



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 #: 500.50.08	Page 1 of 16
	Original Effective Date: 05/15/04	New Effective Date: 08/25/14
	Supersedes: BHS500:08	Dated: 10/01/08
	Administrator's Approval: Cathy A. Jess, 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: Access by Inmate Patients to Their Health Care Records		

POLICY

All Division of Adult Institution facilities shall permit inmate patients to inspect and/or obtain copies of documents in their Department of Corrections Health Care Records in accordance with applicable policies and procedures, and Wisconsin and federal laws.

REFERENCES

Wisconsin Statutes s. 51.30 – State Alcohol, Drug Abuse, Developmental Disabilities and Mental Health Act; Records
Wisconsin Statutes ss.146.81-.84 – Miscellaneous Health Provisions
Wisconsin Statutes Ch. 980 – Sexually Violent Persons Commitment
42 C.F.R. Part 2 – Confidentiality of Alcohol and Drug Abuse Inmate patient Records
45 C.F.R. Part 164 – Health Insurance Portability and Accountability Act
Executive Directive 71 – Language Assistance Policy and Implementation for Addressing the Needs of Offenders with Limited English Proficiency (LEP)
DAI Policy 300.00.61 – Limited English Proficiency (LEP) Inmates
DAI Policy 309.51.01 – Legal Loans
DAI Policy 500.30.11 – Daily Handling of Non-Emergency Requests for Health Care
DAI Policy 500.50.02 – Health Care Record Format, Content and Documentation
DAI Policy 500.50.09 – Disclosure of Protected Health Information (PHI) with Inmate Patient Authorization and Court Orders
DAI Policy 500.70.11 – Psychological Services Unit Record
Attachment 1 – Example of Redacted Document
Attachment 2 – Redacting Instructions

DEFINITIONS, ACRONYMS AND FORMS

Adult – An individual 18 years of age and older.

AODA – Alcohol and Other Drug Abuse

C.F.R. – Code of Federal Regulations

DAI – Division of Adult Institutions

Dental Service Request (DSR) – DOC-3392 form used by an inmate patient to request an appointment with a dentist, health information, copies of documents, a record review, or a DOC form needed to exercise a legal right related to the inmate patient's HCR.

DOC – Department of Corrections

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DOC-184 – Disbursement Request

DOC-1146 – Memo

DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI)

DOC-1290 – Loan Application & Repayment Agreement

DOC-1490 – End of Confinement Review Board (ECRB) Case Review Summary and Disposition.

DOC-2056 – Mental Health Screen for Wisconsin Secure Program Facility

DOC-2295 – Special Purpose Evaluation Report

DOC-2466 – Incident Report (WICS)

DOC-3021 – Progress Notes

DOC-3021D – Psychology Progress Notes (Non-Contact)

DOC-3035 – Health Services Request and Copayment Disbursement Authorization

DOC-3035B – Psychological Service Request

DOC-3041 – Dental Record (Male)

DOC-3041A – Dental Record (Female)

DOC-3326 – Signature Verification

DOC-3347 – Medical Appointments – Offsite

DOC-3370 – Psychological Records (Copies) – Medical Chart (White Envelope – Male)

DOC-3370A – Psychological Services Unit Record (Male)

DOC-3370B – Psychological Records (Copies) – Medical Chart (White Envelope – Female)

DOC-3370C – Psychological Services Unit Record (Female)

DOC-3469 – Medications Record – Medical Chart (Blue Envelope – Male)

DOC-3469A – Medications Record – Medical Chart (Blue Envelope – Female)

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DOC-3473 – Psychological Services Clinical Contact

DOC-3484 – Request by Current Patient for Amendment/Correction of Protected Health Information (PHI)

DSR – Dental Service Request

DSU – Dental Services Unit

Facility – Institution or correctional center operated by DAI.

Guardian of the Person – An individual named in a court order to act on behalf of an inmate patient found to be legally incompetent.

Health Care Agent – An individual named in a Power of Attorney for Health Care to act on behalf of an inmate patient.

Health Care Record (HCR) – Official confidential DOC record created and maintained for each inmate patient consisting of all or some of the following components: Medical Chart, Dental Services Record, Psychological Records-Copies envelope, Medications Record envelope, Patient Request Folder, Psychological Services Unit Record, and other components as defined by the Bureau of Health Services.

Health Information – any information, including genetic information, whether oral or recorded in any form or medium, that: is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual.

Health Service Request (HSR) – DOC-3035 form used by an inmate patient to request an appointment with health services for health information, copies of documents, a record review, or a DOC form needed to exercise a legal right related to the inmate patient's HCR.

HIPAA – Health Information Portability and Accountability Act

HIPAA Compliance Officer – Employee designated by the Secretary of the DOC under 45 CFR Part 164 to oversee implementation of and compliance with DOC policies and procedures, and Wisconsin and federal laws pertaining to confidentiality of health care information.

HSU – Health Services Unit

Individually identifiable health information – Information that is a subset of health information, including demographic information collected from an individual, and: is created or received by a health care provider, health plan, employer, or health care

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clearinghouse; and relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual; or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

Inmate patient – An individual who receives or has received health care services from a health care provider.

LEP Coordinator – Facility staff assigned to monitor compliance with LEP laws and policies, assist with provision of language assistance, and maintain records related to language assistance.

Medical Chart – Primary part of a HCR consisting of gray/green or orange/off white hard covers with metal prongs and a standard set of dividers.

Medications Record – Blue envelope maintained in the HSU that documents administration of medications.

Minor – An individual under the age of 18 years of age.

Off-Site Provider – Health provider in the community who does not provide services within a DOC facility.

Patient Request Folder – Manila folder in which forms completed by inmate patients to communicate with HSUs are stored; formerly called the Health Service Request/Medication Refill Request Folder.

POC-038 – Notice to Patients – Health Care Record Review (poster)

POC-052 – Notice of Redaction and Withholding of Documents

POC-058 – Notice to Patients – Health Care Record Review Procedures

Prescribing practitioner – Physicians, nurse practitioners and physician assistants.

Protected Health Information (PHI) – Individually identifiable health information transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium.

PSU – Psychological Services Unit

Psychological Records – Copies – White envelope maintained in HSU that contains copies of designated records filed in the PSU Record.

Psychological Service Request (PSR) – DOC-3035B form used by an inmate patient to request an appointment with psychological services, health information, copies of

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documents, a record review, or a DOC form needed to exercise a legal right related to the inmate patient's HCR.

PROCEDURES

I. General Guidelines

- A. The DOC shall provide current inmate patients with access to their HCR under this policy and in accordance with applicable Wisconsin and Federal laws.
- B. HSUs, DSUs and PSUs shall post in a visible location the POC-038 Notice to Patients – Health Care Record Review (poster) and POC-038S (Spanish version) to notify inmate patients of the procedures for requesting copies of documents and/or a record review of their HCR.
- C. HSUs, DSUs and PSUs shall follow Executive Directive 71 and DAI Policy 300.00.61 to accommodate inmate patients who require language assistance.
- D. When an inmate patient lacks sufficient reading ability to review the HCR, staff shall contact the facility education staff to inquire about the inmate patient's reading level. Consult with the Health Information Supervisor/HIPAA Compliance Officer for guidance, as needed.
- E. Contact Health Information Supervisor/HIPAA Compliance Officer regarding processing a request from a minor in a DAI facility.
- F. HIPAA regulations require that a covered entity must act upon the request for copies or a record review no later than 30 calendar days after receipt of the request which means that HSUs, DSUs and PSUs shall complete requests for copies and record reviews within 30 calendar days, unless the HIPAA Compliance Officer grants a request by a HSU, DSU or PSU for an extension due to extenuating circumstances.
- G. Inmate patients shall request copies and record reviews on a HSR, DSR, or PSR. HSUs, DSUs and PSUs shall educate inmate patients when they use the incorrect form, but shall honor all written requests.
- H. Prior to a record review or the copying of documents, HSU, DSU or PSU shall page through the relevant part of or entire HCR to determine if it includes any documents that pertain to another inmate patient and immediately remove and file the misfiled document in the appropriate HCR. It is a reportable HIPAA breach if an inmate patient accesses in any way a document pertaining to another inmate patient.

II. Processing Requests by Adult Inmate Patients for Copies of Documents

- A. Inmate patients who want copies of documents shall complete a HSR, DSR or PSR checking the box for requesting copies and specifically describing as much of the following as possible: type of document(s), title of document(s),

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author if known, and the date(s), along with a partially completed DOC-184 – Disbursement Request.

- B. Facilities shall not require a record review when an inmate patient clearly describes in the HSR, DSR or PSR, the record(s) the inmate patient wants copied.
- C. Staff triaging the requests shall complete the bottom portion of the HSR, DSR or PSR acknowledging receipt of the request for copies and return the copy to the inmate patient, and forward the request to the staff responsible for making copies.
- D. Designated staff shall keep a log of the names/DOC numbers, dates of requests and dates copies are provided to track the timeliness of responses. HSUs, DSUs and PSUs shall also enter the required information into the BHS HIPAA Compliance and Review portion of SharePoint.
- E. When health staff cannot easily determine which records the inmate patient is requesting on the HSR, DSR or PSR, staff shall send the inmate patient a DOC-1146 – Memo, or respond on the bottom of the HSR, DSR or PSR, stating that the request cannot be processed as written, and that a record review will be scheduled within 30 days. See Section III below.
- F. When the request for copies is clear, staff shall check the Medical Chart – Consents/Refusals Section, Dental Record – Consents/Authorizations/DJC Documents Section, or the PSU Record – Legal Documents/ Consents/Outside Records Section for a valid DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI), and, if none is found, send a DOC-1163A to the inmate patient.
 1. Prior to sending a DOC-1163A to the inmate patient, enter the following information in the first section of the form:
 - a. Disclosing entity: Department of Corrections, Bureau of Health Services, 3099 E. Washington Avenue, Madison, Wisconsin, 53704.
 - b. Telephone Number: (608) 240-5152.
 - c. Fax number: Not required.
 - d. Use of the DOC Central Office information, rather than a specific facility, is preferred due to the frequent movement of inmate patients between facilities.
 2. Enter the inmate patient's name/DOC number/address in the "subject of the PHI" and "recipient" sections of the form. Do not include current facility because of frequent movement between facilities.
 3. Staff shall suggest to the inmate patient that "end of incarceration" be entered as the effective expiration date, so that a new form need not be obtained each time the inmate patient wants copies. Authorization expires in one year if no event or date is entered.

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4. A court appointed guardian of the person or health care agent under an activated Power of Attorney for Health Care may sign the DOC-1163A on behalf of the inmate patient.
 5. An inmate patient may not use a DOC-1163A to authorize another inmate to receive copies from his/her HCR.
- G. When the request for records is clear, a valid DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI) exists, and the inmate patient submitted a DOC-184 – Disbursement Request, count the pages, assess the fees at 15 cents per side of a page, verify the inmate patient has adequate funds available, and make the copies.
1. Do not make copies without verifying adequate funds.
 2. Submit the completed DOC-184 to the Business Office with a copy to the inmate patient.
 3. See Section V. regarding legal loans.
- H. When the inmate patient has not submitted a DOC-184 – Disbursement Request, count the number of pages being requested, and notify the inmate patient via DOC-1146 – Memo of the copying costs. Advise the inmate patient that the copies shall be provided when the DOC-184 is returned showing that the inmate has adequate funds.
- I. Inmate patients may no longer obtain a free copy of laboratory or medical imaging results. The HSUs will notify them of those results.
- J. An inmate patient may receive one free copy of an optical prescription when requested at the time of the appointment. The health provider conducting the examination shall offer the copy to the inmate patient. The copying fee shall be charged for another copy.
- K. Inmate patient may not obtain a copy of the following records for security or confidentiality reasons:
1. DOC-3347 – Medical Appointments – Off-Site: filed in Medical Chart.
 2. DOC-3326 – Signature Verification: filed in the Medical Chart.
 3. Documents filed in the PSU Record, Restricted Section, in accordance with DAI Policy 500.70.11, including but not limited to the following:
 - a. DOC-2056 – Mental Health Screening for Wisconsin Secure Program Facility.
 - b. Victim statements.
 - c. Copyrighted documents whether or not the inmate patient's name appears on the document; e.g., psychological testing instruments
 - d. Pre-sentence Investigation Reports.
 - e. Non-redacted copies of documents in PSU Record that include information from the Presentence Investigation Report. Inmate patients may obtain a copy of the redacted documents.
 - i. References to Presentence Investigation Report may be found in documents such as the DOC-2295 – Special Purpose Evaluation

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Report; DOC-1490 – End of Confinement Review Board (ECRB) Case Review Summary and Disposition; and DOC-3473 – Psychological Services Clinical Contact.

- ii. See Attachment 1 – Example of Redacted Document and Attachment 2 – Redacting Instructions.

L. Request for copies from Patient Request Folder

1. When an inmate patient wants to review the contents of the Patient Request Folder that have been removed and scanned into Electronic Content Management database, a search must be done in that database.
2. Contact Health Information Supervisor/HIPAA Compliance Officer for information about obtaining access to the database, and Central Medical Records for instructions for doing searches.

M. Request for copy of computer disk

When an inmate patient requests a copy of a computer disk containing medical images that is filed in the Medical Chart, do the following:

1. Advise the inmate patient that for security and technological reasons, the DOC does not make copies of disks for inmate patients.
2. Print images from disk, when possible, and charge copying fee per page of images.
3. Inform the inmate patient that images on the disk may be viewed in the presence of a provider when inmate patient submits a HSR making that request.

N. Request for off-site billing/payment information

When an inmate patient requests billing/payment information and/or diagnostic/treatment codes for an off-site appointment, advise inmate patient to complete a DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI) including the date of service and off-site provider; e.g., Waupun Memorial Hospital, April 14, 2014, and send it to the Health Information Supervisor/HIPAA Compliance Officer.

1. Forty-five to 60 days after the date of service, off-site information will be retrieved and forwarded to the Health Services Manager.
2. Designated health staff shall obtain a DOC-184 – Disbursement Request from the inmate patient prior to giving the inmate patient copies of the information.

O. Failure to meet 30 calendar day timeline

1. When staff processing the request realize that copies will not be provided to the inmate patient within 30 calendar days of the request, he or she shall email the Health Information Supervisor/HIPAA Compliance Officer and provide clear explanation for the delay.
2. Health Information Supervisor/HIPAA Compliance Officer shall decide whether to grant a 30 day extension.

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3. When an extension is granted, the HSU, DSU, or PSU shall notify the inmate patient using a DOC-1146 – Memo of the date the copies shall be provided to the inmate patient and reason for the extension.
4. When an extension is not granted, the copies shall be provided to the inmate patient immediately.
5. Requests for extensions shall be documented in the BHS HIPAA Compliance and Review portion of SharePoint.

P. Reporting a Breach

1. If an inmate patient reports receiving a copy of a document about another inmate, retrieve the document as soon as possible, but no later than 24 hours after learning of the breach.
2. Notify the HIPAA Compliance Officer of the breach via email including:
 - a. Name and DOC number of the inmate who viewed the document,
 - b. Name and DOC number of the inmate whose document was found misfiled,
 - c. A description of the document.
 - d. Date/time and circumstances of the incident.
3. If the inmate patient whose document was given to the wrong inmate patient is at the facility, file document in the correct location in the HCR.
4. If inmate patient whose document was given to the wrong inmate patient is not at the facility, determine location in WICS, and forward document to location of the HCR.

III. Processing Requests by Adult Inmate Patients to Review/Inspect Their HCRs

- A. Federal and Wisconsin health records laws do not authorize limitations on the frequency with which an inmate patient may inspect his/her records.
 1. Facilities shall not establish policies that limit reviews: e.g., policy shall not state that reviews may only be every six months.
 2. When an inmate patient requests reviews so frequently that responding to the requests interferes with the ability to process requests from other inmate patients in a timely manner, contact the Health Information Supervisor/HIPAA Compliance Officer, and provide detailed information about the frequency of the requests.
- B. An inmate patient shall complete a HSR, DSR and/or PSR to request an appointment to review all or a portion of his/her HCR.
- C. Staff triaging the requests shall complete the bottom portion of the HSR, DSR or PSR acknowledging receipt of the record review request and return the copy to the inmate patient. Staff shall then forward the request to the staff responsible for scheduling the record review.
 1. Designated staff shall keep a log of the inmate names/DOC numbers, dates of receipt of the requests, and dates of the record reviews in order to track that reviews are being done in a timely manner.

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2. Information shall also be entered into BHS HIPAA Compliance and Review portion of SharePoint.
- D. Staff shall notify inmate patients of the date and time of record review appointments per facility policy.
- E. Failure to meet 30 calendar days timeline
1. Staff shall email the Health Information Supervisor/HIPAA Compliance Officer if the appointment cannot be scheduled within 30 calendar days of the request and provide an explanation for the delay.
 2. Health Information Supervisor/HIPAA Compliance Officer shall decide whether to grant a 30 day extension.
 3. When an extension is granted, the HSU, DSU, or PSU shall notify the inmate patient using a DOC-1146 – Memo of the date of the record review and reason for the extension.
 4. When an extension is not granted, the record review shall be scheduled immediately.
 5. Requests for extensions shall be documented in the BHS HIPAA Compliance and Review portion of Share Point.
- F. When an inmate patient states the review needs to be scheduled in fewer than 30 calendar days for legal reasons and the inmate patient makes the request a reasonable number of days (10 or more calendar days) prior to the review date requested, the request shall be honored only if the inmate patient provides written documentation showing the legal need.
- G. Check the Medical Chart – Consents/Refusals Section, Dental Record – Consents/Authorizations/DJC Documents Section, or the PSU Record – Legal Documents/Consents/Outside Records Section for a valid DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI), and, if none is found, send a DOC-1163A to the inmate patient.
1. Prior to sending a DOC-1163A to the inmate patient, enter the following information in the first section of the form:
 - a. Disclosing entity: Department of Corrections, Bureau of Health Services, 3099 E. Washington Avenue, Madison, Wisconsin, 53704.
 - b. Telephone Number: 608 240-5152.
 - c. Fax number: Not required.
 - d. Use of the DOC Central Office information, rather than a specific facility, is preferred due to the frequent movement of inmate patient's between facilities.
 2. Enter the inmate patient's name and DOC number in the "subject of the PHI" and "recipient" sections of the form. Do not include current facility because of frequent movement between facilities.
 3. Staff shall suggest to the inmate patient that "end of incarceration" be entered as the effective expiration date, so that a new form need not be obtained each time the inmate patient wants copies. Authorization expires in one year if no event or date is entered.

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4. A court appointed guardian of the person or health care agent under an activated Power of Attorney for Health Care may sign the DOC-1163A on behalf of the inmate patient.
 5. An inmate patient may not use the DOC-1163A to authorize another inmate to review the HCR.
- H. A facility may request, but not require, the inmate patient sign the DOC-1163A prior to the day of the appointment. The appointment may not be delayed because the DOC-1163A has not been signed before the day of the appointment.

IV. Review of HCR

A. HSU

Inmate patients doing a review based upon a HSR may review their Medical Chart, Patient Request Folder and Medications Record (blue envelope).

1. Staff shall remove from the Medical Chart, for security reasons, a DOC-3347 – Medical Appointments – Off-Site, that contains information regarding one or more future appointments at an off-site location or any other documents that may reveal any future offsite appointments.
2. Staff shall remove from the Chart, the DOC-3370/3370B– Psychological Records (Copies) – Medical Chart (White Envelope – Male/Female) which contains copies of documents from the PSU Record. Advise inmate patients to complete a PSR to request review of their PSU Record.
3. Documents created by non-DOC health providers may remain in the HCR for review by the inmate patient even if marked with “do not release”, or similar phrase. The “do not release”, or similar phrase, does not apply to a record review by the subject of the document.
4. Inmate patients may review the DOC-3326 – Signature Verification sheets, but may not obtain a copy due to identify theft concerns.

B. DSU

Inmate patients doing a review based upon a DSR may review their Dental Record.

C. PSU

Inmate patients doing a record review based upon a PSR may review their PSU Record.

1. Prior to the review, staff shall remove the documents from the Restricted Access section of a PSU Record, in accordance with DAI Policy 500.70.11, including but not limited to:
 - a. DOC-2056 – Mental Health Screening for Wisconsin Secure Program Facility.
 - b. Victim statements.
 - c. Copyrighted documents whether or not the inmate patient’s name appears on the document; e.g., psychological testing instruments.
 - d. Pre-sentence Investigation Reports.

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- e. Non-redacted documents that include information from the Presentence Investigation Report.
 - i. References to Presentence Investigation Report may be found in documents such as the DOC-2295 – Special Purpose Evaluation Report; DOC-1490 – End of Confinement Review Board (ECRB) Case Review Summary and Disposition; and DOC-3473 – Psychological Services Clinical Contact.
 - ii. See Attachment 1 – Example of Redacted Document and Attachment 2 – Redacting Instructions.
 2. Staff may remove from the PSU Record copies of the Psychiatric Reports and advise the inmate patient to submit a HSR to request a record review of the Medical Chart which contains the complete set of original Psychiatric Reports.
 3. Documents created by non-DOC health providers may remain in the PSU Record for review by the inmate patient even if marked with “do not release”, or some similar phrase. The “do not release”, or similar phrase, does not apply to a record review by the subject of the document.
 4. Trained employees approved by the Mental Health Director shall handle PSU Record review requests at a correctional center with no PSU on site.
- D. Supervision of Record Review
1. Provide the inmate patient with access to a POC-0058 – Notice to Patients – Health Care Record Review Procedures by giving the inmate patient his/her own copy, posting it in the record review area, or placing it in a sheet protector for review.
 2. Supervise the review to prevent alteration, destruction or removal of documents or any part of the HCR, and to protect the privacy of the inmate patient.
 3. Provide the inmate patient with a method to indicate the copies desired, if any, such as paper clips or post-it notes/flags. Inform the inmate patient that a fee of 15 cents per side of a page shall be charged. See Section V below regarding fees.
 4. Provide the inmate-patient with a method for taking notes including paper and a pencil or red pen. Do not allow an inmate to have any writing instrument, except for the one provided by the HSU, DSU or PSU.
 5. A red pen insert, or other way of taking notes, shall be provided if a regular pen is not permitted for security reasons such as in Segregation or Observation.
 6. In situations wherein an inmate patient must review the HCR through a glass partition with the employee holding the pages up to the glass, provide a security approved writing instrument which may be of any color because inmate patient has no direct access to the HCR. If the inmate patient is on one side of the glass with the HCR, and the employee is on the other side of the glass, provide a red pen insert, if permitted by security.
 7. At the end of the review appointment, retrieve the writing instrument from the inmate patient.

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8. Inmate patient may take his/her handwritten notes to his/her cell unless prohibited for security reasons.
- E. Advise the inmate patient to complete an HSR, DSR or PSR if questions arise about the content of documents being inspected, so that a health provider may respond to the questions.
- F. Advise the inmate patient to complete a DOC-3484 – Request by Current Patient for Amendment/Correction of Protected Health Information (PHI) if the inmate patient believes a document contains inaccurate information.
- G. May permit more than 30 minutes when staff is available.
- H. May permit more than one inmate patient to do a review at the same time if seating can be arranged in a manner that provides privacy to each inmate patient and staff can adequately monitor all inmate patients completing reviews. Close supervision is extremely important.
- I. End the record review immediately, complete a DOC-2466 – Incident Report (WICS), and document in the Medical Chart, Progress Notes Section, or on a DOC-3021D – Psychology Progress Notes (Non-Contact), in the PSU Record, when an inmate patient attempts in any way to damage any part of the HCR, or if an inmate patient behaves inappropriately in any manner by words or actions. Request assistance from a Correctional Officer, as needed, for the safety of the employee, and to protect the integrity of the HCR. Record information about inappropriate behavior in the BHS HIPAA Compliance and Review portion of SharePoint.
- J. Schedule an additional appointment if the inmate patient cannot complete the review in the routine 30 minutes permitted for a review.
 1. HSU, DSU or PSU shall make reasonable efforts to schedule the follow-up appointment within 30 days of the original request.
 2. Contact the Health Information Supervisor/ HIPAA Compliance Officer if follow-up appointment cannot be scheduled within 30 days of request.
- K. The DOC has no obligation to obtain for the inmate patient copies of records from an off-site appointment that have not been received by the DOC. Advise inmate patient to contact the off-site provider to obtain copies.
- L. Reporting a Breach
 1. If an inmate patient reports finding a document about another inmate patient during a record review, remove the document immediately.
 2. Notify the HIPAA Compliance Officer of the breach via email including:
 - a. Name and DOC number of the inmate patient who viewed the document,
 - b. Name and DOC number of the inmate patient whose document was found misfiled.

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- c. Description of the document.
- d. Date/time and circumstances of the incident.
3. If the inmate patient whose document was misfiled is at the facility, file the document in the correct HCR.
4. If inmate patient whose document was misfiled is not at the facility, determine location in WICS and forward document to location of the HCR.

V. Assessing Fees for Copies and Documenting Provision of Copies

- A. Copy fee is 15 cents per side of each page.
- B. Do not make copies before verifying, per facility procedure, that the inmate patient has funds to pay costs, or has a legal loan related to the documents being requested.
- C. An inmate patient may refer to DAI Policy 309.51.01 to obtain copies of documents filed in the Health Care Record, without paying for the copies at the time the copies are provided, only when the inmate patient can demonstrate a clear need for the records for the litigation for which the loan has been approved.
 1. Contact the Business Office and ask for the information provided by the inmate patient on the DOC-1290 – Loan Application & Repayment Agreement that describes the nature of the case.
 2. Litigation must relate to inmate patient's medical, dental and/or mental health conditions, and treatment of those conditions.
 3. Contact the Health Information Supervisor/HIPAA Compliance Officer for assistance in determining whether the copies requested relate to the legal loan.
- D. Upon payment by the inmate patient, or when a legal loan applies, provide the copies directly to the inmate patient, or place them in a sealed envelope for delivery to the inmate patient.
 1. Label the envelope as being from the HSU/DSU/PSU.
 2. Affix the sticker: "Open and inspect in presence of inmate" to the outside of the envelope.
 3. Write the correct first and last name of the inmate patient, DOC number and housing unit on the envelope. It is a reportable HIPAA breach if the copies are provided to the wrong inmate patient.

VI. Documentation of Record Reviews

- A. On the DOC-1163A – Authorization for Use and Disclosure of Protected Health Information (PHI), or on a sheet attached to the form, document the information described below.
 1. Brief description of record inspected or copies provided; e.g., PSU Record or volume 3 of the Medical Chart.
 2. Date and time of inspection of record.
 3. Enter initials of employee, date and time.

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Chapter: 500 Health Services		
Subject: Access by Inmate Patients to Their Health Care Records		

B. File the DOC-1163A in the Medical Chart – Consents/Refusals Section, PSU Record – Legal Documents/Consents/Outside Records Section, or Dental Record – Consents/Authorizations/DJC Documents Section.

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:** _____
Cathy A. Jess, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.50.08	Page 16 of 16
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Access by Inmate Patients to Their Health Care Records		
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

DAI Policy 500.50.08 – Access by Inmate Patients to Their Health Care Records
Attachment 1 – Example of Redacted Document
Effective Date: 08/25/14

DEPARTMENT OF CORRECTIONS
Division of Adult Institutions
DOC-2295 (Rev. 1/2009)

WISCONSIN
Wisconsin Statutes
Chapter 980

SPECIAL PURPOSE EVALUATION REPORT

OFFENDER NAME (Last, First) XXXX	DOC NUMBER XXX	DATE OF BIRTH XXX
FACILITY NAME XXX Correctional Institution	DATE OF EVALUATION 6/4/2010	DATE OF SPE REPORT 6/22/2010
NAME OF EVALUATOR	[x] INITIAL SPE [] SPE RE-EVALUATION	[] SPE "YES" [x] SPE "NO"

REDACTING NOTE: This document contains references to the PSI Report which would have to be redacted prior to permitting an inmate to review and/or obtain a copy, and prior to disclosing this document. Strike-outs show the redacted PSI information. Other information has been deleted or revised with an "X" to protect the identity of the subject of this report. The Reason for Referral, Informed Consent and Information Reviewed sections do not refer to the PSI Report, so would not be redacted.

Reason for Referral

The subject is a X female who was referred for a psychological evaluation in order to determine her potential eligibility for civil commitment as a Sexually Violent Person as that term is defined in Chapter 980 of the Wisconsin Statutes. According to available records, the subject was convicted in X County Circuit Court on one count of First Degree Sexual Assault of a Child. The subject was initially placed on 20 years probation to be served concurrent with a previously imposed sentence of five years to the Wisconsin Prison System on a charge of incest also charged in X County Circuit Court. Again, according to available information, the subject was formally revoked from probation supervision in April of 2000, and was re-sentenced on count one of case X First Degree Sexual Assault of a Child receiving 15 years to the Wisconsin Prison System on June 23, 2000. According to available records, the subject has a current calculated Mandatory Release date of July 18, 2010 and a Maximum Discharge date of February 22, 2015.

Informed Consent

Prior to the clinical interview, the subject was informed of the following:

- The purpose of the present evaluation is to assess whether or not the subject meets the requirements for commitment under chapter 980 from the Wisconsin statute also known as the sexually violent person's law.
- The subject has the right to not participate in the examination or answer any questions posed in the form of direct interview or through psychological testing.
- The subject's decision regarding participation in the interview will not be used against them in the preparation of this report.
- Nothing said during the evaluation would be confidential and could be repeated either in written report or in testimony.
- The examiner would be writing a report concerning potential commitment under chapter 980 of the Wisconsin statute based on whatever relevant information the examiner could obtain through the review of any and all records pertaining to the subject's criminal offense history. Record review and the evaluation would be completed whether or not the subject agreed to participate in the evaluation process. Records reviewed could include any and all Pre-sentence Investigations completed as part of the subject's criminal offense history, as well as records pertaining to drug and alcohol assessment and treatment, and educational assessment.

The subject reported that she understood the provisions of the informed consent and was able to reiterate these provisions to both this examiner and to X, PhD who was also present at the time of the clinical interview. Despite the subject's assertions that she understood the provisions of the informed consent, it became clear that due to her obvious cognitive limitations a full understanding of the nature and purpose of the present evaluation, as well as inherent limitations on confidentiality associated with her participation in the present clinical interview was limited; however, after answering all questions the subject posed regarding Chapter 980 and the purpose of the clinical interview, it was her decision to participate in the examination. The subject then signed the Special Purpose Evaluation Informed Consent so indicating.

Information Reviewed

The following materials were reviewed in the preparation of this evaluation: The subject's Department of Corrections Institutional files including the Social Services file, Legal file, and Psychological Services file. In addition, this examiner had an opportunity to review materials contained in the subject's probation and parole file, as well as making attempts to consult with the district attorney's office in X County. It is the opinion of the present examiner that the quantity and quality of information contained within the subject's Department of Corrections files, where of a level of sufficiency which allows for the opinions offered herein.

Sexual Offense History

REDACTINGNOTE: In the following paragraph, the psychologist indicates which information was contained in the PSI Report, so only that information is redacted.

As summarized in the End of Confinement Review Board Summary dated December 16, 2009, as well as from information obtained from the ~~Pre-sentence Investigation~~ completed in July of 1991, and in the ~~Pre-sentence Investigation~~ completed in August of 1991, as well as information summarized in the Criminal Complaint prepared for case XXX and filed in X County Circuit Court, the subject was charged with one count of Incest relating to behavior which reportedly occurred between June of 1989 and January of 1990 involving her then 6-year-old daughter and 4-year-old son. As a result of this charge and conviction, the subject was ordered to serve five years in the Wisconsin Prison System. ~~As noted in the Pre-sentence Investigation completed in July of 1991, the initial Criminal Complaint included two counts of Contributing to the Neglect of a Minor Child, one count of Sexual Contact with a Child Under the Age of 13 with these three charges dismissed as a result of the subject entering a plea of Guilty to one count of Incest. All of these charges related to the subject, over the dates reported above, engaging in ongoing sexual contact with her then six year old daughter and four year old son. Through the use of anatomically correct dolls, her daughter explained to investigating authorities that she and her brother had been asked to undress and lay down beside their mother on the bed. They were then instructed to simulate penis to vagina intercourse with her brother lying on top of his sister. According to the children, the subject had her 4 year old son lay on top of her placing his penis into her vagina. Additionally both children reported that their mother had them suck on her breasts.~~

REDACTING NOTE: In the following paragraph, it appears that all the information is from the PSI Report, so the entire paragraph would be redacted.

~~As further summarized in the Pre-sentence Investigation completed in July of 1991, the subject initially denied the allegations of sexual abuse as reported by her children. Eventually, the subject underwent a polygraph investigation during which time she admitted to having engaged in sexual activity with both her 6 year old daughter and her 4 year old son. She also admitted to having the 4 year old son lie on top of her and placed his penis near her vagina. She also admitted that she had observed her son and daughter engaging in penis to vagina intercourse between 25 and 30 times; however, she reported that she had told them to stop engaging in this behavior, but then made no follow through efforts to separate the children. It was further noted in the Pre-sentence Investigation that the subject returned to a total denial of her involvement in the offenses for which she was charged insisting that she only plead guilty to Incest in order to reduce the number of charges she faced upon her lawyer's advice. She insisted that her daughter was lying as to the allegations. She also claimed to love her children and that she would do anything for them.~~

REDACTING NOTE: In the following paragraph, the psychologist refers to a clinical evaluation, and not the PSI Report, so it would not be redacted.

At the time of the present clinical evaluation, the subject stated that she feels extreme shame and guilt over what she did. She specifically reported "I can't forgive myself for what I did." Admitting that she forced her oldest daughter and son to engaged in intercourse with each other. She then went on to state that she would never do it again.

REDACTING NOTE: In the following paragraphs, the psychologist indicates when information from the PSI Report is being cited, so that part of the paragraph would be redacted.

According to information contained in various Department of Corrections records including the End of Confinement Review Board Summary and the ~~Pre-sentence Investigations~~ noted previously, the subject was charged in X County Circuit Court with one count of First Degree Sexual Assault of a Child and two counts of Bail Jumping (X) These charges were eventually amended to one count of First Degree Sexual Assault of a Child and one count of Bail Jumping for which the subject was found Guilty initially receiving a sentence of 20 years probation concurrent with her sentence imposed in case X as described above. On the same date, the subject received an additional five years of probation supervision on count two, Bail Jumping to be served concurrent with the sentence of 20 years probation pertaining to count one (case X). Eventually, the subject was formally revoked from probation supervision receiving a sentence of 15 years to the Wisconsin State Prison System imposed on January 23, 2000 and a five year sentence to the Wisconsin State Prison System imposed on count two, Bail Jumping, also on January 23, 2000.

The events of sexual assault leading to her charge of First Degree Sexual Assault of a Child reportedly occurred in X, Wisconsin while the subject was on bail relative to the charges filed in case . Specifically, the subject during the course of her pending legal matters related to her charge of Incest, engaged in a pattern of fondling a 4-year-old nonrelative male's penis on several occasions. According to available records, the subject had access to the victim as he was the child of neighbors who lived on the first floor of the duplex where the subject was residing. ~~According to information contained in the Pre-sentence Investigation completed in August of 1991, the victim's father reported to the X Police Department that his 4 year old son indicated that the~~

~~neighbor (the subject) played with his “wee wee.” At first the father did not believe his son and let the matter pass. However, his son apparently reported similar events having occurred on four or five subsequent occasions resulting in the father reporting these allegations to the X Police Department. According to records reviewed, it was also reported that the subject had similarly touched the victim’s younger brother; however, due to the age and an apparent speech problem of this second victim, confirmatory information was unable to be provided to either his parents or the investigating police officer. As a result, the subject was charged with one count of First Degree Sexual Assault of a Child, and two counts of Bail Jumping. Records indicated that at the time of the investigation into these allegations, the subject denied any form of sexual contact with either the four year old victim or his younger brother. She did acknowledge that she had unsupervised contact with her eight month old nephew.~~

At the time of the present clinical evaluation, the subject indicated that, in fact, she had perpetrated the sexual assault of a four-year-old nonrelative male as reported in available records. She continued to assert that she is unable to forgive herself for what she did and again she felt as though she would never do this type of behavior again.

DAI 500.50.08 Access by Inmate Patients to Their Health Care Records
Attachment 2 – Redacting Instructions
Effective Date: 08/25/14

As discussed in the policy, information cited in a DOC document that was obtained from a Presentence Investigation Report (PSI) cannot be viewed by or copied for an inmate patient per Wisconsin law. If the reviewing employee finds PSI information in a document such as the DOC-2295, DOC-1490 or DOC-3473, the employee shall follow these instructions to redact the information which cannot be viewed by or copied for the inmate patient.

- Make a copy of the document containing the PSI information.
- Return the original document to the proper filing location in the PSU Record.
- On the copy, not the original, use a black permanent marker, liquid white-out or white-out tape to cover-up (redact) the information from the PSI.
- Make a copy of the above redacted document; i.e., the document on which a marker, liquid white-out, or white-out tape was applied.
- Shred the document on which the marker, white-out liquid or white-out tape was applied.
- Review the copy of the redacted document to determine that the redacted information cannot be read.
 - Sometimes when a black marker is used, words/numbers can be read on the first or second copy of the redacted document when held up to a light source.
 - Continue to blacken the redacted information on subsequent copies until redacted information cannot be read on the copy. Due to the increased sensitivity of the Multi-Function Devices, this has become a more frequent problem.
 - Shred all copies except for the final one on which no redacted information can be read.
- Attach a POC-52 Notice of Redaction and Withholding of Documents to the document(s) that has/have been redacted prior to the record review by the inmate patient, or before providing the copies to the inmate patient. Check the third box on the POC-052 indicating that information from a PSI has been redacted.