health Services

BOCM – Bureau of Offender Classification and Movement

DAI – Division of Adult Institutions

DCC – Division of Community Corrections

DOC – Department of Corrections

DOC-3474 – Psychologist Minimum Security Placement Recommendation

FTM – Female to Male

Gender Dysphoria (GD) – Discomfort or distress caused by a marked difference between an individual's expressed/experienced gender and the gender others would assign him or her. A DSM-5 diagnosis of Gender Dysphoria requires that the condition is present for at least six months and causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

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Hormonal Therapy – A physical intervention that masculinizes or feminizes the body by administration of hormones, such as testosterone or estrogen, with the purpose of reducing gender dysphoria and minimizing the risk for depression, anxiety or impairments in functioning.

Health Services Unit (HSU) Staff – Staff 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.

Intersex - A condition where sexual or reproductive anatomy or chromosomal pattern does not conform to typical definitions of male or female.

HSU – Health Services Unit

OCS – Offender Classification Specialists

MTF – Male to Female

PREA – Prison Rape Elimination Act

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

RH – Restrictive Housing

Transgender – A person whose transient or permanent gender identity (i.e. internal sense of feeling male or female) is different from the person's assigned sex at birth. A transgender individual may or may not qualify for a clinical diagnosis of Gender Dysphoria depending on the level of distress or impairment this causes.

Transgender Committee – An advisory committee formed by the DAI Administrator composed of the following: BHS Director, Medical Director, Mental Health Director, GD Medical Consultant, Psychology Director, Psychiatry Director, DCC Psychology Manager, PREA Director, Nursing Director, DAI Security Chief, Warden or Deputy Warden and others as deemed appropriate. A member of the committee may preside at the meeting to exercise guidance or direction. The committee and any presiding member shall have advisory powers only. The committee does not have any collective responsibilities, authority, power and duties vested in the body as a whole, distinct from the individual members. A representative from the Office of Legal Counsel may attend meetings to provide legal advice to the committee.

WICS – Wisconsin Integrated Corrections System

WPATH – World Professional Association for Transgender Health

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PROCEDURE

I. Identification

A. Transgender and Intersex Inmates

1. Inmates may self-identify as transgender or intersex at intake or at any other time during an incarceration.
2. If an inmate notifies staff of transgender or intersex status, staff shall notify the PSU supervisor of the status.
3. The PSU supervisor/designee shall enter "Gender Concern" into WICS Special Handling Summary and notify facility BOCM staff of the inmate's transgender or intersex status.

B. GD Inmates

1. For inmates who self-identify as transgender, PSU staff, psychiatry staff or a GD consultant may additionally assign a clinical diagnosis of GD, based upon DSM-5 criteria.
2. Clinical and medical staff shall document the Gender Dysphoria diagnosis in the appropriate sections of the inmate's PSU and/or HSU record.

II. Placement of Transgender and Intersex Inmates

- A. All sites are approved for transgender and intersex inmates except – Prairie du Chien Correctional Institution, Gordon Correctional Center, McNaughton Correctional Center, Chippewa Valley Correctional Treatment Facility, Flambeau Correctional Center and St. Croix Correctional Center.
- B. Facility and housing assignments shall be made on a case-by-case basis, considering the inmate's health and safety as well as potential programming, management and security concerns. An inmate's own views regarding safety shall be given careful consideration.
- C. Placement and programming assignments shall be reassessed a minimum of every six months at a reclassification hearing to review any threats to safety experienced by the inmate. The assigned OCS shall document in the WICS current offense description box: DAI Policy 500.70.27 applies to the management of this inmate with the requirement for classification review every six months.
- D. When recommending transfer of a GD or transgender inmate, BOCM and/or the classification committee shall recommend a single approved GD or transgender site. Temporary sites may be used for transportation purposes.
- E. Placement may occur at any approved site for transgender and intersex Inmates. For placements at minimum-security sites or correctional centers, PSU staff shall document on DOC-3474 the inmate does not require a single cell.

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- F. BOCM shall advise PSU staff at the sending site of a scheduled transfer prior to the transfer.
- G. PSU staff from a sending site shall notify PSU staff at the receiving site prior to the transfer of a transgender or GD inmate. PSU staff at the receiving site shall make notifications to appropriate staff within their own facility including Security Director and Deputy Warden.
- H. Inmates who have completed sexual reassignment surgery prior to incarceration shall be placed in a facility after consultation with the Transgender Committee. Placement shall be, in most cases, consistent with the reassignment treatment.
- I. For the purposes of facility placement, self-inflicted genital mutilation does not constitute sexual reassignment surgery and does not qualify an inmate for placement in a different facility.
- J. Transgender and GD inmates shall not be placed in RH on the basis of their gender identity.

III. Accommodations for Transgender and Intersex Inmates

- A. Transgender and intersex inmates may wear undergarments corresponding to the desired gender. These may be state-issued or ordered from an approved catalog and are subject to the following conditions:
 - 1. The PSU Supervisor or designee has determined that the undergarments will improve institutional adjustment, are clinically appropriate and are not contraindicated. Contraindications may include, but are not limited to:
 - a. Evidence the transgender identification is for secondary purposes and does not reflect an accurate condition.
 - b. Use of undergarments may be counter-therapeutic or increase risk of recidivism when offense-related dynamics are considered.
 - 2. Undergarments are in quantities consistent with allowed property as described in DAI Policy 309.20.03.
 - 3. Undergarments are not visible to others when leaving the cell and are not worn in a manner that is disruptive, provocative or inappropriately sized.
- B. Transgender and intersex inmates with physical characteristics of the desired gender will be required to wear clothing appropriate to those physical characteristics. For example, inmates with breast development will be required to wear a bra/support garment and shirt when outside of the cell.
- C. Make-up shall be allowed for all inmates regardless of facility, consistent with that allowed at female facilities and consistent with intended use.
- D. Transgender and intersex inmates who are indigent may submit a written request to the Health Services Unit for a chemical depilatory product for hair removal. Requests or visits for this purpose shall not result in the inmate

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being charged a co-pay. Upon verification that the inmate is indigent, HSU shall provide such products in reasonable amounts and for personal use only.

E. Showering

1. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.
2. Inmates taking cross-gender hormones or with secondary sex characteristics of the desired gender (e.g., biological males with breast development) shall shower separately from inmates who are not transgender or intersex. Security, PSU or HSU staff may make this determination.
3. For any inmate who showers separately, PSU staff shall enter a "Shower Separately" designation into the WICS Special Handling module.

F. Names

1. As per DAI policy 300.00.78, DAI shall use the name of the inmate as it appears on the first Judgment of Conviction that imposes a prison sentence, unless there is a subsequent court order for a name change. If so, a new Judgment of Conviction must be issued or the court order must specifically state "change all records."
2. Inmates may use preferred titles (Ms., Miss, Mrs. or Mr.) and/or preferred first/middle names in correspondence, provided the legal first and last name and DOC number are provided next to the preferred names/titles and are clear and legible.

G. Forms of Address

1. When a transgender or intersex inmate requests that staff use an alternate form of address, staff shall, at minimum, use gender-neutral forms of address (e.g. "Smith" or "Jones").
2. When a transgender or intersex inmate requests, staff may, at their discretion, use preferred singular pronouns (he/she, him/her) or preferred titles (Mr./Ms./Miss).

H. Pat Searches

1. Staff shall use the back of hand or bladed hand for the chest and groin area in a professional and respectful manner, and in the least intrusive manner as possible, consistent with security needs.

I. Strip Searches

Shall be conducted consistent with DAI Policy 306.17.02.

J. Urine Specimens for Drug Testing

1. Transgender and intersex inmates shall be allowed to urinate into a cup sitting down, as long as the urine stream can be visually observed by a staff member.

K. Shaving or Hair Removal in RH

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Facilities shall provide opportunities in RH to shave or apply approved hair removal products at least twice per week unless contraindicated by security concerns.

IV. Medical and Psychological Treatment for GD

- A. Not all transgender inmates will need medical or psychological care that pertains to gender issues. The inmates who require this care will generally have a clinical diagnosis of GD.

- B. Patients diagnosed with GD shall have access to clinically appropriate treatment options that may include:
 1. Psychological treatment that addresses ambivalence and/or dysphoria regarding gender and assists in better adjustment to incarceration.
 2. Appropriate psychiatric care.
 3. Hormonal or surgical treatment, in the circumstances described below.
 4. Other treatment determined to be medically necessary.

- C. Established Hormone Treatment
 1. A patient who is receiving hormonal medication at the time of DAI intake may be continued on hormonal medication, provided the following conditions are met:
 - a. The hormones represent an established treatment that has been prescribed under the supervision of a qualified physician.
 - b. The patient cooperates with DOC staff in obtaining written records or other necessary confirmation of his or her previous treatment.
 - c. DOC health care staff determine the hormones are medically necessary and not contraindicated for any reason.
 2. Hormonal therapy shall be managed by a DOC physician and/or medical consultant.
 3. If a patient chooses to discontinue hormonal medications while incarcerated and then wishes to restart hormonal medications, the Mental Health Director shall evaluate the request, review the request with the Transgender Committee as needed and make a determination.

- D. New Hormonal or Surgical Treatment
 1. Health care staff who receive an initial request from a patient for hormonal therapy or surgical procedures shall forward the request to the PSU Supervisor.
 2. The PSU Supervisor shall assign a member of the PSU staff to conduct an initial evaluation to help determine whether a GD diagnosis is appropriate and whether a more specialized evaluation is needed. The initial evaluation shall include:
 - a. A summary of mental health history in the community.
 - b. A summary of mental health history within the DOC, including emotional and behavioral stability and treatment adherence.
 - c. The patient's report of GD issues and what type of transition services are being requested.

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- d. A description of prior medical or mental health treatment records related to GD, when present.
 - e. Observations of housing unit staff, when relevant.
 - f. Current mental status.
 - g. Current diagnoses. Comment on any significant differences from psychiatry diagnoses. A diagnosis of Gender Dysphoria may be assigned, not assigned or deferred.
3. The patient shall cooperate with DOC staff in obtaining written records or other necessary confirmation of previous treatment, when available.
 4. The PSU staff member shall submit his/her report to the Mental Health Director, who shall review the PSU report and determine whether further review and/or evaluation from an outside consultant is needed to assist with determining the most appropriate and necessary treatment to meet the patient's needs.
 5. If an outside consultant is utilized, the consultant shall forward a written report with recommendations to the Mental Health Director for review.
 6. The Mental Health Director may review the consultant's recommendations for hormonal or surgical treatment with treating PSU or medical staff, the Medical Director or Transgender Committee for further input.
 7. Recommendations from outside consultants are not binding on the DOC; the Bureau of Health Services has the authority and responsibility to determine what constitutes a patient's necessary medical care.
 8. If new information becomes available that would significantly affect an earlier recommendation (e.g. prior treatment records become available), the Mental Health Director may request a new evaluation or reconsider prior treatment decisions.
 9. For surgical interventions:
 - a. Eligible, medically necessary procedures may include genital and chest surgeries.
 - b. If the outside consultant supports moving ahead with a proposed procedure, he/she shall write the conclusions of the report in a format consistent with a Letter of Readiness as described in WPATH standards and as required by community surgical clinics that specialize in the procedure.
 - c. If section b (above) is satisfied, the Mental Health Director shall arrange for a referral to a second outside consultant to evaluate suitability for the procedure and if appropriate, to provide a second Letter of Readiness.
 - d. If there are two Letters of Readiness that are consistent in endorsing a specific procedure, the patient may request that he/she be referred for further evaluation at a local surgical clinic. At the DOC's discretion, chest surgeries may require only one Letter of Readiness.
 - e. Wait times for scheduling surgical consultations and procedures at community clinics are outside the control of the DOC. Incarcerated individuals are placed in the same scheduling queues as individuals residing in the community. If proposed procedures are scheduled past

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an individual's release date, the DOC will assist in transition planning to the extent possible.

V. Transgender Committee

- A. Shall convene at least quarterly.
- B. Shall address issues pertaining to inmates or offenders who are transgender or diagnosed with GD or an intersex condition. Facility staff may address concerns regarding treatment or services to the Transgender Committee members.
- C. May consult with community-based providers who specialize in the evaluation and treatment of GD to make recommendations regarding medically necessary treatment.
- D. Shall make recommendations as needed regarding management issues, allowed property and accommodations.
- E. May consult with security staff at the facility where an inmate resides when making recommendations regarding management and plans of care.

VI. Release Planning

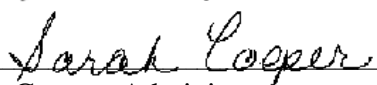
For inmates who will be on community supervision upon release, PSU staff shall inform an inmate's agent of the inmate's transgender status 60 days prior to release and make recommendations regarding appropriate conditions of supervision in the community.

Bureau of Health Services:  **Date Signed:** 07/09/21
Michael Rivers, Director

 **Date Signed:** 07/09/21
Dr. Daniel La Voie, Medical Director

 **Date Signed:** 07/09/21
Dr. Kevin Kallas, Mental Health Director

 **Date Signed:** 07/09/21
Mary Muse, RN, Nursing Director

Administrator's Approval:  **Date Signed:** 07/09/21
Sarah Cooper, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility:		
Original Effective Date:	DAI Policy Number: 500.70.27	Page 9 of 9
New Effective Date:	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Transgender Inmates		
Will Implement <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval:		

PURPOSE

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