



WISCONSIN DEPARTMENT OF CORRECTIONS

Governor Tony Evers / Secretary Kevin A. Carr

GUIDANCE DOCUMENT CERTIFICATION

I have reviewed this guidance document or proposed guidance document and I certify that it complies with sections §227.10 and §227.11 of the Wisconsin Statutes.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is not explicitly required or explicitly permitted by a statute or a rule that has been lawfully promulgated.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is more restrictive than a standard, requirement, or threshold contained in the Wisconsin Statutes.

James Greer

Name of Individual Certifying this Document/Proposed Document


Director, Bureau of Health Services

Title

Signature

Date Signed

Department of Corrections – Wisconsin
Office of the Secretary
Wis. Stat. § 227.112(6)
DOC-2910 (6/2019)

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.40	Page 1 of 9
	Original Effective Date: 02/15/04	New Effective Date: 10/01/16
	Supersedes: 500.30.40	Dated: 06/22/15
	Administrator's Approval: Jim Schwochert, 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: Medical Clearance for the Challenge Incarceration Program		

POLICY

The Division of Adult Institutions shall ensure all candidates for the Challenge Incarceration Program be medically cleared and monitored for and during participation in the program. Medical clearance shall be completed prior to transfer to the St. Croix Correctional Center.

REFERENCES

Wisconsin Statutes s. 302.045 – Challenge Incarceration Program
TRADOC Standardized Physical Training Guide, U.S. Army, November 2003 (FM3-21.5 US Army July 2003)
DAI Policy 500.10.12 – Prior Authorization Guidelines for Non-Urgent Care (Class III)
DAI Policy 500.50.23 – Short Term Inmate Patient Admission Health Care Record

DEFINITIONS, ACRONYMS AND FORMS

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

ATR – Alternative to Revocation

BOCM – Bureau of Classification and Movement

Chronic medical condition – Any medical condition that requires care and treatment over a time period of 3-6 months and is usually not cured.

CIP – Challenge Incarceration Program

DCC – Division of Community Corrections

DCI – Dodge Correctional Institution

DOC-3018 – Intake Screening/Medical History

DOC-3020 – Problem List

DOC-3021 – Progress Notes

DOC-3023F – Prescriber's Orders: Standard Orders – ATR/FDOATP Admission

DOC-3050 – Medical Classification

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DOC-3052 – Dental Classification Report

DOC-3443 – Asthma Assessment

DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP)

DOC-3532 – Transfer Screening

DOC-3552 – Challenge Incarceration Program (CIP) Candidate Health Pre-Screening

HBV – Hepatitis B Virus

HCV – Hepatitis C Virus

HIV – Human Immunodeficiency Virus

HSU – Health Services Unit

PFT – Pulmonary function test

Psychotropic Medication – Medications prescribed to improve thought process, behavior, perception or emotion.

RN – Registered Nurse

SCCC – St. Croix Correctional Center

TB – Tuberculosis

WICS – Wisconsin Integrated Corrections System

PROCEDURES

I. Criteria for Participation in CIP

- A. Candidate may have no physical or medical limitations that preclude participation in strenuous physical exercise and manual labor for a minimum of six months. The current DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP) shall state:
 1. Any activity.
 2. No HSU on-site required.
- B. Shall have had a physical exam within the past 12 months.
- C. Shall have had TB screening within the past 12 months.
- D. Candidates with a chronic medical condition shall be in good health in order to participate in CIP. Presence of a chronic medical condition does not result in automatic ineligibility.

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1. May or may not be receiving treatment for the condition, but shall be stable enough to participate in strenuous exercise, and work activities for a minimum of six months.
 2. Candidates who shall require routine follow up appointments with an off-site specialist while participating in the program may not be eligible for the program.
- E. Candidates with asthma shall not be admitted into the CIP.
1. If there is a question whether the diagnosis of asthma is accurate, the ACP may:
 - a. Determine the inmate patient is medically cleared for participation in the program based upon the inmate patient's history, physical assessment and spirometry. Complete DOC-3443 – Asthma Assessment.
 - b. Determine the inmate patient is not medically cleared for participation in the program based upon the inmate patient's history, physical assessment and spirometry. Complete DOC-3443.
 - c. Order a pulmonary function test with methacholine challenge or another approved pulmonary substance or medicine. The pulmonary function test requires a prior authorization approval consistent with DAI Policy 500.10.12 prior to scheduling.
 2. If the ACP determines the diagnosis of asthma is inaccurate, they may clear the inmate patient for CIP after documenting on a DOC-3021 – Progress Notes and DOC-3443 that the inmate patient's previous asthma diagnosis is not consistent with current pulmonary function testing, along with a summary of the clinical reasoning for that decision.
- F. ECG
1. Candidates 35 years or older shall have a normal ECG completed within the past 30 days.
 2. If abnormal Q waves are found, a cardiology referral shall be made, consistent with DAI Policy 500.30.12.
 3. If the inmate patient is under the age of 35, no ECG is required unless ordered by the ACP for a specific reason relating to the inmate patient's medical history.
- G. Female candidates shall have a negative pregnancy test within the last 30 days.
- H. Candidates with Type II diabetes may be considered for the program if his or her condition is stable and controlled with oral medications and/or diet only.
- I. Candidates who are diagnosed HIV+ may be considered for CIP. The DOC Medical Director shall review each case to determine medical clearance.
1. Pertinent copies of the DOC medical record with the most recent laboratory findings and immunology consultation reports shall be forwarded to the Medical Director for review.

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2. The Medical Director shall consult with the Immunology practitioner assigned to the inmate patient's case and discuss the appropriateness of the inmate patient's candidacy for the CIP.
 3. The facility health care staff shall document the Medical Director's decision on a DOC-3021 – Progress Notes.
- J. Candidates who are HBV+ or HCV+ may be eligible if they are currently not receiving treatment or will not require off-site follow-up care for the next six months.
- K. Candidates shall not be taking psychotropic medications for the past three months.
- L. Any pending off-site appointment, labs, x-rays or prior authorizations under DAI Policy 500.10.12 shall be completed prior to determining inmate patient's program eligibility. Lab work that needs to be done on a regular basis may be accommodated by the CIP program.
- M. The following inmate patients are ineligible for CIP, including, but not limited to those who:
1. Use an oxygen concentrator, CPAP or BiPAP.
 2. Are prescribed an inhaler.
 3. Are prescribed methotrexate.
 4. Take medication for chronic pain management.
 5. Have a dental classification of 36 or 40. See DOC-3052 – Dental Classification Report.
 6. Are on clinical monitoring by Psychological Services.

II. Guidelines for Exercise Within the Framework of the CIP

- A. Guidelines for physical fitness follow the American College of Sports Medicine standards intended to assist in the formulation of a physically sound program.
1. Frequency: Seven day rotation, targeting specific areas of the body; i.e., upper body, lower body, cardiovascular. Warm up for five to ten minutes.
 2. Mode of fitness: Walking, jogging, running, obstacle course, exercises, calisthenics.
 3. Duration: 20 to 45 minutes of continuous rhythmical activity, then gradually decrease the intensity of the workout, then stretch to cool down during the last five to ten minutes.
 4. Intensity: Heart rate should be between 120 to 180 beats per minute. This is to be calculated as follows:
 - a. Take $220 - \text{age} =$ (this is the maximum): standard deviation for this equation is 10 – 12 beats per minute.
 - b. Determine the lower-limit exercise heart rate by multiplying the maximum heart rate by 0.6
 - c. Determine the upper-limit exercise heart rate by multiplying the maximum heart rate by 0.9.
 - d. The exercise heart rate is between the upper and lower limits.

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- B. Inmate patients in the CIP who deviate from the safe parameters of exercise duration and heart rate shall be temporarily excused from physical training until evaluated by a licensed health care professional.
- C. The exercise requirements shall be provided prior to their commitment.

III. Screening

- A. Candidates for CIP currently residing in a DAI facility
 - 1. Candidate Health Pre-Screening
 - a. BOCM staff at DCI/TCI intake and social workers at all other facilities shall identify CIP eligible inmates who are being considered for transfer to a CIP program site.
 - b. The inmate shall complete the DOC-3552 – Challenge Incarceration Program (CIP) Candidate Health Pre-Screening prior to referral to HSU.
 - c. Based on the results of the pre-screening, the HSU shall be notified as to which inmates need to be assessed by HSU to determine CIP medical clearance.
 - 2. Health screening shall be completed at current facility.
 - a. A RN shall complete the following:
 - i. Complete an assessment and chart review for the CIP candidate, and document on the DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP) to determine CIP eligibility.
 - ii. Obtain orders for tests as needed from the ACP.
 - iii. Refer for assessment and physical exam, as needed, to complete DOC-3500.
 - iv. If the CIP candidate meets the medical clearance criteria identified on the DOC-3500 without the need for referral to the ACP, the nurse clinician may report the candidate has met medical clearance approval for the CIP.
 - v. A WICS entry to indicate health services approval or denial of CIP medical clearance without changing the ACP's part of the medical classification.
 - vi. A note indicating the date of the most recent physical examination shall be included in WICS under Comments in Medical Classification for those candidates approved for participation in CIP.
 - b. An ACP shall complete the following:
 - i. A physical examination of the CIP candidate as determined medically necessary or if a physical exam has not been completed within the previous 12 months.
 - ii. Order pulmonary function test with methacholine challenge or another approved pulmonary substance or medicine, along with other specialty consultations as needed. Prior authorization for the referral(s) is necessary consistent with DAI Policy 500.10.12.

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- iii. Ensure all current acute and chronic medical conditions are documented on DOC-3020 – Problem List.
 - iv. Assess the CIP candidate for any medical related issues referred by the RN as documented on the DOC-3500. Complete the DOC-3500 to provide approval or denial of CIP medical clearance.
 - v. Provide the completed DOC-3500 to the RN to ensure medical clearance approval or denial for CIP is entered into WICS.
 - c. DOC-3500 shall be completed within 30 days of the referring request.
- B. Candidate referred to CIP from DCC as an ATR
1. All ATR candidates shall be pre-screened to identify individuals who may meet the CIP criteria.
 - a. DCC agent shall ask the candidate to complete a DOC-3552 – Challenge Incarceration Program (CIP) Candidate Health Pre-Screening.
 - b. The DCC agent shall file a copy of the DOC-3552 in the DCC file.
 - c. The DCC agent shall ensure the original copy of the DOC-3552 is returned to CIP at SCCC, along with the completed CIP packet.
 - d. The CIP staff shall contact the DCC agent to notify the agent of approval or denial for participation.
 - e. If approved into the program, the DCC agent shall arrange inmate placement at a designated ATR/CIP screening facility.
 2. HSU staff shall assess ATR candidates by completing intake screening and physical exam to determine CIP medical clearance.
 3. HSU shall complete the intake screening consistent with DAI Policy 500.50.23 upon the inmate patient's arrival at the designated DOC facility including the following:
 - a. Completion of DOC-3018 – Intake Screening/Medical History.
 - b. Face-to-face assessment by a RN.
 - c. Completion of intake orders DOC-3023F – Prescriber's Orders: Standard Orders – ATR/FDOATP Admission.
 4. Screening for CIP medical clearance shall include:
 - a. Review of the DOC-3018 by a qualified healthcare professional.
 - b. Obtaining orders as needed from the ACP.
 - c. Assessment and physical exam as needed to complete DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP). Assessments shall be completed by an ACP.
 - d. Completion of pulmonary function testing with methacholine challenge or another approved pulmonary substance or medicine, ECG, Lab tests, and other consultations as needed. Prior authorization for the referral(s) is necessary consistent with DAI Policy 500.10.12.
 - e. Ensure documentation of all current acute and chronic medical conditions on DOC-3020 – Problem List.
 - f. Completion of DOC-3500 within 10 days of admission.

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IV. Approval or Denial

- A. HSU staff shall document approval or denial of CIP medical clearance on the DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP).
- B. HSU staff shall ensure approval or denial of CIP medical clearance has been entered in WICS.

V. Screening at CIP Facility

- A. RN shall complete assessment of inmate patient's vital signs and weight.
- B. RN shall review the Medical Chart to ensure the DOC-3500 – Medical Clearance Assessment for Challenge Incarceration Program (CIP) has been completed and medical clearance for CIP has been documented.
- C. RN shall complete the remainder of the DOC-3532 – Transfer Screening as part of transfer screening, and schedule follow-up appointments as needed.
- D. RN shall review with the inmate patient how to access health care while at the CIP facility.

VI. Responsibilities of CIP Staff During Participation

- A. The RN shall teach inmates how to measure heart rates.
- B. Inmates reporting heart rates outside the defined parameters (take $220 - \text{age}$ = (this is the maximum): standard deviation for this equation is 10 -12 beats per minute or any other health related concern during participation to Correctional Officers shall be temporarily excused from physical training until evaluated by a licensed health care professional.
- C. The RN shall assess inmate patients who are referred for health care evaluation or who themselves request health care.
 - 1. The RN shall complete an assessment consistent with professional standards and determine if the inmate patient is able to continue the current physical training.
 - 2. The assessment includes collaboration and consultation with an ACP as identified by the RN.
- D. The ACP shall determine continuing medical eligibility based on inmate patient condition.

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Bureau of Health Services: _____ **Date Signed:** _____
James Greer, Director

_____ **Date Signed:** _____
Ryan Holzmacher, MD, Medical Director

_____ **Date Signed:** _____
Mary Muse, Nursing Director

Administrator's Approval: _____ **Date Signed:** _____
Jim Schwochert, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.30.40	Page 9 of 9
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Medical Clearance for the Challenge Incarceration Program		
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.